Phone call with project partner to discuss items and progress

Call with Pneuma project partner, Ms Paulin

Attendees: Namita (Asha SF), Ms Paulin (Pneuma Trust)

Date: 5/12/2012

Time: 8:30 am -9:15 am PST

Q1. (For Asha SF) How did Asha SF chapter come to know about the project? What is the chapter's interest to fund this project?

*Answer* – (a) The chapter came to know about this project when the project approached us through Asha Chennai. Pneuma itself came to know of Asha through the internet, when the person running it – Paulin – was looking to find other sources of funds in addition to local contributions they were receiving. The final Asha SF funding took some time as we were waiting for Pneuma to receive its FCRA.

(b) The chapter is interested in funding this project because we believe that Pnuema is doing some great work to improve the education and lives of HIV children and other disadvantaged children born to parents who are commercial sex workers, are mentally ill etc.

Q2. Does the project have a history of working with the government?

*Answer* – The project has limited experience working with the government. However the trust – Pneuma Trust – runs some other social programs for which it has secured government grants in previous years. For example – It has run govt-funded 4 programs since 2008 wherein 2-day yoga and naturopathy workshops were conducted for the general public for education and awareness of medical illnesses treatable through yoga and naturopathy. Also health diagnosis were provided to participants. Upon such diagnosis, participants were referred to nearby naturopathy institutes and medical facilities. The trust also ran a women’s program called “Sexual and Reproductive Health Program” wherein women were introduced to the concepts of sexual heath, hygiene, safety and security, availability of government’s facilities and schemes for women etc.

Pneuma has recently also applied for an additional Rs 10,000 grant from the govt to continue with its initiatives

Q3. What is the project’s sustainability plans? Does this plan sound sustainable (For Asha SF)?

*Answer –* Pnuema’s plans to become self-sustainable include buying additional land to expand the shelter/home in order to provide larger/better facilities to the children including playground, and also to become self-sustainable by using part of the land to open a dairy farm. Additionally Pneuma also intends to expand its current counseling services to include legal counseling for women, counseling for mental illness, general counseling, career counseling etc. Currently Pnuema offers such counseling but on a small scale. Each counseling session fees charged to participants is Rs 100. Pneuma plans to expand the scale and reach of its counseling services. Thus, Pneuma plans to become self-sustainable in the next 3-5 years through income generated from its dairy farm and counseling services.

We at Asha SF are optimistic of this plan as we can see that Pneuma is taking steps in that direction. The trust has already acquired land of 2.17 acres and installed a bore well as the first step.

Q4. - Is project partner trying to tap Govt/other sustainable sources for this specific proposal?

*Answer –* Pneuma has approached the government by applying for a grant of Rs 10,000 to continue with its initiatives

Q5. (For Asha SF) What scalable information can be learnt from this project that can be used with other projects?

*Answer –* Pneuma has expert experience in working with HIV children and understanding their needs. Through its home, facilities including nutrition, workshops, counseling and education initiatives, Pneuma significantly improves the lives – physical and mental – of the HIV affected children, and facilitates their personality development and growth. Through improved living conditions and a very supportive environment, these children have higher motivation in continuing their education in regular schools. This has reduced drop-out rates, and in fact many children have been performing well in school and completing their education with good grades.

Asha’s other projects and NGOs, especially those helping HIV children, can benefit greatly from learning and applying Pneuma’s models, workshops, initiatives.

Q6. (For Asha SF) Are there related areas or concerns this project addresses or impacts other than the primary reason stated above?

*Answer –* In addition to helping HIV affected children, Pneuma is also working for the needs of women through its “Sexual and Reproductive Health Program”, wherein women are introduced to the concepts of sexual heath, hygiene, safety and security, availability of government’s facilities and schemes for women etc. Pneuma also works for the medical needs of the general public through its 2-day yoga and naturopathy workshops wherein education, awareness and health diagnosis is provided to participants. Upon such diagnosis, participants are referred to nearby Naturopathy institutes and medical facilities.

Q7. Your itemized yearly budget shows salaries for volunteer staff to be higher than teacher’s salary. Please justify. Who are these volunteers and how many? Why are they being paid as volunteers?

*Answer –* These volunteers are 1 doctor, 2 social workers and 1 counselor. They are paid through local contributions coming in to Pnuema. The work of these 4 people is very critical given the target community – HIV children, who need fair amount of regular and quality medical and psychological assistance. While Asha SF funds teacher salaries, local contributions fund the services of these 4 people. Pnuema has called them “Volunteers” because these people perform services in much larger proportions than what they are paid for, and in reality are more volunteers than paid staff.

Q8. There appeared to be a discrepancy in the # of males and females in your documents 33/34/26?? males and 2/3 females. Please check and make necessary changes.

*Answer –* The total number is 36 out of which 1 boy left the home as he completed some professional training. So now there are 35 children out of which 32 are boys and 3 are girls.

Q9. Proposal form includes a statement: *“The number of children at the Home has decreased over the years, which is not a bad thing necessarily, but we should find out what their 1-, 2-, 3-year plans are”*. However, the yearly feedback form states *“The children who were dropouts were again studying in the school”*. Why is the # decreasing? How significant is the drop-out re-enrolment rate?

*Answer –* Correction to the question needed. The first line should read “Site visit form includes...” and not “Proposal form includes...”

The two parts of the questions are distinct items and are not correlated.

1. As regards the first part, the number of children earlier in the home used to around 40-42. But currently, Pnuema has narrowed down its criteria for selection in order to provide quality services and facilities in relation to its budget and funds. Accordingly now it selects children only from HIV, mental illness, commercial sex worker family backgrounds and that too from only two neighboring districts. This has not affected the greater population in general because the government has introduced similar programs in other districts.
2. As regards the second part, previously children in the home were dropouts from school. Pneuma worked with these children to improve their motivation and desire to rejoin school, and has been successful in this endeavor. The dropout rate of these children has significantly reduced.

Q10. Skewed ratio of males/females. Are girls completely cut off socially? Are there any efforts to increase girl enrolment?

*Answer –* Pneuma has witnessed over the years that guardians of girl children are reluctant to send the girls off to shelters and homes due to safety and security concerns. However, Pnuema also believes that the result of this is that girls are not getting required emotional, psychological assistance to deal with their HIV issues, which an HIV shelter can provide. They are not getting the right motivational and supportive environment that the boys are able to receive from the shelter/home. To address this, Pneuma hopes that in the coming years, subject to availability of funds, it can open shelter homes for girls

Q11. “Health of children has improved”. What metrics were used?

*Answer –* Upon entry into the home, each child’s health assessment is done by the doctor. Height, weight, eyesight, medical conditions are assessed. What Pneuma finds is that the health of children upon entry is very poor – weight is under, many children are anemic and suffering from marasmus. The home then attempts to improve their health through nutrition and supplements prescribed by the doctor. Every three months, the health check is done by the doctor to monitor progress. Pneuma’s nutritional support has improved the health of these children significantly. Upon regular health checks, it has been found that weight of the children has come into healthy range, anemia levels have reduced and the children are no longer suffering from marasmus.