FIELD WORK PRACTICUM IN SOCIAL WORK : EMERGING CONCERNS, CHALLENGES AND OPPORTUNITIES

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Community Level Monitoring Exercise (CLME) as a Part of Field Practicum

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Introduction

The paper written on the basis of my working experiences in the various development programmes like:- Improving Child Survival, Banswara, Rajasthan, District Poverty Initiative Programme, M. P. Jharkhand, Tribal Development Porgramme and Chhattisgarh Development Porgramme etc. In this paper I would like to present that through the community based approach people can learn more non-formally.

In this paper I am highlighting the work experience of Improving Child Survival Programme of ICDS & Health Departments, Banswara, Rajasthan. The Integrated Child Development Scheme (ICDS) was conceived as a massive community based outreach programme. The programme is seen as an opportunity where women in the community can be empowered by learning through community based approach. So that they can improve their own situation as well as that of their children. In the community based approach, Community Level Monitoring Exercise (CLME) is best process for learning and empower of rural women.

What is CLME?

CLME is a tool, which is providing knowledge, critical analysis of the situation, help in plan and act on the critical issues of their situation and empower them. This process helped in bringing more women to the A WC to avail the services. Another way we can say that the Community Level Monitoring Exercise (CLME), is a process whereby the community and the services providing together:

- Analysis the situations
- Define problems
- Identify the cause for theses problems
- Suggest possible local level solutions
- Develop action plans

Why CLME

If the community is involved in understanding their own health and nutrition situation, they will be motivated and feel the necessity to act, The ultimate aim of such exercise would be to encourage the community to take responsibility for monitoring the health and nutrition status of the women and children in village.

The CLME is on such participatory approach that has evolved out of the rural development exercise. During the concurrent field work under the MSW course, the social worker trainees can do in allotted area by facilitating to the exercise and also they can learn more in terms of identification of issues, analysis and find out solution of issues with the help of community.

Process

Under the CLME process the following tools will be useful for learning the rural people specially women: - Social & Resource Mapping for identifying the problems and target groups, Focus Group Discussion (FGD) with target group, and Format for closely monitoring and supervision. During these participatory exercise/ session as the women gather together in small groups, the team (social worker, sector supervisor and village level functionaries) gather information regarding the village population in the various categories than map the houses that are in a vulnerable situation. The team then map the houses that are around the centre and then move to places further away from the centre.

The map is used as tool to mark houses of beneficiaries

(pregnant & lactating women and children in the age group of 0-6 yrs) in the village. The Idea is to map the Mohalla/Dhaani/entire village with respect to the health situation of pregnant & lactating women, Newborn and 0-3 year old children with the mapping of village, the entire group (community, women, caretakers and resources) begins to get a picture of the health situation of the target groups.

While mapping, the condition of each beneficiary, and the services being provided to them, are discussed in detail and follow-up plans should be worked out, The women are encouraged to discuss their situation and the team (social worker and functionaries) provide the relevant counseling, During the course of the discussion, the women are also motivated to take responsibility for monitoring the health and nutritional status of other women and the children in the community facilitating and ensuring regularity of session and analytical discussion leading to action, requires skill. On an experimental basis we did in one village - Anandpuri, Banswara, Rajasthan.

How to Conduct

Mapping (Social and Health)

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Listing of pregnant & lactating women and Children < 3 years

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Analysis, cause and effect

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Community based groups formed to monitor health & nutrition status

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Groups come up with local level solutions

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Group discuss results

All the women, local functionaries and social worker have gathered at the A WC of village. Sangeeta (Pregnant women) wonders aloud as to why the women have gathered at the centre,

Vimala, a regular at these meetings, enthusiastically replies that this is a platform for all of them to learn and seek solutions to their problems.

The team places the village map in the middle and asks Sangeeta to identify where house is, Sangeeta eagerly points outs her house, located at the map. The others also get involved when Kamala marks the house with red bindi to show that it the house of pregnant women. Kamala (A WW) enquires whether Sangeeta has got herself immunized against Tetanus, had regular check-up, IF A tablets nutrias food etc. Some women does not know about these issues as well as importance of these issues then social worker explain the importance of each issues and advises that all women to be kept in mind during pregnancy. **Slogan - "Tetanus ke tike do, Iron ki goli sau"**

All pregnant and lactating women point out her house and located at the map and they marks the house with different colour & size of bindi which is show pregnant & lactating women. They also mark with different colour ofbindi to those houses who have < 3 years children proper care. **Slogan - Stanpan hai Arnrit a pan" "Maa ka pahla doodh khis, Arnrit Milta Bagair fees"** The team shares the status of all the women who were mapped this meeting with inputs of women.

The women are keen to mark the houses of the malnourished children in the village. The AWW takes the weighing scale and weight the children one by one. The team member Lady Supervisor records the weight of each child in register. They also mark to those houses where child was under weight. She points to a hen and tells the women that they ought to take care of the children just like the way the hen takes care of its chicks. She also tell to women about importance of supplementary nutrition specially to pregnant & lactating women.

One women mentions that her daughter seems to be losing weight as she is suffering from diarrhea. AWW asks her whether she has given Oral Dehydration Solution (ORS) do the child. The women answer in the negative and mentions that she is not aware of ORS. Asha Sahyogini takes an ORS pocket, and tells the group what the pocket contains and demonstrates how the solution ought to be made and consumed. **Slogan - Ulti dast ka khatara - Tale tika khasara"**

Conclusion

Through this exercise all group member /women will learn and understand about all uses of health and nutrition related to women and children they will come out with the positive local solution and they can demand more services from service providers. They can learn that participation is very important in the various programme for getting the benefits. The rural women also learn monitoring process of the programme from this exercise. Social Worker can also play major role in mobilization of target group for participation in the exercise and also can facilitate to the exercise in the community.

The Social Worker Trainees Can Learn Following From This Exercise:

- Planning and organizing the programme.
- Facilitation of exercise
- Process of Participatory Learning Appraisal (PLAS) through Social & Resource Mapping, FGD and Prioritization and Ranking etc.
- Identification of target groups, their needs/problems and solution of problems.
- Understanding about situation of community/village.
- Closely Monitoring and supervision of the any programme.

- Networking with various departments.
- Coordination among various stakeholders.
- Counseling.
- Critical reflection, analysis and definition of issues and desired result.
- Development of various types of format for monitoring and supervIsIOn
- Documentation of exercise.
- Communication skills etc.

Suggestions

This exercise should be implement in the all villages of the Rajasthan with the help of local functionaries, trained and professional social workers for improve the quality of services, and health & nutrition status of women and children. During the concurrent Field work under MSW course, the social worker trainees can do CLME in the allotted village/community.

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