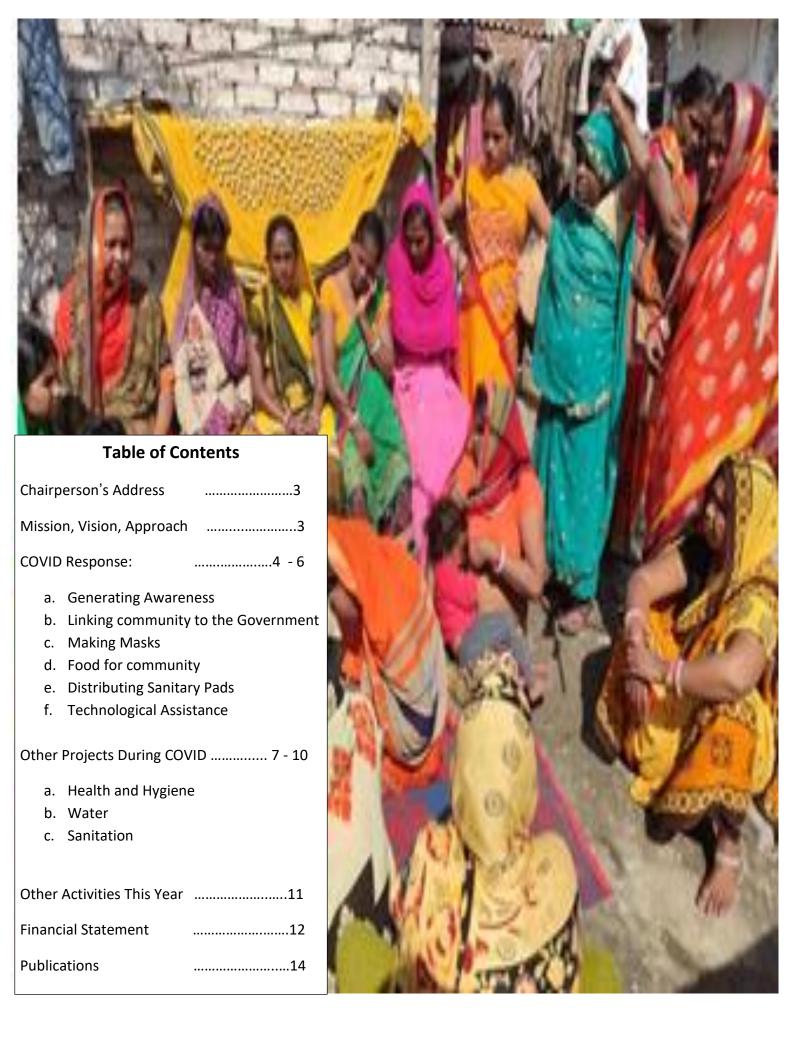
Annual Report 2020-21

CENTRE FOR URBAN AND REGIONAL EXCELLENCE





Dear Friends and Colleagues,

2020-21 has been a year of learning. As the uncertainties and challenges unfolded, each situation gradually offered new learning for all of us at CURE. This year of our collective fight against the raging corona virus throughout the country brought continuous challenges for all stakeholders – communities in urban areas, CURE staff, ULB officials and our patrons. Resilience to overcome these situations expanded as the demands of COVID-19 and the subsequent lockdown increased for migrants returning to their home states and those in urban settlements. CURE's work this year has been predominantly in saving lives and livelihoods. It has also brought out the imminent need of integrating resilience into all development work at CURE. We developed new strategies to leapfrog the challenges, discussed them with the community to fine-tune them as per their needs and advocated with relevant government bodies to upscale the tested initiatives for the rest of the area.

I would like to make a special mention of two important results this year:

- 1. Community's new-found agency in organising themselves to address their problems and demand services and
- 2. Government's involvement in promoting practical and locally sustainable solutions for water scarcity at the settlement level.

These consolidate the continuous and dedicated work done by CURE for years.

I invite you to stand with us as we continue to ensure equal level of basic services for thousands of people in urban settlements and assist them live in dignity. The journey remains uphill, but I am sure proactive and technical assistance of CURE staff, pragmatic solutions of communities and dedicated will of government to serve the community will help us reach our goal.

With warm regards Dr. Renu Khosla

Mission Statement

CURE's mission is to achieve three goals; reconnected urban societies that take informed decisions to ensure sustainable urban development; strengthened local agencies with capacities for participatory community development and real evidence built from the ground up for effective service delivery.

Vision Statement

CURE India envisions a world where all people are equal and must get access to an equal level of services, where every home has taps and toilets to live a life of dignity and where sustainable improved environment and consequent well-being exists.



COVID RESPONSE

Covid-19 pandemic and the subsequent lockdown proved to be extremely challenging for the vulnerable communities during 2020-21. Everyone stayed at home as there was threat to life and health but in doing so most of them lost their livelihood, which affected them and their families drastically.

At this time Centre for Urban and Regional Excellence (CURE) focussed more on helping people's problems related to livelihood, health and access to facilities. Immediate support to the affected took precedence over CURE's regular development work. CURE tried to alleviate sufferings of the people during this time through various means:

a. Generating Awareness



CURE team spread awareness about COVID-19 using information, education and communication(IEC) material through WhatsApp and initiating discussion on digital platforms in various districts.



Relief material kits, including hand

sanitizers, masks and gloves were provided to corona warriors to support Shamli Nagar Palika Parishad (SNPP). Proper handwashing techniques were conveyed through

distribution of IEC materials, mostly to local shopkeepers and vegetable/fruits vendors, to prevent the spread of disease. Posters were also posted in residential areas, public toilets, railway stations, beside public water taps or hand pumps and near washbasin so that these are visible.

In Dharamshala, banners/posters on handwashing, saving water and general hygiene in local dialect were released by the Mayor of Dharamshala Municipal Corporation (DMC) during a Zoom meeting hosted by the Dharamshala Coordinator. Representatives of Gamru, Dari, Sakoh, Sidhpur, Area Level Federations also attended the meeting.

b. Linking Community to the Government



The CURE team circulated the details of the schemes introduced by the Government of India and of different states on the WhatsApp groups for every slum. They helped the residents to understand the details of the scheme and also provided technical support in to register their names by filling forms to avail these schemes like getting a ration cards, gas cylinders, dry ration, getting government provided cash assistance to poor or loans to

daily wagers and shopkeepers. In South Delhi, this numbered around 200 people and 60 in north

c. Making Masks

In Dharamshala, Krishna Kunj Area Level Federation (ALF) of 11 women self-help groups with 55 members was federated by CURE. They were supported to generate awareness on Water, Sanitation and Hygiene (WASH) and (COVID??) safe practices. CURE assisted to increase livelihood opportunities for the poor women. The ALF members were trained to stitch cloth bags and masks from unused and discarded clothes as a livelihood option. They supplied over 4,000 single-layered masks to the DMC during the pandemic, when the municipal corporation could not provide masks to their frontline workers. These masks were distributed to the city's safai karamcharis (sanitation workers), the police personnel, hospitals' non-medical staff and ASHA



d. Food for the Community

workers.

CURE facilitated the initiative of various groups to feed the needy by helping them set up kitchens with due diligence to regulations like

distancing, gloves, safe packaging and safe distribution.

Self-help groups (Saheli group) in Tajganj arranged a community kitchen which fed about 100-150 persons daily. They also raised Rs.2,500 for essential food items for

daily wage earners unable to meet their daily food needs.

Many migrants, unable to pay the rent due to loss of income, were evicted from their homes. They overcrowded the DUSIB night shelters. The community in Taliwalan and Haiderpur Badli Morh took the responsibility of feeding them through a community kitchen by pooling

private resources. These private kitchens served around 600 families regularly.

CURE also collected food from the community and distributed it to the needy in Tedhi Bagiya, Kalindi Vihar and Sati Nagar.

CURE connected migrants living on rent, with no ration cards to the government portal, local MLA and Councillor to provide relief and ration. Private resources and efforts were mobilized to facilitate ration delivery to around 2000 households in North, South and East Delhi by CURE.

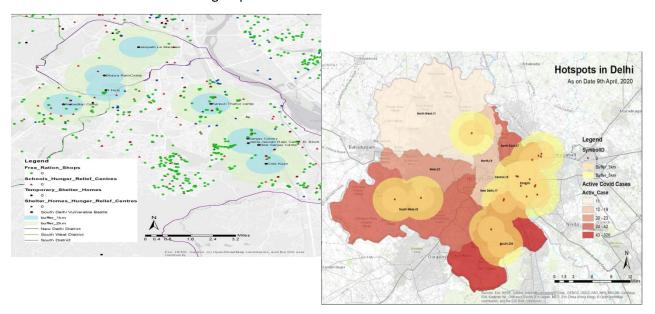
e. Sanitary Pads for the Women and Girls



A survey conducted by CURE revealed that the construction, textile and even shoe industries closed causing loss of jobs and wages for the migrants during the lockdown. Access to sanitary pads was a casualty suffered by many women and girls. CURE coordinated with the MLA and Vyomini, an NGO working on menstrual health, to provide menstrual kits to women in three settlements.

f. Technological Assistance

During the lockdown CURE facilitators communicated with the community through 90 WhatsApp groups with a little above 2,200 participants. Even, government officials unable to reach these settlements were added to these groups.



CURE's GIS application SANMAN (SANitation MANager) supported the Delhi Administration and the Urban Local Bodies (ULBs) in their effort to better monitor and manage the COVID containment protocols.

SANMAN was used as visual tools that allowed the authorities to efficiently monitor the management protocol in the hotspots and containment zones. These maps helped the authorities in identifying and locating the relief facilities such as Free Ration Shops, Schools as Hunger Relief Centres, Temporary Shelter Homes, location of maximum vulnerable groups and more. These maps also allowed the needy to access food and shelter while remaining safe.

HEALTH & HYGIENE

During COVID time CURE worked towards generating awareness related to COVID appropriate behavior and address vaccine hesitancy among residents of urban slums. After understanding specific need of the community and the reasons behind it, CURE acted as a catalyst to rationalize and improve access to need-based customized information to residents of the settlement.

In the 20 slums of Delhi, where CURE worked on **PURPOSE project**, lack of COVID appropriate behaviour and vaccine hesitancy were identified. CURE developed information videos where residents' video recorded questions were used for virtual consultations with doctors. Doubt clearing sessions on COVID protocol and vaccination and information on COVID appropriate behaviors were also shared. This built vaccine confidence and uptake while simultaneously encouraging COVID appropriate behavior.

Key community champions and influencers of the community, including the Faith Leaders/ Local Influencers/ ASHA/ Anganwadi worker/ SMC are mobilized to build vaccine trust in the community.

CURE, working on **Hygiene Behaviour Change Coalition (HBCC)** project in 97 slums of Delhi conducted awareness generation activities on appropriate hygiene principles and protection from corona virus because of the increased risk of COVID infection due to lack of access to proper water, sanitation and hygiene facilities.

Recognising the demand of community CURE shifted to online apps like TakaTak and Mauj, commonly used social media platforms by slum residents, to access these urban communities during pandemic. Information was generated using videos on good hygiene practices.

HEALTH & HYGIENE

Online activities with children were conducted to train them in appropriate behaviour during COVID-19. They were even encouraged to make their own comics on this topic.





Bridging the gap between

government services (which had ended due to negligence during COVID) and its beneficiaries CURE stepped in with the USAID assisted **Samagra project**. Family Planning, Tuberculosis, Mother and Child Health and COVID were the four target areas covered in 87 slums. CURE identified vaccine hesitancy in the community, understood the reasons and provided guided information, thus improving access to vaccines.

A street that could serve as a model on WATSAN or health issues was conceptualized and a roadmap was developed. Participatory tools and Learning has been decided as an approach to achieve the same.

To improve access to affordable health services CURE implements the **FINE** (Financial Innovation to Empower Women for better health) project in xx slums of Agra and Delhi. The project also empowers women and encourages entrepreneurship among them. Women in the urban slums form self-help groups called 'Saheli Groups'.

Rooted in the belief that the skilling and market linkages will help livelihood generation, better nutrition and health care (planned allocation of savings), women with specific skill sets are trained by CURE in healthcare, footwear, tourism, beauty, apparel making, management, logistics, media, etc.

Income from these groups can be used to create a pool for healthcare. The money pooled as health savings in a group can be used by its members in case of need at a lower interest rate.

CURE's contribution in improving access and quality of water in households and schools in urban slums has been supported by USAID funded PASS (Pani Aur Swachhta mein Sajhedari) project and FINCHAM (Finland Chamber of Commerce) supported 'Water Resilience Schools' project.

Under the Water Resilient Schools a socially and environmentally responsible ecosystem is developed and ecological restoration skills are imparted to the students to convert the existing school buildings and spaces to social ecosystems. This empowers the students to create resilient schools and, through extension, making changes in their homes and neighborhoods.

This year the PASS project improved water supply access by laying pipelines in various urban settlements in North, East and South Delhi. Discussion/letters of community people to the relevant authorities like MLA or Delhi Jal Board were facilitated by CURE.

New water filtration equipment (reverse osmosis) installed in North Delhi

by Delhi Jal Board to provide potable drinking water to the residents. The government also adopted CURE's tested Rain Water Harvesting into the design, thereby decreasing complete dependence on ground water sources.

New designs and initiatives were picked up by government (Delhi Development Authority) after CURE's exchange of ideas in replenishing ground water by construction of a recharge pit system near the pond of stagnant water.

Involvement of community has increased in asking for their amenities and rights from government. Women in Agra protested in front of Ward Councillor's house and got new pipelines constructed within 5 hours.



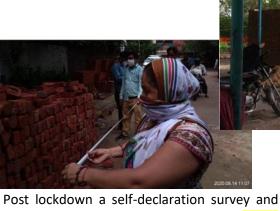
SANITATION

CURE aimed to ensure that each community member was aware of proper hygiene and sanitation practices which would help the settlements achieve an open defecation free status. Since corona

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virus can also spread through the faeces of an infected person the CURE team approached every house to construct toilets.

Community members proactively wrote letters to ULBs to construct, extend or repair toilets and improving water facilities in them.



Post lockdown a self-declaration survey and toilet audits were conducted based on CT/PT

matrix and transit walks for declaring settlements as ODF/ODF+/ODF++. Four out of nine settlements were declared ODF/ODF++.





The pink toilets which boosted amenities catering to the female members ,like the grab bars, mirrors, Sanitary Pad dispensing machine, dustbin and hooks in every cubicles, were developed at a couple of settlements like Shastri Market and Sanjay Basti.

This initiative has been up-scaled by the government.

Sanitation effort spread to different cities. SNPP introduced proper handwashing techniques through various media, like stakeholder WhatsApp group, to disseminate proper knowledge and acquire on ground information within the city.

Other Activities This Year

Visit by Ford Foundation Group

A team of Ford Foundation visited the Jain Mandir Basti to understand more about the type of diseases prevailing in the area. They interacted with the community members to get a few insights, besides collecting information from each family in the settlement.





INCLUDe

Indian NGOs for Community Led Urban Development (INCLUDe) is a network of prominent NGOs and research institutions in community-led urban habitat development across the country. The secretariat of INCLUDe is hosted by CURE. In 2020-21 INCLUDe, in partnership with Cities Alliance, has developed and designed:

- 1. A compendium of eight good practices on community led urban development in India
- 2. Five policy briefs along with a cost benefit analysis from the perspective of the most marginalized around issues of land tenure, access to finance, housing, livelihoods and community participation and governance.
- 3. Round tables and consultations with city managers and NGOs on inclusive development
- 4. An Urban School on community led urban development for NGOs and urban practitioners.

DO we have photos related to these activities?

INCLUDe operates as an informal network in an effort to share interesting work on the ground, deliberate on critical urban issues and strengthen urban conversations. Members include SPARC, Mahila Housing Trust, CURE, Shelter Associates, South Asia Home Net, Habitat for Humanity, India and YUVA. SPARC is the chair of INCLUDe steering committee.

BReCOM

Building Resilient Urban Communities (BReCOM) enhances capacities in institutes of higher education in the country. A series of professional development programmes (PDP) and open course ware were designed by the seven member organizations including higher education institutions like the School of Planning and Architecture, Vijaywada and Bhopal, NIT Hamirpur, KRVIA Mumbai. CURE and SPARC, as the NGO partners for this platform, are providing the experiences from the field to strengthen the PDPs for the urban practitioners. CURE held dissemination workshops for the PDPs with educational institutes.

BReCOM is a part of a project funded by Erasmus University and European Union in collaboration with DUK (Danube University, Krems).

Financial Report

ACTION IN FIELD





Awareness Drive for Children





Training in Community on Menstrual Health Management



Livelihood Discussions with Dhobighat
Women

Publications

Participatory Learning and Action (PLA): Handbook was designed and compiled as a field guide for Community Led Urban Development/ PLA Manual. It focuses on meaningful community participation, contains tools for understanding communities with empathy. It empowers them to make informed decisions and to build a collective community perspective to find solutions to transform their lives.

Compendium of Articles on Migrants in India:

To know more about our programs and support us please visit us at: https://cureindia.org/

To meet beneficiaries of our program and staff please contact us between Monday to Friday (1000 hours to 1830 hours) at:

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