

KHUSHBOO WELFARE SOCIETY

ANNUAL REVIEW (APR 2009 TO MAR 2010)

Annual review

- ❖ KWS Activities
- ❖ Advocacy and lobbying
- ❖ AHEAD
- ❖ Asha-Austin and KWS
- ❖ Financial budget of 2010-11

KWS Activities (Apr 2009 - Oct 2009)

- ❖ Parents orientation
- ❖ Training of teachers and workshop
- ❖ Yoga training for teachers
- ❖ Breathing exercises and Yoga for students
- ❖ Ophthalmological check-up
- ❖ Rakhi and independence day celebrations (August 2009)
- ❖ State level badminton tournament (September 2009)

KWS Activities (Oct 2009-Apr 2010)

- ❖ Swine-flu orientation for Staff
- ❖ Dussehra celebrations (October 2009)
- ❖ Special olympics state level athletics (October 2009)
- ❖ Diwali celebrations (October 2009)
- ❖ Visit to the zoo (November 2009)
- ❖ Children's day celebrations (November 2009)
- ❖ Christmas celebrations (December 2009)

KWS Activities (Oct 2009-Apr 2010)

- ❖ Disability day - awareness walk (December 2009)
- ❖ Training of staff on Personality Development - Right to free and compulsory education (January 2010)
- ❖ Neuro Camp by Dr. Sumit Singh (January 2010)
- ❖ Ortho Camp by Dr. Sanjay Sarup (January 2010)
- ❖ Republic Day / Basant Panchami / Lohri Celebrations (January 2010)
- ❖ Advocacy on rights for special-needs children

KWS Activities (Oct 2009-Apr 2010)

- ❖ Inter-school Rangoli and flower decoration competitions (February 2010)
- ❖ Tech-share conference on facilitated and independent living of special needs children (February 2010)
- ❖ Round table on disability and census (March 2010)
- ❖ Annual assessment and development plans with parents of the beneficiaries (March 2010)
- ❖ Orthopedic surgeon and Neurologist visit KWS ; consult each other and discuss the individual cases (April 2010)
- ❖ Dental check-up (April 2010)

Re-arrangement of classes

- ❖ Dismantled junior stimulation group (more challenges)
- ❖ 8 to 12 years group now in two sections - 8 to 10 years group and 10-12 years group
- ❖ More inclusive (children with profound and severe disabilities being integrated with other children as per the groups)

Pre-vocational group

- ❖ Part of Blessings - the school
- ❖ 2 more male staff hired
- ❖ To prepare for vocational training program (Samarth)
- ❖ Functional skills, home management skills initiation
- ❖ Concepts of measurement introduced (e.g. length of tailoring cloth)

Medical camps

- ❖ 2008 : 1 big medical camp
- ❖ 2009-2010 : 3 medical camps
- ❖ 2010-2011 : Already 2 medical camps from April 2010
- ❖ All at the center
- ❖ First time, both neurologist and orthopedic surgeons were present and in consultation with each other, they did check-up of the students (a practice that is not normally practiced in hospitals too)

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Advocacy and lobbying

- ❖ 3rd December 2009, representation at the disability committee in the district administration
- ❖ Benefits given by the State Government doesn't reach the beneficiaries
- ❖ Disability certificate - a must for the special needs children (KWS has obtained this certificate for 55% of the children)
- ❖ Disability certificate helps children to avail scholarships, enrollment in schools, insurance, health-care benefits, travel
- ❖ Government legislations are not being implemented (failure to see the intricacies involved by the legislators)

Advocacy and lobbying

- ❖ Each regular school to have a special educator (not followed)
- ❖ Infrastructure of schools disabled-friendly (not followed, general access, water-point, restrooms)
- ❖ Open and accessible health facilities at Anganwadis
- ❖ One district hospital - responsible for the blocs; population is increasing and # blocs increasing
- ❖ The district hospital has an open post for the Psychologist (who's job function is to evaluate IQs of children with retardation and recommend to the CMO for the disability certificate). This post has been lying vacant for 10 years

Advocacy and lobbying

- ❖ Main focus this year to ensure that all the beneficiaries at KWS have the disability certificate
- ❖ Thrust over the last one year (55% now at KWS)
- ❖ Needs assessment from 2-3 people in the medical board. Seldom is the board there in complete.
- ❖ For daily wage earner, just to get the disability certificate, one whole day is gone. Transportation of the children to the district hospital, meeting with the board, health check-ups and recommendation.

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AHEAD

- ❖ Rarely initiated (may change in geographical areas)
- ❖ Working in the community; assessments done in a few areas, 3 villages close to the center
- ❖ In some areas, technically not villages. But, councillor not yet elected, and the Panchayat has been dissolved. Grey area as to who takes the important decisions.
- ❖ AHEAD services across disabilities - cannot be discriminating
- ❖ Services to be rendered where people are; long term change required at community levels

AHEAD

- ❖ Regular schools make more inclusive
- ❖ Anganwadis make more inclusive
- ❖ Sensitization and awareness (1 maiden visit on the field reaffirmed the fact that people don't even recognize disabilities)
- ❖ For mental disabilities, families don't even consider it as a disability. Fail to come to terms with reality. Deprive the child of the right to education at the life-cycle institution (like a school)
- ❖ Commutation is not disabled friendly to schools

AHEAD

- ❖ Center has a limit of providing services
- ❖ Cannot put in more children, sections reached ceiling
- ❖ Focusing on health/ early intervention
- ❖ Providing direct services to people at homes/ therapy
- ❖ Initiation - may use present staff; definitely, 1 social worker and therapist to be hired in the next 2-3 months
- ❖ Sustain set of volunteers/ community workers, bring in unemployed youth

AHEAD

- ❖ Visual impaired - do not have access to schools of visually impaired in Gurgaon
- ❖ Benefit a lot from regular schools - bridging gaps. Help in mobility training/ provide audio cassettes of chapters
- ❖ Speech and hearing impaired - though there is a school in Gurgaon, provide services in the community for hearing aids, reaching out
- ❖ Help in streamlining of the children into proper schools, supporting the families, and help the children avail concessions and benefits given by the government

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Grants (2009-2010)

- ❖ Total operating expenses : 33 lacs
- ❖ Asha -Austin : 6 lacs
- ❖ Government of India (Grant-in-aid) : 3 lacs (not yet received)
- ❖ Concern India Foundation : 2.6 lacs (Sparsh)
- ❖ BASAID, Switzerland : 2.25 lacs (Samarth)
(BASAID to not support for 2010-11, funding for Haiti)
- ❖ Child Vikas : 2 lacs (Sparsh)

Grants (2009-2010)

- ❖ Support-a-child (18k per year) : 2 lacs
- ❖ Funding from Guru Ma's org. : 2 lacs
- ❖ Charity AID : 0.7 lacs
- ❖ Give India : 1.5 lacs
- ❖ 3 online donations of 1500\$ (Didi-ki-chai)
- ❖ One anonymous donation from Switzerland for 1000\$

Endowments (2009-2010)

- ❖ Airtel Delhi Half marathon : 7.6 lacs
(tied with Concern India foundation)
- ❖ Savakoor family endowment : 2 lacs
- ❖ Gupta family endowment : 2 lacs
- ❖ Target : 3 crores

Beneficiaries

❖ SPARSH	:	103
❖ Registrations > 6 years (HBT)	:	26
❖ Registrations < 6 years (HBT)	:	60
❖ Direct therapy of regular beneficiaries	:	17
❖ BLESSINGS (incl SAMVEDAN)	:	52
❖ SAMARTH	:	14

Staff

	April 2009	April 2010
Administration	4	4
Senior Special Educator	0	1
Special Educators	6	6
Assistant Teachers	3	5
Therapists	2	2
Assistants	3	3
Helpers	4	4
Care-takers / Housekeepers	2	2
Drivers	3	3
Volunteers	7	7
Dance teacher	0	1
Gardener	1	1