Meeting Brief

Livelihood Models Action Group

DEESHA

[Diabetes (Type 1) Education and Empowerment Strategic Health Alliance]

Date: 5th December 2023, Tuesday | Time: 08:00 - 09:00 pm | Location: Virtual Zoom meeting

People to People Health Foundation (PPHF), the secretariat of DEESHA- [Diabetes (Type 1) Education and Empowerment Strategic Health Alliance] convened the first meeting for the **Livelihood Models Action Group** on **Tuesday, December 5, 2023**. The meeting agenda items were:

- 1. Discussion of workplan activities and drafting for Livelihood models action group
- 2. Establishing guiding principles for the group
- 3. Nominations of facilitators for Livelihood models group
- 4. Membership for Action group on Livelihood models

Summary of meeting discussions

The meeting commenced with a review of the agenda items from the last meeting. The key highlights from the discussion are as follows:

a) Discussion on workplan activities for the Livelihood Models Action group

During the meeting, experts were invited from livelihood, medical and public health sectors. The experts shared a detailed insight into livelihood models in the context of diabetes. The action group discussed the workplan activities (refer to Annexure-1) and suggested some additional activities (refer to S2 and S3 in Annexure-1).

Members discussed an enhanced model of inclusivity for livelihood options for families of children living with type 1 diabetes, urging the inclusion of middle class families due to the financial burden for long-term treatments. It was also suggested that to sustain livelihoods, a tailed strategic approach is required for categorizing families and creating livelihood options for them.

Members also discussed that challenges in livelihood improvement hinge on factors such as skill sets and family size. For example, for farming families, the focus is on boosting farm income and diversifying revenue streams. Overcoming the common hurdle of limited investment in poor households is crucial; lack of funds poses a challenge. Members agreed that the pivotal elements for successful livelihood models are skill development, addressing the investment gap and market linkages for products and services. A livelihood consultant can be engaged to provide a framework and assessment for tailored suggestions, supporting individuals with returnable grants and providing ongoing support through regular consultations and follow-ups. As recipients generate profits, they repay through EMIs, fostering sustainable financial growth. Additionally, engaging SHGs is a valuable strategy.

As the next step, the action group will focus on conducting an assessment and pilot study on various livelihood models and skill sets to explore diverse livelihood options. Also, it is essential to perform a focused assessment of identified families and children to gauge their readiness and market potential for additional income or new employment opportunities, while also understanding their challenges. Initiating a community survey to ascertain basic needs ensures data-driven decisions.

Additionally, the action group will work on drafting a **political manifesto**, focusing on advocating for policies that enhance awareness, better financial provision and livelihood support for children living with Type 1 Diabetes.

The secretariat will contact the absent members and will gather their inputs on the workplan activities.

b) Nominations for Action Group

The secretariat will approach the group members to seek nominations for the facilitator and co-facilitator of the Livelihood Models action group. Their role will involve coordinating technical and other advocacy work of the action group, as well as facilitating effective communication and collaboration among group members and with the secretariat.

c) Membership for Action Group on Livelihood

The group decided to invite more key stakeholders to be a part of Livelihood Models action group. The group will coordinate with all members requesting them to nominate individuals to be a part of the group.

The meeting was adjourned with a note of appreciation for everyone's valuable contributions and participation. The Secretariat extended a vote of thanks to all the participants.

List of Participants

- 1. Dr. Archana Sarda, Udaan
- 2. Mr. Indrajit Majumdar, Diabetes Awareness and You
- 3. Ms. Mridula Kapil Bhargava, Diabetes Fighters Trust
- 4. Mr. Prashant Sharma, Medtronic
- 5. Dr. Sabine Kapasi, UN WHO MoHFW Wharton School HBS NUS Ashoka
- 6. Ms. Sandhra Jose, Vrutti
- 7. Dr. Yash Patel, All India Institute of Diabetes and Research

PPHF meeting facilitators and support team

Mr. Ajay Pal, Ms. Ifra Yusuf, Ms. Krittika Banerjee, Dr. Laxmikant Palo, Mr. Nitin Bhardwaj, Dr. Sona Deshmukh

Annexure-1

Workplan Activities for Livelihood Models Action Group

Short Term (0-6 months)	Medium Term (12-36 months)	Long Term (3-5 years)
S1. Draft a manifesto statement for political parties in India for better financial provision and program to support the T1D children and their families	5	L1. Bring Type 1 DM into the public and political domain.
S2. A pilot study aimed at shedding light on various livelihood models and skill sets to explore diverse livelihood options.	M2. The group will have a mandate for influencing all relevant stakeholders in driving successful T1D outcomes.	L2. Sub-groups can be set up for specific topics of urgent interest.
S3. Perform a focused assessment of identified families and children to gauge their readiness and market potential for additional income or new employment opportunities	J ,	
S4. Develop an online platform with resources, job listings, and educational content specifically tailored to children with Type 1 diabetes.		

S5. Provide vocational training programs to develop employable skills, helping individuals find suitable employment.

S6. Identify funding sources, including grants, donations, and partnerships, to support the livelihood model.

S7. Develop a sustainable financial model to ensure long-term success.

For questions or suggestions, please reach out to:

DEESHA Secretariat

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