

ANNUAL REPORT

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Institute of Research and Development for the Rural Poor-Trust (IRDRP)

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**INSTITUTE OF RESEARCH AND DEVELOPMENT FOR THE RURAL POOR-TRUST
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Annual report for the period from April-2005 -March-2006

**Project I. Anemia Correction among school going children in Tiruporur block,
Kanchipuram district**

Introduction:

The District Co-ordination Committee of Tamilnadu Voluntary Health Association selected Institute of Research and Development for the Rural Poor-Trust as one of the intervention NGO for the Anemia correction among school going children in six schools of Tiruporur Block. The main focus of the project is to correct anemia among the school going children from standard VI-VIII level by introducing Indian system of medicines (herbs and vegetables) and totally avoid the Allopathic system in preventing anemia.

Project Background:

The project is to correct anemia among school going children in the Kanchipuram district covering of 78 schools in 13 blocks, 6 schools from each block by 10 NGOs. Target children will be divided into control group and experimental group equally to test the intervention how effectively prove the nutritious food and ISM medicines helps in preventing anemia. Both the groups HB test will be done among the children (VI-VIII) and intervention will be planned in Experimental group by orienting the teachers, children and family members through group meetings, home visits and IECs and after 3 months. Control Group nothing will be done. At the end of 3rd month we will do the Post test and see the anemic children found in the pre test will be improved by nutritious food and de-worming.

Training to the Staff :

The above staff participated in the program organized by the TNVHA and DCC of Kanchipuram District to orient the staff on Anemia correction program. The program gave a full information and develop the staff to implement the project. There was a practical session on HB test helped the staff to gain confidence in doing the HB test in the field. The Managing Trustee Dr.U.Irudayasamy took a session on Anemia introduction, types of Anemia, Various symptoms of Anemia and prevention and control of anemia. Participants felt that was an informative session. IRDRP also produced a “ Health workers module on Anemia correction” which was released by the District Collector Sri.Rajaraman.IAS and appreciated the efforts of TNVHA / DCC and IRDRP The module was circulated to all intervention NGOs in the district. TNVHA, Chennai also purchased all of the modules and provided to its member NGOs who are implementing the similar project in the state.

Identification and selection of Intervention schools:

As soon as we got the project we started collecting information of all Government schools in the Tiruporur block and DFC letter of introduction from the District Education Officer's Letter helped us to get introduced with the schools . There were 17 Government schools in the Block. Some of the schools Headmasters co-operated and few school headmasters heisted to do such activities in the school.

On a Lottery method we wrote the school's entire name and selected six schools for our intervention project. Based on the schoolteachers' co-operation, distance, and accessibility we decided the following schools as control groups and experimental groups.

Control Group

1. Government High School ,Mampakkam
2. Govt.Higher Sec.school, Kelampakkam
3. Govt.High School, (Boys) Tiruporur

Experimental group

4. Adi-dravita Govt.High School, Pudupakkam
5. Adi-Dravita High School, Thaiyur
6. Govt.Girls High School, Tiruporur

Our staff again visited all these six schools and built a rapport with the headmaster, teachers and students to implement the project. Staff explained clearly to Headmasters, class teachers of VI-VIII std the purpose of the project and sought co-operation from them.

Since it was the school exam time we could n't do any activity. One school we found very difficult to convince the Headmasters. There was a big between the headmaster and staff, then the local politician helped to solve the problem. Monthly once IRDRP staff visited the six schools and developed a good rapport with them and gave field based orientation to the teachers and students.

Pre-Test of HB :

We collaborate with MEAGA-Trust as our intervention partners. They started doing the Pre-Test sampling of HB test in their targeted school. Our staff assisted with their team to complete the HB test.

Orientation to the Teacher:

Teachers orientation training program organised on 4th December 2002 at Vanadalur Community center. There were 9 participants from 5 schools and one school didn't send any participants. We collaborated with MEAGA-Trust. The program started by 10.00 AM with pre-test questionnaire to all participants. Mr.Sunder, MEAGA Trust welcomed all the participants and conducted a game to introduce the participants to each other. There was an ice breaking session also to bring the participants into a training atmosphere. Dr.Irudayasamy took session on introduction on Anemia, functions of blood, types of anemia, symptoms of anemia, normal values of HB, testing methods, complication of anemia in pregnancy, and prevention through rich source of foods.

Ms. Vijayalakshmi shared the pre-test HB findings of their intervention area and procedure of HB test to the participants. At the end of the day they were asked to give dates of Pre-test HB to their respective schools. Again the Managing Trustee shared their Pre test scoring. Posttest had done to all participants. Ms.Regina expressed vote to thanks to all participants.

Teachers were gained lot of information about anemia and found interested in participatory training and simulation games conducted to them during the training. We completed the HB Pre test and KABPs questionnaires in six schools in the following dates

1.Govt.High School, Pudupakkam 2. Kelampakkam Govt.High School, 3.Tiruporur Govt.High school 4. Mampakkam Govt Hi.sec. school 5. Thaiyur and 6.Kaiyar schools

The study revealed that the 49 % of the Male children are in anemia and 54 % of the female children are in anemia in experimental groups and 9% of male children and 6 % of female children are in severe anemia. We had given the de-worming tablets to all the children in experimental group.

To improve their nutritional values we educated them to eat more greens, pulses, dates, and locally available fruits. We also conducted special education programs to children and their parents in Thaiyur school on 7th Feb'03.

Control group:

The study revealed us the control group has 28 % of anemia in male children and 62% in female children and only 7% of female children in severe anemia. It is a valid indicator to us to prove the study. As per the request from the schools we provided the copy of children HB status to experimental group to follow-up them.

Post Test and study findings:

The Post Test had done after one year the study revealed the following outcomes after our completion of the project. There is an improvement in the anemia level in Experimental group than the control group.

1. In the control group the anemia level is same there is little 0.5 % improvement in the Normal value.
2. In the experimental group the anemia level increased to 96.5 % both from the boys 98% and girls 95% . This is due to the continuous food demonstration class to the students and parents meetings.
3. There is a clear gender difference in improvement of anemia. The Female gender is slow in improving their anemia value than male.
4. Geographical situation also one of the factor in improving the anemia level. The town children were improved 77% and remote village children improved only 65%. This may be due to availability and accessibility of food items.

Problems faced during the implementation:

1. Villages are too interior, there is no proper road facilities still we completed the task by the help of MEAGA Trust.
2. Pudupakkam School Headmaster and VHN are not agreed to give de-worming process because if any severe loose motion there is no medical facilities nearby their village and they have to travel to 10 - 15 kms to Tambaram or kelampakkam. Practically I said to them, I had used this medicine and only 4 or 5 times may be loose motion occurred, if anything use more buttermilk and curd. They agreed
3. IFA vs Siddha. VHN insisted to give IFA in the above school, because the HB tested confirming the anemia children and it is their duty to provide IFA. But we showed the letter copy from the DEO, and collector to practice food habits to show the improvements.

Project II : Child Labour Intervention and elimination project

Introduction:

This project has been implemented in the St.Thomas Block, Kanchipuram District supported by the KKN, Netherlands. IRDRP identified 5 centers in the slums Pallavaram, Meenampakkam, Trishul, Kulathathumedu and Gandhi Nagar of St.Thomas Block. We took survey in all these 5 slums about the working children, drop-out children, Non-starter to school, and the various reason for the drop outs and child labor. Based on the study we identified five centers and started our various intervention project .

1. Non Formal Education:

Non Formal centers started in 5 slums registering the children who are working in the close by industries and factories, 356 children benefited under this program. Teachers were selected in the local areas itself to support the children in all aspects like social, economical and psychological supports. Teachers were given monthly trainings and adequate exposure trips to equip their skills. and children also involved in some of the skill training like tailoring, mat weaving and soft toys makings.

2. Bridge course :

We also conducted bridge course in 2 slums. We registered the children who were discontinued their studies and drop out from the schools. We train 68 children to continue their studies. Drop outs were trained for 6 months and re-admitted them in the schools during the academic year.

3. Leadership training:

IRDRP organized 2 leadership training course for the matured children on 12- 14th October and 12- 14th February to train children on leadership qualities. Games, exercise, story telling, creative drawings, etc,

4. Parents education programs:

Every month the last Sunday we invited the parents of the children and educate them to encourage their children to continue their studies, importance of education, some days we organized skill training to parents to raise their income sothat they may not send their children for work.

5. Study tour :

Study tours also organized to the children to learn various animals, birds, fishes . This was organized to visit the National Park at Vandalur. Yearly annual sports meet were organized to encourage the children in sports too. All children were given participation gift and winners received prizes.

Project III : Global Poster competitions to reduce stigma and discrimination on HIV/AIDS

This project is basically a Global level activity where IRDRP participated. In India only 2 organizations had opportunity to do this program. With the support of CWS, USA IRDRP organized four Zonal level workshop for the Church Pastors to create few posters to reduce Stigma and discrimination on HIV/AIDS. Posters were sent to USA for final competitions. 119 Independent church pastors participated in Tamilnadu Level. Follow-up of this project. We had been trained 860 Pastors in the Christian community, through them we would reach to 3,00,000 population over next 3 months. This was implemented by Church for social concerns which is the program unit for IRDRP to do religious Programs. This project has been supported by Church World Services, USA. Enclosed the copy of our achievement documented by Church World Services, USA.

Project IV. Care and Support project to Orphan infected and affected by HIV/AIDS

The Project was formally inaugurated by the Tamil Evangelical Lutheran Church (TELC) Bishop Rev.Dr.Arul Dass, and the Blessings from his team we launched the project in the Kalangani village. Rev.George Samuel, Director, Socio Economic Board and Dr.Sopia, St.Joseph's Hospital were given special speaks to the community.

Beneficiaries Planning meeting : We called the Village Care Committee and told the list of beneficiaries and got the approval from the VCC. The VCC planned where to buy the buffaloes and goats. They suggested to buy them in the local Sandai (Market) and we tried to the local market, we could not get good and quality buffaloes. Then we went to Kerala to buy them. The cost was so high still we bought 20 buffaloes at a average of 6500/- each in a lump sum manner. We transported and distributed to the families.

An agreement Bond was made between IRDRP and Client to manage the Buffaloes. In the Bond they have agreed not to sell the Buffaloes for 3 years and should maintain by themselves. The proper medical care and insurance renewal should be done by them. This was drafted by the VCC.

Role of Village Care Committee (Community care system): VCC agreed to monitor the family regularly to execute the bond and to provide support & care to the PLWAs, At the end VCC will evaluate all the activities geared to PLWAs

As per the proposal we mentioned to buy small goats(Clamp), but people experienced that small ones with out parents care and milk they easily died. Therefore they requested us to buy big ones. So we bought 3 for each family at the rate of Rs.1500/- Now most of them were pregnant, likely each family will get additional of 2 to 3 off-springs.

In the initial period the local people did not buy the milk from these beneficiaries because of AIDS (misconception) and then we educated by milk HIV/AIDS won't spread. They changed their attitude and supported us in buying locally, some beneficiaries selling co-operative stores. The Milk van daily comes to the village and collects the milk.

In this year we had heavy monsoon rain. Goats were not withstanding this situation they had new diseases like Red Tongue disease and swelling in the foot attacked few goats and buffaloes. Government Veterinary Doctor helped to rule out the disease. 3 goats were died. Massive treatment helped to safe guard all other animals.

Quarterly review meeting held with VCC and Staff to monitor the project. The Following success stories were recorded:

- 2 Families reconstructed the house which was damaged by the heavy rain
- All the families able to meet the daily expenses in day - to - affairs
- 6 Families came out of debt bondage and repaid the old debts.
- All the families happily celebrated DEEPAVALI (light festival) in a very happy mood with new dresses and good foods. Earlier they won't do like this. Earlier to celebrate this festive they use to get loans or borrow money from money lenders with high rate of interest, but now the whole scenario is changed.
- There is no drop out from school going children and increase in the quality and the quantity of the education materials among the school going children.
- Timely supply of educational materials to the school going children
- The decrease in the number of drops outs from regular school studies.
- Motivated beneficiaries actively participating in Women Association meetings.
- Mr.Raj Kumar started own business (cloth selling by bicycle in villages)
- Saving encouraged in all beneficiaries.

Medical camps:

Monthly medical camps were organized with the support of Dr.(Ms)Sophia who works in a Christian Mission Hospital. All the children in the villages were screened and covered in the medical camp. Regular de-worming, vitamins tablets were given to children. There are 2 cases were identified (TB and Tonsillitis) and referred for further treatment.

Veterinary Doctor: Dr.Mohan from Government Veterinary Doctor regularly visits and checked all the animals. He worked with full commitment to save the animals from Red Tongue disease and Leg foot swelling in the rainy season . If he did n't do that we could not save all the animals. We appreciate his efforts. There was excess amount we spent for treatment, which is not foreseen.

Supportive programs : We gave training and orientation to Religious Pastors in the area, Teachers orientation, Meeting with Positive people's network, etc to provide care and support to this orphan children in the community.

Vocational Training for Drop out children: We taught candle making, soap powder, washing powder making, cover making training to girls and boys. The electronic and electrical training will be conducted in the Month of April to May when the schools will be closed for holidays.

Project V: Tsunami Relief and Rehabilitation Project:

Phase -I

CAF did Relief package of Food and house hold materials to 500 families in both villages. Mr.Istavan , CAF volunteer came to coordinate the first phase of the tsunami relief activities. ETM sponsored this phase by donating 10.000 euros. Our India Representative Mr.Irudayasamy did psychological support to women and children who lost their head of the family members and children. Grief counseling and counseling to come out the situation was provided at community level.

Medical services were co-ordinated through Hindu Mission Hospital doctors team. They screened sick people and provided medicines to them and referred chronic cases, bone fracture people and other diseases for continuous treatment to their hospital. Every month Hindu mission hospital visits both villages and treat them at free of cost.

Phase-II

In a second phase each village was given 5000 euros which they spent on an income generation activity which should benefit as many of the people in the village as possible. Karikattukuppam village spent Rs.3,00,000 on buying motors for some fishing boats which they had been given by another charity. They could not use these boats unless they had motors so it seemed like the obvious choice. As it is the local sangam who officially owns the motors - they reached an agreement with the fishing men that they would give one part of their daily catch in payment of use of the motors. The women group spend this money on assuring other income generation activities are launched in the village.

Devarikuppam village they chose to spend the money on starting a number of micro businesses to be run by the sangam women. Each women group was given a sum of Rupees 25,000/- to start the micro business on their own. There were 9 women self help groups shared Rs.2,25,000/- . Women groups started lending the money for each individual member for fish selling, saries selling, dry fish selling and so on. Two women groups have just recently opened a phone shop.

We also organized Children enrollment camp to educate the parents and children to admit the children in schools. People shared the difficulty to pay the school fees. We contacted the world vision -India (Tsunami relief project) and requested to meet the school fees. World Vision also agreed to meet 72 children school fees worth of Rupees One lakh twenty thousands (1,20,000) and CAF agreed to meet 28 children through One Family One Charity program.

100% school enrollment was achieved through our campaign and school admission fees supports. Otherwise there will be increase of drop out children in Tsunami affected villages.

We also organized International women's day in Devari Village and International labour Day in Karikattukuppam village. To mark the International Labors Day Youngsters organized catching fish in sea by boats and engines what we provided to them. We also organized Women Vocational training programs like soap making, soap powder making, sanitary items, and candle making to women groups

We conducted Participatory Rural Appraisal (PRA) in both our target villages by mapping out all houses in the street by drawing them in big chart paper and asked the women groups to rank deserving women based on the following indicators " widows who lost the husband in the village, deserted women, women with more girl children and families having more children". Women groups marked these families in a red color on the chart paper. Karikattukuppam village women identified 15 families by this PRA method. Devanarikuppam identified 13 families. These 28 families will be supported by One family one Charity programs. 300 euros will be spend on each family to meet the children education, insurance and micro-business programs.

Project VI: HIV/AIDS care and support program in Tiruporur Block:

IRDRP is a member organization to Tamilnadu Voluntary Health Association (TNVHA). In Kanchipuram District IRDRP act as District Resource center for Anemia correction and control program. In this financial year IRDRP received funds from TNVHA to implement HIV/AIDS care and support program. There are 12 NGOs covering 12 blocks in the District. IRDRP covers Tiruporur Block. Initially Tamilnadu Voluntary Health Association provided a masters training to INGOs and then the Master trainers implement the activities in the target areas. We organized 6 Training for self help groups and 2 support groups meetings with People Living with HIV/AIDS. In these meetings nutritional care and child development process were shared with them.

Staffs were sent for 2 days counselors training and they were well equipped to do counseling to PLHAS. Monthly review meeting were organized every month all project implementing NGOs shared the difficulties and success stories among the partners.

Project VII: Cyclone Relief and Rehabilitation Project:

IRDRP was proposed to implement cyclone relief and rehabilitation project in cyclone affected areas in Kanchipuram district. Two kinds of activities we proposed.

1. Cyclone relief and reconstruction of houses to damaged people (50 houses at the rate of Rs.3000/-)
2. Loans to agriculture farmers to reclamation their lands (with natural fertilizers, soil to make fertile)

Activities 1 construction of cyclone damaged houses:

As per the proposal we started the project in June 2006. First we had discussion with the people along with the local ward member (Government elected person). We shared that we proposed 50 houses only which were severely affected by cyclone and now we received the money. We wanted to give it to 50 people and you give the list and we would distribute the money. People raised that everybody was affected by cyclone, the water was went up to 9 feet high and all the houses partially and fully damaged. Therefore equally you share the amount to all. The Government ward leader also emphasized that the money should be equally to share to all houses.

IRDRP Director agreed to that decision and asked the leader to prepare a list. He listed out 105 houses were damaged partially and fully. We came to an agreement that to give Rs.1500/- to all houses to reconstruct the houses. All people agreed and leader also happy on the decision.

On 13th June and 19th June 2006 We distributed the money to all families. The Village Government Ward leader, local leader and IRDRP director distributed money to all families. Photos attached. People happily received it and expressed heartfelt thanks to Electricaid – staff, board members and well-wishers . We could see the big smile in all faces. 105 houses were reconstructed successfully.

Activity 2. Note books and school stationeries distributed

Few families requested notebooks to their children, since all the books and notebooks were damaged during rain and cyclone. We responded to their request and distributed notebooks, books, pencil and pen to 25 children to continue their studies. We encouraged the children to continue their studies.

Project VIII : Rehabilitation for women Living with HIV/AIDS:

Initiating a rehabilitation center cum skill training center for women living with HIV/AIDS (WLHADS) fulfilled our dream. More than often men are infected first and pass on the disease to their wives. The women are then widowed, disowned by both families and being generally unskilled find themselves with no public or social support systems to seek out, this along with the burden of caring for children in the face of a hostile society. Therefore IRDRP in an endeavor to provide a continuum of care including rehabilitation of these positive women will provide temporary short stay facilities for convalesce and skills training that would enable these positive women to lead a dignified and meaningful life to the extent possible. Persons infected with HIV with a major push towards community and home based services. The issue of social stigma and HIV would be examined in partnership with PLWA and sought to be addressed.

There are significant number destitute positive women who are generally unskilled and without a means of livelihood, they have also been socially ostracized and are without any public or social support systems. It is of vital importance that this lacuna in the continuum of care be addressed in the form of a multi disciplinary rehabilitation approach. Temporary short stay and skills training facilities on soft toys, candle making etc., for convalesce and livelihood was initiated.

There are 5 women living with HIV/AIDS presently working in Jeevan Women Rehabilitation project. They were involved in candle making, soft toys making, and incense making. It supports their lively hood economically and socially. We do also home visits to strengthen their psychological and moral supports.

Project IX : Promotion of Naturopathy and Yoga

Since many diseases were caused by chemical foods and pollution IRDRP initiated to promote disease free life by promoting Naturopathy and Yoga among the general public as well the medical practitioners. Project was supported by National Institute to Naturopathy, Government of India, Ministry of Health ,Dept.of Ayush ,Pune.

We trained 60 medical practitioners and 30 self help groups leaders in 3 batches. We taught natural food, mud bath, steam bath, vegetable food values, preparing of natural foods, Yoga and diseases curing. Some of them now practicing in daily life.

Future Programs:

- Reproductive Child Health in Tsunami affected areas
- Water and sanitation programs
- Environmental protection and formation of clubs to take action on environmental issues
- Day care home for senior citizens (old aged) attached with income generation activities
- Reproductive child health project in Chennai slum
- Human right activities to protect the environment and women issues

We thank all our donors for contributing their valuable money and material support to reach our goal. We are ever grateful to all of them and special thanks to our International advisors Mr.Istvan Kapuvari, Belgium and Mr.Balamurugan, London for their valuable contribution for the success of our programs.

Place: Chennai-64

Date : 08.08.2006

Dr.Irudayasamy, Ph.D, LLB,BGL,DHMS
Managing Trustee

**WOMEN REHABILITATION PROJECT
PROJECT BY IRDRP, CHENNAI
FINANCED BY LACIM - FRANCE**

