KHUSHBOO WELFARE SOCIETY

Annual review (Apr 2010 to Mar 2011)

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- * KWS Activities
- Advocacy and lobbying
- * AHEAD
- Asha-Austin and KWS
- Financial budget of 2011-12

- Orthopaedic surgeon and Neurologist visit KWS; consult with each other and discuss individual cases(April 2010)
- Staff training on Play and Math (April 2010)
- In-house training for staff on soft skills (May 2010)
- In-house training for CBR (2 staff members) (May 2010)
- Breathing exercises and Yoga for students
- Dental camp for children (April 2010)
- Dental workshop for parents (May 2010)

- Training of personnel by Municipal Corporation, Gurgaon for Census 2011 (About 10 educators participated)
- Inspection from Income Tax for renewal of 80G certificate (done every 5 years)
- Rakhi celebrations (August 2010)
- Medical intervention for kids (September 2010)
- Visit to the pottery works factory for children (September 2010)
- Beauty and hygiene workshop for the girl children (September 2010)
- Presentation on net-marketing (September 2010)

- One week course on mainstreaming children with disabilities, sponsored by DOPT, Government of India (September 2010)
- Lions Public School organizes outdoor sports meet (September 2010)
- * 5 children with 2 escorts attend 6 day sports camp National Coaching Camp (Special Olympic Bharat, Bhopal)
- Joy of Giving week (Sept-Oct 2010)
- Independence Day/ Rakhi/Janmashtami/Teacher's Day/ Dussehra/ Diwali/ Christmas Celebrations
- Advocacy on rights for special-needs children

- Annual Dance Drama Competition (2nd Prize) by Very Special Arts India, Delhi
- Bhajan and Satsang with Art of Living
- Specialist medical intervention camp (October 2010)
- Medical intervention camp for Parents (November 2010)
- Counselling workshop for Parents (November 2010)
- * 100 students from Blue Bell Model School visit KWS (November 2010)
- Founders Day celebrations (December 2010)

- * Republic Day / Basant Panchami / Lohri Celebrations (January 2011)
- Annual assessment and individual planning with parents (March 2011)
- A film on Khushboo wins the Ability Media International Award in UK
- * KWS coverage in newspapers (regarding Holi colors) and sports meet
- Holi celebrations (March 2011)

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)
- * Nursery or pre-school added to serve as a bridge between Sparsh and Blessings (program affiliated with Blessings); 2 hours of school at 3 times a week

Pre-vocational and Vocational

- 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)
- Tailoring reduced (tough for students)
- * Still doing candle making, flower cutting, block printing, paper printing, greeting cards, holi colors, etc.

Medical camps

- * 2008: 1 big medical camp
- * 2009-2010 : 3 medical camps
- * 2010-2011 : At least 6 over the year
- 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 (2009-10)

- * 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 (2009-10)

- 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 (2009-10)

- 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 age 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.

Advocacy and Lobbying (2010-11)

- Now, 50 out of the 70 children possess the Disability Certificate
- * Due to KWS active lobbying and advocacy efforts, process more streamlined. Parents need to take their child and go to the CMO and get the certificate. System is perfectly fine now.
- * Government of Haryana needs the person to have established domicile in Haryana for obtaining the Disability Certificate. The remaining 20 children without this certificate at KWS currently do not have domicile status.
- * To work with Sparsh beneficiaries to get the certificate/ and or identified cases from the CBR program.

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- 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

- 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

- 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

- 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

AHEAD (2010-11)

- Summer of 2010 survey to four villages (not very far from the center)
- Pilot study
- Located 35 children with from this program
- Identified 19 cases with mental disability
- Rest 16 cases, affiliated with polio/ hearing/ visually impaired; for cases not directly in KWS's domain, refer to specific special care institutions, provide wheelchairs etc

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AHEAD (2010-11)

- One physiotherapist, one special educator
- Once a week, render services at local Anganwadi premises
- * Empowering the community, training and orientation to local unemployed youths in the villages
- People of the villages are very happy; more word and awareness being spread
- People coming forward now to KWS
- From their point of view, program is being very successful

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Beneficiaries

* SPARSH	•	103
* Registrations > 6 years (HBT)	:	26
* Registrations < 6 years (HBT)	:	60
* Direct therapy of regular beneficiaries		17
* BLESSINGS (incl SAMVEDAN)		49
* Stimulation Group	:	7
* SAMARTH		14

Beneficiaries

- * 14 new children added, 8 left
- Most children who left, were because of relocation, or parents give up, normal attrition rate, that they have been seeing over the years
- Van/ Bus space has not been a constraint
- * Vans (8 seaters) Capacity for adults; 11 children fit in well. Same for buses.
- If needed, they have a spare bus and driver, ready to be pressed into service
- * All vans/ buses have a driver and a caretaker in the vehicle to take care of the children

Staff

	April 2009	April 2010	April 2011
Administration	4	4	4
Senior Special Educator	0	1	1
Special Educators	6	6	6
Assistant Teachers	3	5	5
Therapists	2	2	2
Assistants/ Interns	3	3	5
Helpers	4	4	4
Care-takers/Housekeepers	2	2	2
Drivers	3	3	3
Volunteers	7	7	7
Dance teacher	0	1	1
Gardener	1	1	1

Staff

- * 3 left and 2 hired, 1 more hired recently
- Right now, wages below Minimum Market Requirements
- * KWS Board decided to increase salary by 20-25%; minimize attrition, difficult to find well-qualified replacement teachers
- * Hiring more matriculates (8th/10th/12th graduates/ drop-outs), mostly girls, who are passionate about working with special-needs children, to take care of the increasing students
- * These girls from very low income groups, who have stopped their education because their family wants them to get them married/ are married and have time at hand