

Project Report

1. Project Summary

Project Title			
Karuna Project – Stepping Stone Charitable Society			
Project Location: Country	India	Region / District/ Town / Village	Mumbai
Project start date	January 2018	Project end date	December 2018
Fincode			
Report written by	Franco Lonappan	Email address:	francosweets@gmail.com
Date submitted			
Budget summary (Local currency)	Annual Budget	Actual expenditure during the reporting period	Total Expenditure this year
	2211700.00		2297804.00

The Karuna Project is slowly adapting to a more rights-based approach, focusing more on sustainability and empowerment in the community that we work with. While the need for medical care still exists, more emphasis is given to microfinance, job skill training and microenterprises. The team's thinking is steadily shifting from 100% welfare to more empowerment and self care. While the shifting is steady, we have ensured the care provided is still effective.

The Karuna Team has developed new partners over the last six to seven months and through these partnerships we have managed to provide Skin awareness and medical camps in two slum communities, two children care homes and one in a red-light area of Mumbai. We are exploring more options and more opportunities are coming up. There is a request to provide awareness and camp at one of the Mumbai Central prison and in one more red-light area. Karuna over the years have gained expertise in skin infection treatment and disease and care, we want to offer these services to the wider community. This would also give us opportunities for early detection of leprosy in new cases.

Medical care and treatment through the projects Mobile Clinic continue to reach the people affected by leprosy in nine different locations of Mumbai. And in one area we provide general medical treatment. There has been a surge in the number of new patients coming to the general medical clinic many with skin issues and we have seen good results of recovery over the last few months. In the last seven to eight months we have merged two clinic locations, phased out two areas and visit alternate weeks in five locations where either the patients do not need much medical care or there are other means available. These steps have given the team the opportunity to focus on awareness and medical camps. The team has also been able to meet once a month to discuss and deliberate the best way forward for the project.

In all the Karuna Project have provided medical care and treatment to 2431 male patient and 2266 female patients in the last one year, a total of 4697 treatments.

The microfinance groups are able to function by themselves with less and less input from Karuna. The team has been encouraging the leaders to take more initiatives and the rest of the members to be supportive of the leaders. 75 ladies through 7 microfinance groups are registered and are functioning. The tailoring classes are continuing. The ladies that have graduated are able to take on stitching orders and are able to earn an income giving them a bit of financial independence. 11 children are in a home in Goa receiving education; however, this would be the last year the children would be in Goa the child welfare committee has asked all children from Maharashtra to return to this state. 1 youth from the Borivali Leprosy Colony placed in Leprosy Mission Vocational Training Center in Nashik has completed the computer course and has secured a job in Mumbai with one of the IT firms.

4 patients have been referred to various hospitals mostly to receive treatment for their ulcers. Two of them had severe infection maggots infested ulcers, the team patiently cleaned the wounds before sending them to the hospital for further treatment.

14 of our patients deceased in this last six months. All of them had been receiving long term treatments from Karuna. Vimal a lady just in her sixties had a big ulcer on her elbow she was in much pain and was irritated with everyone due to the pain she was experiencing. Over two months of good care brought healing to her wound and a smile on her face.

Is the project working and effectively addressing the problem(s) identified in the proposal?

Yes / No / Partially – explain why.

While the team enjoys good relationship with the patients and has the trust of the community people, the team is actively moving from being an entirely welfare focused to rights-based focus. The ladies from the microfinance groups have been visiting the bank and the municipal office for all purposes of the group. By merging and visiting alternative weeks to the locations the team has been effective in conducting awareness programmes, skin medical camps and team meetings. The team has been encouraging self care among the patients and peer care for dressing of ulcers.

The team is considering ways to increase our impact in the city by partnering with the local DLOs and other government and non-government agencies.

2. Project activities

Please provide a clear and concise summary (bullet points, pictures) of the activities carried out in the reporting period and how they contributed to the outputs. Highlight any significant changes to activities that were made and explain why the changes were made. Comment on the progress of any new activities and approaches undertaken. **(Maximum 500 words)**



1. Tailoring classes

Seven Trainees are in the process of finishing their basic tailoring course at the Trombay Community. Two more ladies joined the existing five trainees making a total of seven. Four sewing machines that were donated to the project are being used to full capacity. The women bring their own cloth to stitch clothes for themselves and their family members. The seven graduates from the first group have mastered machine stitching; they have been taking stitching orders from their family and friends. They have also been stitching cloth bags which the Karuna team has been able to sell and bring in some income for the ladies. A master tailor from another organisation has been providing his expertise to the Karuna trainer and the trainees.

2. Microfinance

Seven Microfinance group are currently functional at the Malad and Trombay Communities. The group at Malad has been lending short term loans at 2% interest rate for their members. Some members have used the amount to buy a sewing machine with a plan to take up stitching orders while they function as house wives. The members have been repaying the loan regularly. The Karuna team continues to be a safety net for the groups. The group at Trombay needed a lot of encouragement and support before they started to function more independently. The older groups are now helping the news ones with all the necessary paper works. However, the groups are not convinced yet that they can take a loan and invest in a small business. They want to wait till they have a big balance before they start using the money, the team encouraged the leaders of the microfinance group to learn to manage with lesser amount and learn how the system works before lending bigger amounts. Two microfinance groups from Trombay were inaugurated in the month of March and welcomed to the rest of the existing group's, this was a good way to encourage their commitment to run the group for three months and acknowledging their presence.

3. Microenterprises

Ten ladies were involved in stitching cloth bags using their tailoring skills to earn an income for themselves and to bring some income for the Karuna Project. The bags were sold to individuals and we also got an order from a corporate office. Nearly 1000 bags were sold fetching income for the ladies after all costs were covered from the sale of the bags. We continue to look for a steady flow of regular stitching orders to help the ladies get a sustainable income.

4. Vocational Training

A youth from Borivali, who was sent to VTC Nashik, has returned to Mumbai and he now works for an IT company. He has completed the computer course that had been offered by VTC.



5. Staff Training

The team entire Karuna team underwent a two days training on Welcoming Conflict It was a good time of learning for the team as we got to learn the different personalities and temperaments of each member and learnt the different style of response to conflict. The team got to learn that a conflict by itself is not a problem it's our response or our reaction to a conflict is what makes the difference. The team also received training on 'Safeguarding'. This was a new concept for the team; the team is considering drafting a policy for safeguarding of both the team and the beneficiaries.

6. Awareness Programmes

Karuna Team conducted four skin and leprosy awareness programmes in three different locations. Two of the programmes were conducted in a home for street children, each time more than twenty children and staff attended the programme and was benefited with the knowledge they received, many of the older children asked many questions related to leprosy and hygiene. One other awareness programme was conducted at a palliative care center, more than thirty patients and staff attended the programme. The center provides long term care for people affected by HIV and leprosy. The leader of the center wanted Karuna to especially give awareness on hygiene and managing ulcers.

7. Medical Camp

Besides awareness programmes the team conducted 5 Medical Camps related to skin infections and diseases with a view to detect signs of presence of leprosy. A total of 190 people mostly women and children received the benefits of the medical camp. Networking with other organisation had created some new opportunities for Karuna to visit a government girls' home and a red-light area in Mumbai. Many skin infections were successfully treated. One teenager at the girl's home said unlike other medical camps the Karuna team is very friendly. You relate to us and care about us and not just give out medicines. This home shelters victims of human trafficking.

8. Mobile Clinic

The Karuna Mobile Clinic now runs in 9 different locations in Mumbai city providing medical care for the leprosy sufferers and 1 general clinic. The mobile clinic bus for the first time has been repainted and some minor wear and tear repairs done, it is ready for another very long haul. In the last six months Karuna has provided 1398 treatments to people affected with leprosy and 685 treatments in the general clinic. This includes medical consultancy, medicines and dressing of ulcers. The team also spends time with the patients providing counselling and encouraging them to do self care.

9. Visit by Mr. Shirish – Miraj

Mr. Shirish from, Miraj visited the Karuna Project on the 15th & 16th November 2018. This was his follow up trip for the training on Advocacy and Rights based approach that the Karuna Team had undergone last year. Mr. Shirish visited the Trombay colony on the 15th and the Borivali colony on the 16th. He was satisfied at the level at which the Karuna team engages with the community. The microfinance groups and tailoring classes were indicative of moving in the right direction of Advocacy and rights based approach he observed. He was impressed that the mobile clinic is able to reach out to people suffering with leprosy. He was the chief guest at the children painting competition, he was excited to see the enthusiasm in the children as they participated in the competition.

10. Annual Party

This year we had a bigger number of participants for the Annual Party. We had leaders of the seven microfinance groups, volunteers, Karuna staff and the leadership team. We had an excellent time, with one volunteer sang a song in the local language, we had lunch, games, gifts and sweets given to everyone that were present at the party.



11. Exposure Trip to Miraj

Four Karuna Team members visited Miraj. The team members spent two days interacting with the staff in the physiotherapy department, the OPD, Pharmacy, dressing room, autoclave room. The team visited the physiotherapy room. The team got to assist in the OT with reconstructive surgery. She is now confident that some of the Karuna patients could be referred for RCS. The other team members spent time at the dressing room learning ulcer care and self care. The team learnt the effective use of esol and only guaze in treating the ulcers, sterilizing the instruments after every use. Identifying a person affected with leprosy by looking at the muscles of the palms something the team learnt for the first time. Three of the members visited the community project to interact with the microfinance groups. The team was impressed at the way the groups have been utilising their money collected in their account. The members shared what businesses they are doing and how microfinance has impacted their lives. At the request of the Karuna team two of the ladies were willing to share their experience with the groups in Mumbai.

12. Children Day Celebration

The Karuna Team has been keen to engage with the children of the microfinance groups and the grandchildren of the people affected with leprosy. The team after deliberating decided to hold a painting competition on the 14th of November as this day is observed as children day in India. 60 children took part with great enthusiasm. An intern with the team and some Volunteers joined together to organize and conduct the competition. The children were divided into three age appropriate groups and three paintings were chosen for each of the groups. Prizes were given to the nine best paintings and each participant was given a chocolate bar.

Were there any unexpected results, either positive or negative?

The response we received for the painting competition for the children of microfinance group ladies and leprosy affected parents, grandparents was very positive and encouraging sign. There is a good opportunity to do awareness and teach hygiene to the children in the coming days. The opportunity to conduct medical camps among the victims of human trafficking was also a good opening for Karuna.

The number of people that participated at annual party was very unexpected, this was a good sign of a good relationship that Karuna has built with the people in the community.

Case studies and Photographs: Case studies help us to see the impact of our work with real people.

Dayanand is a 70 years old person living in Mumbai along with his wife. He has three children but none of them live with them. Many years ago, when he was working in underground mines, he had developed white patches. People were afraid of his patches and kept a distance from him. He was not aware of leprosy at that time. Even his family ostracized him and kept him separate from the rest of the family including all the utensils that he used. He migrated to Mumbai to seek medical treatment for his patches and there he discovered that he was affected by leprosy. His family came to visit him in the initial days but they severed ties with him entirely. Leprosy had also made him very sick and weak due to which he could not continue working. Even though his family rejected him there was other like him who showed acceptance. Life was better once he found a group of people that accepted him. He also came to know about the Karuna Medical Clinic and Karuna has brought a big change in his life. Even though he is getting old, the Karuna medical services have been a big help for him. He has avoided living with his children feeling he may be a threat to them too, however he lives with his wife and both receive medical care from Karuna. He encourages and motivates others to get timely help when he sees them in similar conditions as his and he quite enjoys doing that.



3. Annual Report

3.1. Direct clients that have been assisted by this project during the reporting year

	People directly affected by leprosy				Family members of people affected by leprosy				Others				Total			
	Male		Female		Male		Female		Male		Female		Male		Female	
	Plan ned	Actual	Planned	Actual	Plan ned	Actual	Plan ned	Actual	Plann ed	Actual	Plan ned	Actual	Plan ned	Actual	Pla nn ed	Actual
Child < 18yrs		15		10						75		111		90		121
Adult 18- 59 yrs		1656		1497				85		685		563		2341		2145
Adult >60yrs																
Total		1671		1507				85		760		674		2431		2266

3.2. Lessons learnt during the reporting year

What lessons have been learnt that can be built upon in the remainder of the project / in future projects?

The big lesson that Karuna has learnt over through this year is making people more interdependent and not become entirely dependent on Karuna is very important for the growth of the project. Charging people, a small fee for certain services or medicines is a healthy practice and not provide everything free of cost makes people appreciate and value what they are receiving. Guiding people to access available resources and facilities is helping them gain more confidence; this was observed as we got the leaders of the microfinance groups to interact directly with the municipal office or the banks officials. Spreading wider gives more opportunities and it aides in the individual growth of the team members.

Coordination & Partnership: How is the engagement of other organisations (e.g. government, NGOs and other stakeholders) in the implementation, management and monitoring of the project during the year working?

The Karuna Project has maintained and made some new roads in networking with five new non-government organisations and two corporate companies. These new openings have given opportunities to conduct awareness programmes, conduct skin medical camps and get stitching orders for bags. Karuna had organized a visit to a production workshop was a good learning experience for the ladies from the tailoring unit. One of the organisation has been sending their master tailoring trainer and quality controller to give inputs to the Karuna trainer and the trainees. While the team has managed to maintain the existing contacts, we have developed new ones.

Participation: How have you engaged the target population and the wider community in the implementation, management and monitoring of the project during the year?

The microfinance teams have been functioning independently. The leaders of some of the newer groups have been interacting with the Karuna team for guidance but they have been taking act part in executing the functioning of the groups. Also, the leaders of the older groups have been now guiding the newer ones. Many individuals from the colonies have helped in collecting disability data from the patients, this data would be later used to gain access to the local DLOs and facilities that they offer. Some individuals have worked alongside Karuna to organize various programmes in the communities. The microfinance groups have been contributing towards refreshments during the various programmes we have conducted for the groups.

Capacity: Do you, or the implementing partner, have the right capacity in place to implement the remainder of the project? If not, what else is needed?

The current team is adequate to implement the project. Various training inputs received have all added a lot of strength to the Karuna Team. Mr. Franco continues to provide oversight to the project and has kept the team focused on the road ahead. He was successful in recruiting a Project Leader from the month of March 2018. With the new project leader taking the lead the team has been consistently having team meetings once a month; this has enhanced the team's performance. The new leader has been writing reports and the finance statements from the time he has joined the team. He has also been able to connect with other stakeholders to provide necessary information about the project whenever required. The Project Leader brings in contacts of several organisations, to increase our resources. The Karuna team is a close-knit team enjoys good interpersonal relationship.

Sustainability: (i) What progress has been made during the year to ensure that the benefits of the project will be sustained after the project has ended?

Since Karuna is trying to move away from 100% care and more into empowerment, Karuna would find alternate sources to meet most of the needs of the current population we serve. A new supreme court direction to all government hospitals says that people with leprosy must be given medical care and ulcers treated. We would try to connect the patients especially the pavement dwellers to the local government general hospital where services would be almost cost free. Karuna would focus more on the awareness, prevention and early detection of leprosy and the treatment of it. With a good potential for both microfinance and microenterprises growing the communities could become self-sustainable.