

Project Report

1. Project Summary

Project Title			
Karuna – Stepping Stone Charitable Society			
Project Location: Country	India	Region / District/ Town / Village	Mumbai
Project start date	January 2019	Project end date	December 2019
Pincode			
Report written by	Karuna Project	Email address:	karuna@sscsindia.org
Budget summary (Local currency)	Annual Budget	Actual expenditure during the reporting period	Total Expenditure this year
	2,211,700.00		24,29,245.38

This year the Karuna Team went all out and conducted many surveys in partnership with Bombay Leprosy Hospital. The surveys were carried out in three slum communities and we managed to cover 316 families. During the monsoon months the team surveyed 200 children in five different municipal schools. The students were given a short awareness on skin related infections and a more elaborate awareness on leprosy before being physically examined by the team. The team had identified two new cases during the survey that we jointly conducted both the persons are referred for further investigation and treatment if required.

Providing Medical care to the leprosy affected people has given Karuna Project an open door in the communities to provide various other services. While the PWL are satisfied with the care provided to them the community at large too is being benefited because of the PWLs through the microfinance groups, the tailoring course and various other soft skill trainings. Karuna is also focusing on what kind of programs can we run to ensure that children and grandchildren of the affected people are educated and are equipped with sustainable skills so that they can rise up above the stigma and poverty that often keeps them from soaring high.

Short trainings have been initiated on health, hygiene and personal development among the 70 ladies of the 7 microfinance groups that are now functioning. The trainings are conducted during the monthly microfinance meetings. A short ice breaker helped the ladies to group themselves together followed by the training and the business meeting. Two more groups have received gift money from the municipal corporation. The groups have started to give short term loans at an interest rate of 2%. Woman's day was celebrated among the women in the two communities with Rangoli competition, the women highlighted various social issues through the Rangoli drawings. Two more microfinance group are registered taking the number of microfinance groups to nine in three communities. The leaders of the groups are becoming more efficient in managing the money through regular collection, banking and providing short term loan to the members that are in need.

Tailoring classes are continuing in three communities. Bags are being stitched and sold generating income for the women this has encouraged a few women to be more committed to stitching the bags.

The children in Goa are been well taken care of by the care home, they are now functioning independent of any involvement from Karuna Project. However, Karuna is open and ready to pitch in with any form support that they may need, especially when the children visit Mumbai to meet their family.

During the year 2019 Karuna Project has provided 4311 medical treatments in 10 different locations. We provided 1233 treatments to male patients and 1162 treatments to female patients, a total of 2395 treatments to people affected by leprosy and a total of 1916 general treatments. Karuna Project provide medical care for 96 people through the Medical Camp conducted in a notorious red-light area for victims of human trafficking.

The Karuna Team meets once a month to discuss, plan and decide every action. The team is getting more efficient in running programmes, trainings and in gathering the people of the community together for any kind of action.

The team took time to look through some reflective questions to take stock of the entire year's work and relationships. The team would be meeting in the month of January to draw up new plans for the following year. The team looks forward to roll out more programmes that would be empowering and equipping the beneficiaries that we serve.

Is the project working and effectively addressing the problem(s) identified? Yes / No / Partially – explain why.	
The project is working and effectively addressing the problems identified, there is however always room for growth and improvement. The Karuna Team has been able to manage the clinics in different locations well enough to get time for Survey, Training, Awareness and Camps.	
Karuna has partnered with another Ngo Bombay Leprosy Hospital and conducted survey in two slums on three occasions and the team carried out one survey by itself we surveyed over 266 families within a span of four days. Nearly 200 school students were surveyed for early detection of Leprosy during the months of July to September 2019 in 5 different government schools. And 50 families were surveyed as follow-up to the previous survey where two people were suspected of being infected. We have referred two new cases to Bombay Leprosy Hospital for further treatment and follow-up.	
Three ladies who have completed the tailoring training have taken loan from their respective microfinance group and have purchased sewing machines both the ladies are now earning independently by taking stitching orders locally. One lady gets stitching orders from outside along with the Karuna bags order and she makes an earning from both. Three ladies that had purchased machines when they joined the classes are now able to take stitching orders and have started earning a small income. Three lady's stitch bags for Karuna whenever there is an order for the bags and they are paid stitching charges on per bag basis.	
The leaders from the Microfinance Groups are taking lot of initiatives in managing the groups with ample support from the Karuna Team. More people are showing interest in starting more groups.	

2. Risk Management

Risk to the success of the project	
1. People affected by leprosy with a welfare mindset and unwilling to take ownership of their own development	Karuna has initiated short trainings as well personal counselling to slowly move the PAL from a welfare mode to taking ownership. We had to deal with the issue of stitching bags as a way of sustainable income, the ladies were reluctant to take orders and stitch, in one community the women refused to receive training in making sanitary pads and set up business post training. We succeeded in getting the ladies in taking stitching orders however, the sanitary pads business did not take off. Through the Microfinance Groups women are being trained to take ownership for their development and to focus on the wellbeing of their children, this is helping them realize that change is within their power.
2. Lack of volunteers to ensure effective project implementation	The team is managing well though at times it is felt that more hands with special skills could achieve more. The team is in the process of getting a regular supply of volunteers, each team member is being encouraged to promote the work of Karuna to their community to get people interested in volunteering with Karuna.
3. Community leaders unwilling to support hygiene and sanitation programs	The communities have latrines both public and some houses have private too. Hygiene and sanitation within the vicinity is not very good but people have settled for it. Karuna is focusing more on personal hygiene to help prevent diseases specially during monsoon.

3. 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

Twenty-Four trainees were recruited when the Tailoring classes were initiated by Karuna Project. **Sixteen** of the trainees have completed the full course. Six of the ladies (three from each community) have purchased their own sewing machines and are independently taking stitching orders and have started earning in a small way. Two of the ladies have taken a loan from the Microfinance Group to buy sewing machines. Three of the ladies besides taking private orders they also stitch bags for Karuna whenever there is an order. Eight of the ladies continue to get trained in quality finishing of products and to stitch bags. One new batch of tailoring classes was started in the month of July 2019 in Kalyan. **Sixteen** ladies are regularly attending classes in Kalyan. **Six women** have completed the Karuna Tailoring Course and would soon be graduating they would be receiving certificates of completion. Karuna is in the process of recruiting new trainees to start **2 new batches** next year **2020**.



2. Microfinance

The **seven registered groups** are functioning well except for few struggles in terms of the members returning loan amount on time. The team is working with the leaders of the groups that are facing the challenges encouraging them to deal with the situation. Some groups have come a long way in taking the risk of giving loans. The routine running of the groups are carried out by the leaders of the groups. The group leaders are maintaining and updating every



Month records of the meeting, loan details and bank transactions. **Two new groups** have been started in the last six months. We are in the process of readying one more group in Kalyan community. We are also in the process of starting a **men's microfinance group** in Trombay. The number of members has gone up to **102 in 3** communities.

3. Awareness Programs

Karuna Team conducted Skin Disease & Leprosy Awareness programmes among women who are trapped in prostitution, these women live in a very congested area and they are prone to skin infections. Women and children in a tribal village in the outskirts of Mumbai have very minimal access to medical care and very backward received awareness and medical care. We have also conducted monthly trainings during each of microfinance group meeting focusing on health, hygiene and personal development.



4. Medical Camp

The Karuna Team conducted 12 Medical Camps among 4 groups of people. Seven of the camps were organized for the women that are trapped in prostitution, two camps were for children from a care home, these children are off the streets and are being cared for by the home. One camp was organized for the women and children in a tribal village in the outskirts of Mumbai. One Diabetics Camp for people suffering with leprosy in Kalyan 40 people were benefited.



5. Mobile Clinic

The Karuna Mobile Clinic provides services in eight locations for people that are affected by leprosy and in one location for general clinic. A group of ten patients returned back after a long trip to their village. The clinic time is also utilized to interact and counsel patients, often just a few words of encouragement or enquiring of their wellbeing goes a long way. We have also conducted several Self Care Trainings with the PWLs. The Karuna team is also involved in the follow up of the new patients post the surveys that has been done.

6. Children in Care

The Project Coordinator and the Project Leader visited the children that are placed in Goa for care and education at Bethesda Life Centre. The visit was important since a new government ruling was preventing them from continuing their stay at the home. However, the home authorities have convinced the government that the children have been there for many years hence it does not



recommend they be shifted. The juvenile court has finally passed a ruling that the boys would continue to stay and complete higher studies. Two boys have relocated to Mumbai currently they are being helped by another organisation to pursue their further studies. One 12-year-old girl has been placed at BLC home; she joins her brother who is already been placed at the home. One young boy has been placed in a local care home in Mumbai.

7. Rain covers and plastic sheet

Monsoon has set in at Mumbai and Karuna have promptly provided the rain cover for the patients that live on pavements. They were glad to receive these covers as these will be their roof over their head during the monsoon. This is one more simple way of showing care for the people affected by leprosy. Fifty PWLs have benefited from these.



8. Woman Day Celebrations

This year the team decided to have a Rangoli competition for the women in two communities. The women came in colourful sarees and most participated in the competition while they others cheered them. The women were very creative in the designs and the material they used to draw the Rangolis on the floor. Some women adapted 'woman empowerment' and 'girl power' as themes for their designs.



9. Children Day

Children day celebrations were held in 3 in three communities. The Karuna team conducted exciting programmes for the children and their mothers. We conducted games for the children, activities for the mothers and children. The team listed down the likes and dreams of the children and then the mothers were interviewed to find out how much the mothers knew about their children. Many mothers were very aware of their children likes and dreams. A short talk on the "Importance of Communication between Parents and Children in the age of Electronic Gadgets" the team left the children and their mothers' content with gifts and sweets.



Case Study 1

Two of the ladies got the combined benefit of learning a skill and joining a microfinance group. This is a success story of how two ladies from one of the communities that Karuna work have benefited directly by the tailoring classes and the microfinance group that the project initiated. One of them is married and the other one is doing her second-year bachelor's degree. Both the ladies joined the Microfinance group and they were enthusiastic about joining the tailoring classes too. With proper guidance from the Karuna team who showed them the possibility of learning a skill and by securing a loan from the microfinance group they could one can earn a sustainable income. After 18 months of training and regular saving with the microfinance group both the ladies have now completed their tailoring classes. Both have mastered stitching skills and both have availed a loan from the Microfinance Group and have purchased their own sewing machines. They now take private stitching orders and they get it done from their homes. Both the ladies also stitch bags whenever Karuna Projects gets them an order. The younger lady has managed to pay back the loan and the interest already. They both are such an inspiration to the rest of the group and a big encouragement to the work of Karuna, we look forward to more such stories in the months and years to come.



Case Study 2

R&D are two brothers whose mother receives medical care from Karuna. They lived with their parents on the pavement along other people that were affected by leprosy. Knowing that life on the streets is harsh the parents requested the Karuna team to help place the boys in a secure place. Karuna Project intervened and placed the boys in the care home in Goa when they were just 6 and 5 years of age. The boys got to visit their parents during summer vacations but for the rest of the year they were going to school getting Educated in the local school in Goa. They learnt sports and learnt

to play musical instruments. Over the years the boys have developed interests in different fields and they wanted to pursue their dreams. In the month of May 2019 both the brothers visited Mumbai and during their visit they were also very eager to spend time with the Karuna team, talking about their lives in the home and about their future dreams and aspirations. R has now turned 18 and his brother 17. While R has completed 12th standard decided to do a bachelor's degree in commerce and learn sound engineering. D could not complete his 10th standard. However, the team has helped him enroll to study in Mumbai. He is also enrolled in a computer hardware course. Together the two brothers are now living in Mumbai placed with another organization who have offered to help the brothers with their further education and with their accommodation in the city.



Were there any unexpected results, either positive or negative?

We received a positive response from Bombay Leprosy Hospital to do surveys in the city to identify new patients. The team's readiness to do the survey yielded in identifying two suspicious cases. Follow was done to ensure they are either not affected by leprosy or they are and are following the MDT regime.

We got good support from the Goa Bethesda Life Center staff in retaining the children that are living there and their willingness to accept the 12-year-old girl.

We got an unexpected visit from a man at the general clinic location with multiple patches on examining and further talking to him we found out that he was a drop out from the MDT treatment. The team has once again referred him to the hospital to help him complete the course.

The team managed to strike a balance between Caregiving and Caretaking. Many in the communities feel empowered, this is a good beginning.

Not all the ladies that were trained in tailoring at the Malad were willing to take up bags stitching orders and some ladies after accepting the order went on a tour to south India this was very unexpected and it had a negative impact on the other ladies who were willing to complete the order, the tailoring teacher however, brought the situation under control and completed the order. One group of women from the Trombay community refused to undergo the training in making sanitary pads after they had agreed to the municipal corporation who were in the process of setting up machineries to training and help the women generate long term sustainable income to the household. The downside of this was that the ladies did not earn much. These set backs were however helpful for the team to make the ladies understand that they need to be more committed in order to get a steady income and work as a united group.

6. Annual Report

a. 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		Total	
	Male	Female	Male	Female	Male	Female	Male	Female
	Actual	Actual		Actual	Actual	Actual	Actual	Actual
Child < 18yrs					92	85	92	85
Adult 18- 59 yrs.	1233	1162		102	841	796	2074	2060
Adult >60yrs								
Total	1233	1162		102	933	881	2166	2145

b. 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?

Development and empowerment can be done simultaneously, while NGOs tend to lean more on development, one can actually do both together. This is the model we are adapting to the new area in Goregaon where we have initiated a microfinance group based on our survey of the area, although there is big need for medical care. From next year we will run a medical clinic in this area. The message we have communicated to them is they need to be an active partner with Karuna in developing their lives. Making a positive impact on the children and grand children of PWL would be a good way forward since they too are growing up in the same community, getting them to focus on education, skill development and jobs will help them break the cycle of being trapped in a system that is not liberating.

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?

Coordination & Partnership with the local leaders has been very beneficial for the work that Karuna is doing in the community. The local leaders have been cooperative in implementing our project goals in each area. The partnership with Bombay Leprosy Hospital has given the team lot of opportunities to conduct surveys to find out if there are any new cases of leprosy in the communities and follow up of suspected cases has mutually benefited both the organisations.

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 target population is involved in influencing the wider community in starting more microfinance group. The existing group members have travelled with the team members to other communities to share their experience in running microfinance group. Karuna team has been identifying potential leaders in the community who would be trained to run tailoring classes and to initiate and regulate the microfinance groups without much input from the Karuna team. The target population have also been engaged in organising cultural programmes and medical camps in the communities.

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 Karuna team has the capacity to implement the remainder of the programme. We are continually encouraging churches to send volunteers and encourage the target population to engage more in the implementation of the programme. By doing this the team would get more flexibility to utilise our time in focusing on the bigger aspects of the programme.

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? (ii) If the project has less than 2 years remaining, what progress has been made towards the project's exit strategy? (iii) What progress has been made during the past year to encourage the local church to be involved in this project?

Identifying potential leaders who would continue some of the programmes in their own community would help sustain certain aspects of the programme. Teaching the target population skills to earn a living and leaders to monitor these programmes would help sustain the project in the future. New cases of leprosy have been reported in the city, hence the need for medical care and follow up is rising.