

APNA SWASTHYA APNI PEHEL, PARTICIPATORY RESEARCH IN ASIA

Year of establishment	1982
Founder	Rajesh Tandon
Area of work	Empowerment of the excluded through capacity building, knowledge building and policy advocacy
Location	New Delhi and Rajasthan
Website	www.pria.org

OBJECTIVE

Participatory Research in Asia (PRIA) aims to build capacities of citizens, communities and institutions, to enable a vibrant, gender-equal society.

GENESIS

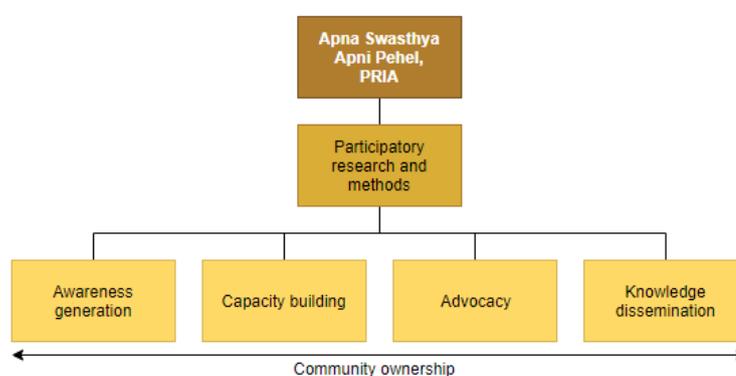
Dr Rajesh Tandon came across the methodology of participatory research during his PhD in Udaipur. He established PRIA as a node of a network of participatory researchers and practitioners called International Participatory Research Network. Today, PRIA has field offices in four states and linkages with nearly 3,000 NGOs to deliver its programmes on the ground.

THEORY OF CHANGE



WORKING MODEL

The working model of PRIA's health intervention— 'Apna Swasthya Apni Pehel'—is centred on using participatory research and methods for capacity building of individuals and communities, strengthening functioning of self-governance institutions (panchayats) and helping the community find local solutions to problems. Participatory research takes place when people are the subject, not the object. The interventions are constructed around four pillars:



- **Awareness generation:** Formation of Self-Help Groups (SHGs) of women, adolescent groups and holding regular meetings for community awareness generation
- **Capacity building and convergence:** Building and strengthening human and institutional capacities (panchayat officials, frontline health workers), convergence of roles and responsibilities of existing statutory committees, and conducting volunteer trainings
- **Advocacy:** Building an enabling environment starting with the panchayat all the way up till the state government
- **Dissemination:** Co-creation and dissemination of knowledge by synthesising learnings from different programmes and media attention

PRIA works in two districts and three blocks in Rajasthan. There is a project supervisor based in Delhi and programme officers located in the field offices. The frontline field staff at PRIA are called 'animators'. There are 12 animators for the health initiative. PRIA has also engaged 400 volunteers between 18–25 on an unpaid basis. From every gram panchayat, 3–4 volunteers have been recruited. About 30–40 volunteers report to one animator.

OBSERVATIONS

HIGHLIGHTS

- Bringing people together on a common platform and engaging them in discussions through local self-governance institutions, committees such as panchayat statutory committees facilitated by field functionaries leading to convergence and co-creation of a village plan
- Creating an enabling environment through continuous and multi-level advocacy with the panchayat and government along with media and civil society organisations
- Continuous monitoring of meetings and activities by volunteers and field staff from PRIA and 360-degree monitoring by village administration

AWARENESS-GENERATION AND VILLAGE PLANNING

Statutory committees: PRIA has built an army of volunteers from the community to collectivise people, activate and strengthen statutory committees like the Social Justice Committee (SJC) to create a sustainable environment of engagement between stakeholders and the community.

Convergence: Capacity building of committees formed under various government interventions, such as Village Health, Sanitation and Nutrition Committee, on their roles and responsibilities, and facilitating meetings and discussions among committee office bearers leads to a convergence of ideas, budgets and personnel involved in delivering public health services to communities.

Mandals: PRIA has facilitated the formation of Mandals/Self-Help Groups (SHGs) for women, adolescent girls and young men by Anganwadi Workers (AWWs) and volunteers for discussing issues faced by them and raising them in the gram sabha. Women's SHGs also build savings and get loans for small businesses.

Activated gram sabha: To ensure participatory village planning and monitoring, PRIA mobilises village community members to participate in gram sabhas. In the sabha, the village community comes together along with the sarpanch and Village Development Officer (VDO) at least four times a year. A quorum of 10 per cent of the village population needs to be met for the sabha to take place. If the quorum is not met, then the sabha gets postponed to another date.

Village planning: The Gram Panchayat Development Plan (GPDP) was conceived as an effective tool for village planning, initiated by the Ministry of Panchayati Raj in 2015. It is an annual plan for each panchayat which is presented in the gram sabha for the village community to discuss. A technical support group at the block level provides technical help with preparation and work begins on the proposed activities once the plan and supporting budget is approved. After the GPDP is finalised, a panchayat may prioritise 3–4 activities for execution. PRIA first showcased GPDPs as part of the micro-planning process. PRIA has also developed a framework for how to work with panchayats. Funds are allocated by the 14th Finance Commission, under Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA) and the Pradhan Mantri Awas Yojana (PMAY) based on the activities approved by the village community in each panchayat's GPDP.

ENABLING ENVIRONMENT

Advocacy is done at all levels of the government starting from the sarpanch and VDOs at the village level. At the block level, the Block Development Officer (BDO) is the key functionary that PRIA interacts with. At the state level, there is a separate team that constantly works on data-based advocacy with state officials, including sharing of case studies, best practices and proposing locally-generated solutions to problems. At the national and international level, PRIA is part of several committees, takes part in conferences, engages with media and other civil society organisations.

MONITORING

- **Annual Panchayat Report (APR):** PRIA prepared the first APR that was presented in the parliament. As a follow-up, every panchayat is now required to prepare an APR. The report consists of everything that the panchayat did in the previous year, including its performance, the money it has received and utilised. People will also have access to this and can hold the government accountable.
- **Zero cost monitoring:** PRIA has encouraged inclusion of zero-budget activities in the GPDP to enable tracking and monitoring by the sarpanch of development issues that are important to the community. Planning at the village level is traditionally restricted to infrastructure and service delivery, which are cost intensive. PRIA aims to include human development activities in the plan that requires no cost. PRIA then shares a line item of zero-budget activities including social monitoring of immunisation, health status of women and children, referrals, nutritious food take up, cleanliness, etc.

The Ward Panch and the Sarpanch are trained to carry out monitoring through activities such as visits to Anganwadi Centres (AWCs), reviewing collection of data and checking registers regularly. This ensures accountability in the following meetings and better overall service delivery.

- **Community monitoring:** Once the community is aware of its rights and knows its interests, it can track and monitor the progress of work itself, which ensures accountability. PRIA facilitated sharing of resource maps (allocation of funds by the government to the panchayat) with the community to deliberate and take action on in the gram sabha.
- **WhatsApp groups:** WhatsApp groups have been started for volunteers for information sharing. There are two volunteer groups and two additional girls' groups that are monitored by the respective animators.

IMPACT

- Participation of women in gram sabhas has increased in the intervention blocks: from 36 per cent to 41 per cent in Govindgarh block and 21 per cent to 49 per cent in Banswara and Talwara blocks¹
- Women are voicing and protesting lack of quality and timely maternal health services in their panchayats²
- Community-led initiatives and infrastructure have helped reduce MMR (SDG indicator 3.1.1) and percentage of pregnant women aged 15–49 years who are anaemic (SDG Indicator 2.2.4)³

KEY TAKEAWAY

Activating and strengthening local governance institutions (panchayats), and convergence among existing structures, committees and mechanisms can bring about higher awareness and the ability for communities to take charge, prioritise and come together to resolve their issues.

¹Annual Report 2018–19, PRIA,
https://www.pria.org/knowledge_resource/1569244473_Annual_Report_2018-19.pdf

²Ibid

³Ibid