Current Projects

Lok Swasthya SEWA Trust 2018-2019

A) Health

1. Occupational Health and Safety (OHS)

LSST provides preventive and curative health services, by, for and with informal women workers. Over the years, occupational health and safety of our members has become an integral part of LSST’s health programming, so that informal women workers can focus on maximizing their productivity and increasing their incomes without being restricted by work-related health problems. The Occupational Health and Safety Programme aims at identifying and mapping various occupational hazards (i.e. physical hazards, chemical hazards, biological hazards, ergonomic hazards, and psycho-social hazards) and providing primary prevention of occupational health issues for home-based, garment workers, incense stick rollers, bidi rollers, kite workers, and agricultural workers.

2. SEWA Shakti Kendras (SSKs)

SEWA Shakti Kendras are community-based empowerment centres that seek to improve awareness and access to health and social security for women in the informal sector through increased and improved coordination with government functionaries and institutions. These centres serve as a focal point for all community-based activities led by women and young people, which has triggered a process of exercising democratic rights and active participation at the local level leading to enhanced access to entitlements and rights in both rural and urban areas.

3. Yuva Mandals or Collectives of Adolescents

LSST organizes adolescent girls and boys to form their own collectives in their communities, so that they can take an active role in being agents for change and drive sustainable action in their respective communities. Recognized within communities as “kishori mandal” and “Kishor mandal”, these collective groups are educated in the importance of organizing and building collective strength and bargaining power. They are provided with capacity-building workshops, exposure visits, and vocational trainings to develop a sense of self-reliance and take leadership in their communities. These mandals also serve as safe spaces for support and solidarity, and by promoting empowerment and leadership qualities in the members, enable them to act locally on health and related developmental issues.

Giving adolescents and young people the opportunity to develop and practice leadership skills is also a long-term approach to ensuring that our programmes remain sustainable and that young people actively participate and take up leadership roles in the development of their communities.

4. Mahila Arogya Samiti (MAS)
LSST has been instrumental in identifying women and young girls to become members of MAS. Total 75 MAS members have been trained as per our own guidelines in five wards (Shahpur ward, Behrampura ward, Rajpur ward, Odhav ward and Ambawadi ward) in Ahmedabad city. Regular meetings and follow-ups are done by LSST with all the 75 MAS members.

5. Rudu Gam

From the experiences of running SSKs for information provision and linkages to government schemes, we have set up four SSKs, two each in Dholka block (Transad and Bhetawada) and Daskroi block (Bhat and Hirapur). Our grass root leaders were able to identify the needs of the local communities and generate demands from the grassroots through various platforms of awareness and decision-making.

The centres seek to improve the community’s access to information and services on health and social security entitlements and also serve as a focal point for all community based activities that are led by women. The various activities being undertaken at the SSK will focus on women to assist them in becoming self-reliant. It will additionally benefit their families who will also obtain entitlements and services.

6. Sahakari Shaktikaran

LSST and partner organizations worked on community based psychosocial support program with the aim to extending psychological and social support through task shifting at the grassroots level. The program started off with need assessment at grassroots level, recruiting and training Sakhi’s (community-based counsellors) by a team of mental health professionals. The program aimed to empower informal women workers by providing them with livelihood opportunities and skill development, and education around mental health and Covid-19. After the second wave the team worked rigorously to spread awareness about Covid-19 and offered an empathetic ear to people in distress in their respective communities. The team worked on referrals for people in need of medical assistance, linkages with government schemes and services.

B) Child Care

SEWA’s Child Care Centres have been running in Ahmedabad city since the past 32 years, catering to the child care needs of informal women workers with children in the age group of 0-6 years. These centres are open from 9 am to 5 pm keeping in mind the work timings of the informal women workers. While good health and nutrition are essential to development, especially during the first few years, these services alone are inadequate for the overall holistic development of children. Parenting and family support, the environment at home and quality child care, especially for working mothers, are provided to get children off to a head start in life. The centres’ activities include providing healthy and nutritious food, health care and pre-primary education for the children, parents’ meetings held regularly to update them on the child’s health and performance, and monitoring the growth and development of the child.
1. Samagra Balvikas

Through this project, we highlight the unmet need for quality, full-day, community-based, participatory childcare, which responds to the needs of informal women workers. Informal women workers and their families, especially young children were the worst hit by the COVID-19 pandemic. By and large the project focused on providing services that enabled parents and caregivers to manage the emerging issues that impacted the children, around the ongoing pandemic. The intervention is being carried out in 5 districts of 4 states (two in Gujarat; one each in Kerala, Odisha and Meghalaya). This project gave us the opportunity to work in multiple locations and work on the issues of early childhood development through an integrated approach. The multiple needs of children have to be met through interventions that take into consideration education, health and nutritional need.

The project underscored the need to invest on devising a mechanism which enables digital communication and methods. This became clearer after the onset of the third wave. However, we also understood that a hybrid model will have to be followed as there are still challenges with regard to the use of technology.

2. Swavlamban

Following the ethos of SEWA, this Swavlamban initiative is born out of the need for a better equipped yet cost effective solution to childcare for the informal working mothers and will be a one of its kind childcare centre providing time-based crèche facilities that operates in two slots – morning and afternoon.

The ICDS centres and preschools across Gujarat remained closed till March 2022 due to Covid-19. In April, our team-initiated efforts for establishing the new Centre in Nava Vadaj area. The balsevikas (childcare workers) went through an intensive training in guidance with PRATHAM – an organization that works on literacy and education for children. This training was followed by a refresher training in September 2022 and topics like early childhood care, overall growth and development of children, nutrition, cognitive and motor skills development were taken up. Special interaction with fathers of potential students was conducted to make them understand the importance of childcare facility in their area, how this Centre is different from other 11 centres and how the mothers can work extra hours if they send their children to these centres. 25 children in the 0–12 age group were identified who have working mothers. Identification of balsevikas/creche workers (people who will run the centre) were done thereafter.