



ARDAR

ASSOCIATION FOR RURAL DEVELOPMENT AND ACTION RESEARCH



ANNUAL REPORT 2011-12

Address:

Association for Rural Development and Action Research (ARDAR)
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Vision

Society in which excluded communities enjoy life of dignity and equality

Mission

- Empowerment of vulnerable communities to address causes that deny them equal opportunities for their quality of life (OWNERSHIP)
- Engagement with the state for inclusive policies and practices (ACCOUNTABILITY)
- Solidarity and involvement of other stakeholders in promoting inclusion and quality of life among vulnerable communities (RESPONSIBILITY)

Values

Mutual Respect	• Respecting others' ideas even if different • Sensitivity towards diverse cultures • Empathetic to vulnerabilities of people • Recognising the dignity
Equality	• Equality of opportunities / policies • Challenge discriminatory practices
Transparency	• Sharing information on resource use, decisions and actions • Proactive in sharing in a form / method relevant to excluded communities
Accountability	• Proper implementation of stated plan and seek consensus on changes • Take responsibility for consequences • Inclusion of excluded people's priorities in the plan
Excellence in Results	• Creativity, innovation in doing things differently • Perseverance in efforts till results are achieved • Quality orientation • Peoples' processes / centrality of people in process

Identity:

ARDAR is a Non-Governmental Organization registered under Societies act 1990 (No. 64/1990), Under FCRA (No: 010350051), Under 12A and 80G of Income Tax Act and with commissioner of PF holding PAN number AABTA0775H. It meets all requirements as per law.

The Board: Dr. V.V.Ramana, a Sociologist who worked as principal and head of sociology for 12 years with a degree college has established ARDAR. He worked with "Institute of Development and Planning Studies", for an ODA and Visakhapatnam Municipal Corporation: "BASELINE AND EVALUATION OF SLUM IMPROVEMENT PROJECT" as in charge director for 2 years. He has experience in improving slums and solving legal and social issues in and around Vishakhapatnam city. He worked on independent research projects like UGC; Indo-Swiss Project; Indo Dutch Fellowship through HUDCO and wrote books and thesis on his research. He was awarded as a young scientist nationally and as a Best teacher in regional level. Since 1990 he was in profession of development through ARDAR organization.

Sl. No.	Name of the Board Members	Designation	Qualification	Age
1	Mr.V.Subba Raju	President	M.Sc.	62
2	Mr.P.G.Suryanarayana	Vice President	B.Com	58
3	Dr.V.V.Ramana	Secretary	M.A. Ph.D.	60
4	Mr.M.Ganapathi Rao	Joint Secretary	M.Com	51
5	Mr.K.Vy kuntha Rao	Treasurer	B.Com	48
6	Prof. K.Sreeram Murthy	Member	MA, Ph.D	60
7	Ms.M.Guramma	Member	5 th standard	42

Office Location:

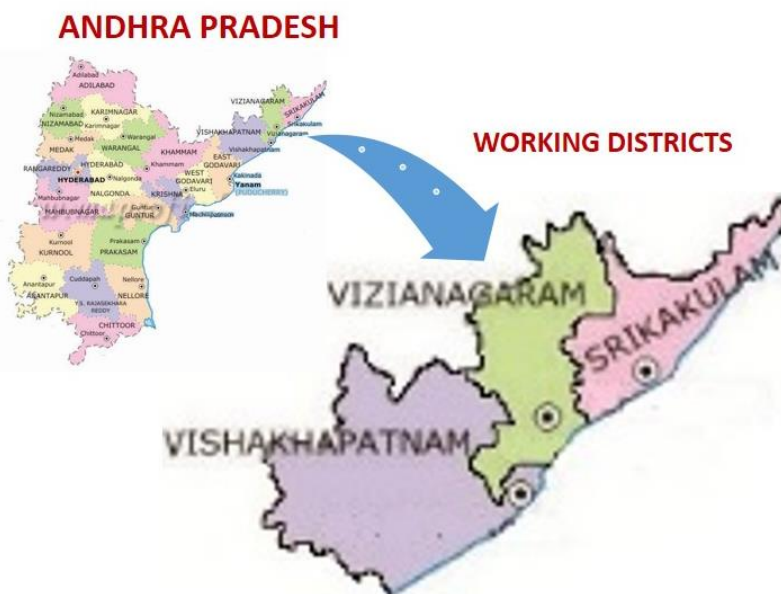
ARDAR, KothaKopperla, KondaJn (located on NH 5 Road), Poosapatirega Mandal, VIZIANAGARAM district, Pin: 535 213, AP, India. Phone: +91 8922 201355, Mobile: +91 94400 19036 E-mail: director@ardar.org.in Also have field offices at Vizianagaram, Simhachalam, Visakhapatnam, Ranasthalam, and Ananthagiri.

Our Bankers:

Union Bank of India, Corporation Bank, Karur Vysya Bank & AXIS Bank at Vizianagaram; ICICI Bank, ING Vysya Bank & Andhra Bank at Visakhapatnam.

Our Auditors:

V. Jagannadham & Associates, Chartered Accountants, 52-8-12/2, 1st Floor, Niharika Enclave (Besides Satyam Computers), Resapuvanipalem, VISAKHAPATNAM – 530 013. Phones: (0891-2549837)



1. CAMPUS CHALLENGE

Campus Challenge has evolved as a Regional Centre for children and youth with disabilities in the northern coastal districts of Andhra Pradesh. Community Based Rehabilitation (CBR), In Campus and Youth trainings are implemented in integrated way to reach as many disabled children and youth as possible during this year. We started an Orthopedic workshop in the campus for preparation of orthotics and prosthetics. English Training Centre is another success of campus in this year.

In-Campus Activities:

Education for campus children

- Children with Mental Disability:** The special education program for 12 children will make them learn daily living activities like dressing, toileting, drinking and eating including learning alphabets, numbers, reading, writing, talking and playing. The program focus on personal skills, social skills, daily living skills and academic skills development.
- Children with Visual Disability:** The 12 children were taught Braille language, enhancing mobility skills and academic syllabus.
- Children with Speech and Hearing Disability:** The special education for 29 children is focussed on Indian Sign Language, Academic syllabus and Advanced English with grammar.
- Children with Physical Disability:** The inclusive education for 45 children is focussed on overall child development. To achieve this we established an English Medium School with Xseed tie up.



Medical Rehabilitation for campus

1. All children meets medical needs in Campus. 4 children have undergone surgery.
2. Physiotherapy is provided to improve mobility. Children and they are monitored physiotherapist.
3. We conduct trainings to mentally disable children on daily living.
4. Orthotic support is provided to 29 children through assessment camp.



Outreach Program (CBR)

Community Based rehabilitation is initiated by WHO is promoted as strategy process to address the broader needs of people with disabilities. So far we reached 310 villages 5 Mandals in three ARDAR working districts covering 543 male and 475 Female a total of 1018 disable persons ageing between (0-25years). We are making people to participate in the process by making Social Maps, drawing their opinion on people suffering with disabilities and also by conducting group meetings and other social events.

Under the program we undertake 1. Social Rehabilitation, 2. Educational rehabilitation. 3 Medical rehabilitation 4. Physiotherapy and 5. Income Generation support.

In this connection we provide awareness and advocacy support and increase local community support. 24 children were sent back to schooling and 13 were provided educational supports. 527 children in medical checkups, 206 in special check-ups, 64 children in 'deaf and dumb special camp, 42 children in

orthopaedic camp were covered during this year. Physiotherapy given to 7 children. A Suryanarayana of 23 a polio suffering youth was given training and supported with electric stitching machine.

Vocational trainings Centre for youth:

A computer training centre with 20 computers was started where a fourth batch is running with 16 disabled children. 9 youth were placed in government and private organizations. We also established stitching, carpentry printing and English training centres with the support from Rotary Club. At present we have 4 youth in carpentry, 19 in stitching centre and 5 in print shop and 12 in English centres.



Orthopaedic Workshop

The unique orthopaedic workshop was established in the campus with Friends Indeed support. The machinery was bought directly from Germany and the accessories was bought from the Mobility India, Bangalore. Five Dutch volunteers are working in the orthopaedic workshop. Till now we supplied 13 orthotics to the campus children.



Orthotics prepared at Campus Challenge along with the beneficiaries



2. SUSTAINABLE TRIBAL DEVELOPMENT PROGRAMME

Introduction

At the 6th of July 2009 the Ministry of Foreign Affairs allocated an allowance to Friends Indeed for the program Ananthagiri 2009-2014 as described in the proposal of the 30th of September 2008. The decision reached Friends Indeed the 15th of July 2009. The project will reach 45000 tribal population covering over 90 hamlets in Ananthagiri mandal, of Visakhapatnam District. The project involves with education, health and livelihood.

The main objectives and planned results are:

1. Access to basic education
2. Access to basic education for children coming from child labor situation
3. Access to basic education for adults to read, write and mathematics
4. Eradication poverty one headed families

5. Eradication poverty farmer families
6. Access to clean water, sanitation, and health care
7. Information and treatment HIV-Aids
8. Care for children and youth with a disability
9. Care for street children
10. Access to the learned lessons how to reach MDG's in a remote rural area

School constructions.

We have constructed a school building at Bheempolu and it was inaugurated on 24th of October 2010. School at B.Kothavalasa will be inaugurated shortly. Government helps us in getting approvals for speedy of the constructions. 10 more were planned for the coming years.



B.Kothavalasa school building and Mr. S. Veerabhadharaju, MPP Ananthagiri mandal inaugurated

ARDAR appointed volunteer, supplied Nutrition Food and study materials. Volunteers are provided orientation on quality education. At present 2010-11 academic year, six students joined Government School Hostels.

Nine bridge schools were started for children away from education for several reasons. The program covered 282 girls and 171 boys during the years 2010 and 2011.

We started 6 adult education centres in this year. The adults learn alphabets, words, signatures. Villagers learn marketing and agriculture techniques on the other hand.

ARDAR also is implementing microcredit to develop living standards of the tribes. In total **567** women have benefitted in this program.



Micro credit members participating in group concept trainings

Under **livelihood** programme we have conducted awareness meetings on land and water development. **Plantation** program was executed in two villages for bringing 24 acres unused land into cultivation. The tribals also Cultivate inter crops like ragi, pulses. FRINDS INDEED team have visited the plantation area on 29/12/2011 at Kodhamaguda village.

NREGS (National Rural Employment Guarantee Scheme) is central government scheme where a person will get labour work for 100 days in a year. People do have to bring their own tools here. They do not have the money to purchase their own tools. We provided basic working tools for the people at Borra, Bheempole and Valasi panchayaths.



Water, Sanitation & Health: In the tribal areas of Ananthagiri Mandal, the most common health problems include incidence of T.B., acute respiratory infections, incidence of malaria, diarrhea and gastroenteritis. The most common health disorders among tribal adults are respiratory tract infections, fevers and alimentary tract diseases. Children suffer gastroenteritis, and acute respiratory infections. Common malnutrition problems found among tribes are anemia, Vitamin A deficiency and Iodine deficiency diseases.

We have started to renovate water facilities in eight villages by the end of 2010. We have finished renovating four water points in this year. Now the people of these 12 villages are happy to have drinking water facility. The villages covered in this year are V.Karakavalasa (Valasi) and Chimidipalli (Bheempole), Tokuru (Muliaguda), Kantipuram (Cherukubidda). We motivate people for safe drinking practices like boiling, filtering, chlorination,

We have organized eight Health Camps and treated 722 patients with different complaints. We identified 69 Malaria positives and supplied medicine. Government supports us for referral to institutions. Lactating and pregnant mothers were treated specially in medical camps.

School health

We treated 149 children during the school health camps. We supported medicine for Malaria with School teachers and C.H.W, A.W.W. Nutrition food like Ground nut with Jiggery and sesame nuts are supplied to the children.

HIV/AIDS: We have just initiated this program. We have developed rapport with the related government departments. We have collected base line information and started discussions with the community and leaders. We have organized two HIV awareness meetings during this quarter. We motivate them for volunteer testing. In this process SADHAN Clinic (a unit of PSI India) agreed for organising regular HIV testing camps in the villages. We have conducted one testing camp in Mardhaguda village. Total 28 persons were tested during these camps and found two positive cases. We have organised seven awareness meetings. We identified two positive cases in Kondibha Village through group members. We have collected the details of 17 cases from the government and are asking for complete list in other department.



3. COMMUNITY CARE FOR HIV/AIDS

GOAL

To reduce HIV-related morbidity/mortality in adults & children and address the impact of HIV on children

During this year we have identified 602 CAA (Children Affected by HIV/AIDS) and 18 Children were CLHA (Children Living with HIV/AIDS) from 315 families. We provide 1. Emergency Support 2. Opportunistic Infections Support, 3. Community Foster Care, 4. ART Adherence Counselling, 5. Nutrition support, 6. Support Groups, 6. Education Support, 7. Volunteers, 8. Promotion of IGP.

Total **1000** children were benefited under this emergency Support. We treat opportunistic infections and provide travel support for OI treatment. We mobilize and motivate community to adopted children living with HIV/AIDS and further we support the child and the family. 37 children were benefited this year. We educate and encourage continuity of ART medicines. Total **200** children were provided nutrition food like Raagi floor, Groundnuts, Jaggery and dry palm dates. Two types of support groups 12 children and 12 adult groups were formed. They work to reduce stigma in their community. We reduce school dropouts from HIV affected families. 100 children were rejoined and supported with books, bags, pens and in some cases school fees. 30 volunteers suffering HIV/AIDS were trained on the situation. They help to identify people living with HIV and follow up. 50 families were identified and supported with interest free loans. We provide skill up gradation trainings. Socio-economic development is enhanced through this support



T.I. for INJECTED DRUG USERS

Goal: To halt and reverse the HIV Epidemic among IDUs Project in Visakhapatnam City.

Objectives:

- Prevention of New HIV infections and saturation of HIV Infections among IDUs.
- Providing essential means and services to IDUs and their sexual partners to practice safe behaviour in injecting as well as sexual to reduce transmission of HIV.
- Forming and Strengthening Capacities of CBOs to decide for themselves and are able to lobby and advocate.
- Creating Enabling Environment to Removing Obstacles in the Way of Safer behaviour but also Proactively Supports the practice of Safer Behaviour.
- Encouraging and providing options and opportunities and information and empowerment to discontinue to addition to drugs.

The core components of the project are Community Outreach, Drop in Centre, Needle and Syringe Exchange Programme, Primary Health Care, Behaviour Change Communication, STI Management, Condom Promotion, Referral Networks, Creating enabling environment

Core Indicator wise Achievements of 2010 April to 2011 March

Sl.No.	Core Indicator	Achievements
1	Outreach (Regular Contacts)	353
2	STI Management	21
3	Needle Syringe Exchange Programme	82173
4	Condom Promotion	64281
5	Other Referral Networks	
	1. HIV Tested	479
	2. Total Positives	12
	3. Referred to ART	13
	4. Referred to Positive Network	9

5. MANASU GIRL CARE CENTRE (A better future for vulnerable girl children)

Goal: To rescue, rehabilitate and reintegrate trafficked and vulnerable girl children.

We unified 51 children and another 21 children are rehabilitating in the home. The outreach staff responds 24 hours to the emergencies. We provide services like 1. Rescue, 2. Rehabilitation, 3. Unification, 4. Counselling, 5 Job opportunities, 6. Education and Vocational training:

We rescued 24 girl children rescued and placed at our centre. These girls belongs to Nellore, Kadapa, Srikakulam districts. Girls from Orissa state also get stay in our centre. Police and government organization rescue and refer children to the centre. We have provided rehabilitation to 21 girl children at MANASU during this year irrespective to caste, religion, creed and vulnerability. Nutrition food and necessary supplements are provided during their stay. We have unified 21 children during this year. We counsel parents and children during unification. As a part of follow up we visit them for assessing their situation and progress. Rescued children are under mental pressure and some have suicide tendencies. Regular counselling is provided to stable their mental condition and change their negative attitude towards life. We provided 157 counselling sessions during the year. As we have network with companies and organizations four girls were placed in computer and production firms this year. 22 girls are continuing their formal education in the private school near by the centre. The younger girls got very good marks and the older girls did alright. Four girls were attending vocational training on computer, beautician and tailoring.

5. MICRO CREDIT TO SINGLE WOMEN

OBJECTIVE: The project aimed to develop the single women who were socially & economically in vulnerable condition. To form a sustainable village level savings and credit groups with single women of fisher villages under micro credit programme.

In this process we supported 58 groups with 824 women members in 15 villages in year 2007. We provided support with revolving fund for trades like fish vending, cradle making, grocery shop, tiffin shop rope making business, fish storage business, ragi and some petty businesses. In year 2011 the focus is on strengthening of these groups and handed over the revolving fund to them.

Group Meetings: In this year 2011 we started handing over process to the groups for this profess we started group meetings. These group meetings will focus on the concept and advantages of the group concept& systems. In this year we covered 750 members in 224 group meeting covering 15 villages

namely Madduru, Jeerupalem, Allivalasa, PeddaKovvada, Donipeta, KothaMukkam, Komaravanipeta, Thammayyapalem, Barripeta, Chikatipeta, Pothayyapeta, KothuruGurayyapeta and China Kovvada. We educate them on bank transactions and book keeping.

40 groups covering 510 members were handed over to the community out of 824 members from 58 groups.

	Target	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Year
Groups	58	2	15	18	5	40
Members	824	28	176	219	87	510

Accounts were opened in their nearest four banks. Details are as below.

S.No	Bank Name and Place	No of Groups	No of Members	Amount
1	Andhra Pradesh GraminaVikas Bank, Konada	4	40	40,000
2	Coopereative Bank, PoosapatiRega	11	166	1,66,000
3	State Bank of India, Kosta	21	258	2,58,000
4	State Bank of India, PydiBhimavaram	4	46	46,000

Leadership Training: During this year we conducted 4 Leadership Trainings covering 49 groups four from each group belonging to 15 villages. We provide training on capacity building, leadership qualities, coordination between the village level groups, communication, public speaking, advocacy, book keeping.

Introduction of savings: The savings concept is introduced for better owning of the groups by the members. This will help to give more financial strength for the groups. Some groups are saving Rs. 100/head and some are Rs. 50. At Peda Kovvada, Jeerupalem and Allivalasa villages are very identical in savings. More the savings more the loans they get to develop their business.

Impact:

- Families are self-sustained through income generation programmes
- Savings are started through groups
- Life style is changed
- Providing education to their children
- Health problems are minimized

6. SUPPORT TO HELPLESS AGED

Goal: To provide care and support to helpless aged

We identify old aged who cannot work, and abounded old aged people. They suffer several health disorders and suffer hunger and poverty. Since 2008 ARDAR supports such families. We provide household and medical support. We provide medical checkups every weekend. With our support these members are self-sustained. Their health is restored and even able to find income generating methods. They are feeling confident and self-sustained and thankful to our support.



7. QUALITY EDUCATION

Goal: To improve the quality of education in fisher villages of Vizianagaram and Srikakulam Districts.

We covered 2114 children under 18 years from 15 fisher villages in Vizianagaram and Srikakulam Districts covering 15 schools. We identified two dropout children and have rejoined to in schools. We covered 1569 people through 60 awareness meetings. We discuss on need of education and school regularity and other issues. We also provided 29 parents meetings from 15 schools covering 599 parents. We educate them on children neatness, sanitation in school premises, parents' responsibilities and prevention of the children migration. We ensure the process of scholarships for the 11 children who were supported with scholarship last year.

English Classes: We provide English course to 548 children from 12 fisher villages through two centres at Thippalavasa and in campus. Children from Thippalavalasa, kothuru and Madduru are covered at center in Thippalavalasa village. Children from Srikakulam district attend course at campus Poosapatirega.



8. URBAN HEALTH CENTRE

Goal: Decrease Infant Mortality, Maternal Mortality and Providing Mother & Child Health services

The urban center at Lankapatnam serves 24000 people belonging to 8 slums in the city. We have conducted 84 ANC clinics, 97 Janani and 50 counseling sessions during this year. Through these programs we provide knowledge on pregnancy care, need of institutional deliveries, nutrition food, benefits of breast feeding, infant immunization, gap between birth to birth.

We treated 7752 people in outpatient program this year. We treated 39 patients suffering with diarrhea and 78 patients suffering with ARI.



Indicator	Coverage	Indicator	Coverage
ANC=0i=[p]		Live Births	297
TT 1 st Dose	326	Immunization of children	
TT 2 nd Dose	335	BCG	153
High risk ANCs detected	24	OPV/DPT/HEP3	
Deliveries		1 st Dose	254
Institution	292	2 nd Dose	259
Home	11	3 rd Dose	251
Family Planning		Measles	273
Permanent Methods	108		
Temporary Methods	343		

OUR PARTNERS



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