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 2020	**Project end date**	December 2020
Fincode			
Report written by	Karuna Project	**Email address:**	karuna@sscsindia.org
Date submitted			

Budget summary (Local currency)	**Annual Budget**	**Actual expenditure during the reporting period**	**Total Expenditure this year**
	21,88,976.00	21,77,203.00	21,77,203.00

COVID-19, LOCKDOWN AND PANDEMIC were the most uttered words in 2020. As reported previously Mumbai was the worst hit by the pandemic and the leading city in the number of COVID-19 positive people. This was also the year for many 'firsts', this was the first time that the Mumbai local train came to a complete halt, it was for the first-time people stopped eating street food, for the first time the rich had to cook and clean their own homes and it was for the first time where each one's home became a work place, a place of worship and everything else but a home.

The Karuna team, after the initial set back restarted the mobile clinic in three locations to begin with and by the end of the year 2020, we were visiting eleven locations providing medical care and treatment for people suffering with leprosy, for people in communities and for women and young ladies that are victims of human trafficking. Everyone, especially the leprosy sufferers were most relived that after a gap of more than a month they could access medicine and treatment for their ulcers. Meeting in person made a big difference after one and half month of staying in touch over audio and video calls. Monitoring the health and response to treatment was made easy.

The Karuna Team and the patients quickly adapted to the new normal of wearing mask, regular hand sanitizing, maintaining safe distance from each other and recording temperature using a thermal gun. Besides medicines the beneficiaries also need food supply and regular supply of masks. One lady donated Face Masks which were passed on to the patients.

In the last 12 months Karuna Project have provided medical care and treatment to 1942 male patient and 2400 female patients reaching a total of 4342 treatments, higher than the previous times despite the given lockdown conditions.

2. Is the project working and effectively addressing the problem? Yes / No / Partially – explain why.

The project has been working effectively addressing the problems identified even during the pandemic, the project remained focused on the target population. All efforts were made to reach out to the people with leprosy who belong to one of the most vulnerable group for corona virus. All resources were utilised in helping the Karuna Project target population. Although the entire team and the nation were caught unaware of the lockdown in response to the COVID pandemic, the team was able to recover from the initial shock of not being able to run the clinics as usual. The team met once a week over zoom calls and planned ways to reach to our beneficiaries. Communicating over zoom calls was helpful for the team and the beneficiaries as we were able to reach out to them by providing awareness about being safe, providing ulcer care kits and face masks. Providing Ulcer Care Kits to the patients suffering with leprosy was a game changer for the Team. The team was able to provide dry ration at the right time when they most needed it. We were also instrumental in helping one of the lady patients who got left behind when the group of migrants took the last train to Andhra. The team assured her of our support and ensured she too got all her needs met. Including helping her travel back to her hometown to join her family members. Once the lockdown was eased the team was able to restart the clinics in 11 locations, we were able to restart the microfinance group meetings one group at a time in order to maintain social distance. Tailoring classes were started with batches of four trainees at a time. By the end of the year 2020 Karuna Project was fully functional.

3. 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	There has been shift in the thinking of the PALs, especially among the women in the community they are willing to take ownership for their own development. Four ladies from one of the microfinance groups had started a catering business from one of the lady's homes. They had a trial run for four months before the pandemic hit the city. Couple of them in another community was keen to open a beauty parlor in their community. Post lockdown most PALs have realized they need to be proactive in earning a living and not be dependent anyone else. The PALs however are expecting Karuna to provide Medical Care.
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 in their community to get people interested in volunteering with Karuna. One lady with lot of experience working with government bodies showed interest in volunteering with Karuna. There is a need to strategize this post the current pandemic and lockdown. Since large groups are yet to gather together, we need to find new ways to advertise for volunteers.
3. Community leaders unwilling to support hygiene and sanitation programmes	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 especially during monsoon. Lot of emphasis has been laid on personal hygiene due to COVID-19 pandemic, community leaders have ensured minimum standards are followed.

4. Project activities

1. Tailoring classes

The tailoring classes at Kalyan started very well and **seventeen ladies** have joined the course. They have shown a lot of enthusiasm. Especially in the last three months they have taken a lot of initiative in learning tailoring online. All the seventeen have done a lot of pattern cutting and children dress making. Some lady's who already have sewing machines have completed a stitching order for face masks and earned some money too. Eleven ladies were engaged in stitching face masks for Karuna which were sold to two factories and distributed freely to PALs. Seven ladies attend classes in Trombay community. **Twenty-Four ladies** are currently availing of the Karuna Tailoring classes in two communities and **four** are engaged in stitching garments during the festive season of Diwali, Christmas and New Year many of these women took up stitching orders mostly of children and women garments.

2. Microfinance

Eleven registered Microfinance groups are currently functional. Two new ones were registered in the first six months and two more in the last six months. One more group was started in Goregaon a new area of function for Karuna. Two groups are being formed in Kalyan and Trombay, the group at Kalyan was difficult to put together. The women were let down by previous group leaders and the level of trust was very low when we first met with the women in 2019. Starting the tailoring classes helped gain the trust of the women and ten of them came forward. All the paper work was in place before the lockdown was imposed. As soon as the lockdown was eased the team met with the local municipal office and got both the groups registered. One in Kalyan and one more in Trombay. We will continue the trend of setting up more of these groups.

3. Awareness

The Karuna Team has been conducting Health Awareness programmes for the women in the communities. We start the awareness with an ice-breaker, teach the topic, engage the participants in discussing the ways to implement their learning in their personal life and within the community. This year **102 women** have benefited each month. During the lockdown the team has been conducting awareness through zoom calls. We partnered with another NGO and conducted awareness on Hepatitis B. Other topics included COVID-19, Personal Hygiene during the pandemic, Immunity etc.

4. Medical Camp

The Karuna Project held Six Medical Camps in two red-light areas in Mumbai in partnership with another organization that works in the field of anti-human trafficking. Through the Six camps we held **295 women and 48 children and 30 men** from the areas benefited. The team also conducted a diabetes camp at the new location Goregaon, as a start up to the medical clinic. The team conducted this camp to gather all the people that are affected by leprosy together to understand their needs.

5. Mobile Clinic

With the starting of a Mobile Clinic in a new location the Karuna Project now functions in eleven different locations. The Mobile clinic is a sign of relief for the people affected with leprosy. Although we had to stop services according to the government rules for two months following Corona pandemic, we engaged with the beneficiaries through calls and visits. We supplied them with ulcer care kits and face masks to more than **125 patients** and medicines to ensure the wellbeing of all. The Clinics were restarted in 5 locations once the lockdown was eased in the month of May, in the last six months we restarted 6 more locations. Besides the people that are affected with leprosy we served two slum communities and women in two red light areas.

6. Karuna COVID-19 Care

The Karuna Team worked towards creating awareness through Zoom video sessions about critical aspects like prevention, hygiene, hand wash, social distancing, isolation and combating stigma related to COVID-19. When the lockdown period was extended the Karuna Team came to know that our beneficiaries were running short of ulcer wound dressing material and food supplies. The team along with the help of volunteers, local leaders and vendors managed to distribute food grains and essentials for **145 families in two communities** the first time and to another **81 families in two communities** a second time. We had volunteers giving information about the wellbeing of the community members. The Karuna team members were actively involved in meeting people in person during the time of distribution. The supplies that Karuna Project gave was much needed as many were running short of finances since their earnings had stopped. We distributed Face Masks and Ulcer Care Kits to more than 125 people affected with leprosy. The funds for the grocery distributions were raised from the local churches.

7. Women Day Celebration

The Karuna Team celebrated Women Day and **65 women** and young ladies from three communities took part in the event. To encourage participation and involvement the team had organized a fruit and vegetable salads competition. A short motivational talk was given on 'Women Empowerment' we encouraged the women to take initiative in developing themselves, their families and their community. Karuna's role is to equip and empower the women to chart their life's journey towards a positive goal and not to provide every need of theirs this message was clearly communicated to all those that were present. Many shared that this was the first time that they took part in a competition and some said that they need more such opportunities to discover their talents and utilize that in a profitable way.

8. Staff Training

The team received three internal trainings two through zoom calls and one in the ambulance. Communication during Crisis, Corona Virus and we revisited the previous year's training 'Embracing Conflict' using the porcupine illustration. The team was encouraged to step-up on internal-external and verbal-written communications among the team members and with Karuna's beneficiaries too. Often in a crisis or conflict there could be gaps in communication and in some cases a break in communication. A healthy team needs to have wholesome Communication especially while facing a Crisis or a Conflict. As a team we may come across difference of opinions and have disagreement just like the porcupines trying to huddle for warmth, their pricks hurt the other porcupines. If we embrace conflict as normal, we could work more effectively and the outcomes could be very good. The doctor on the team conducted a short training on the Corona Virus and led the team into a time of discussion to know everyone's knowledge and understanding about the virus, the mode of spreading of the infection, the treatment and how-to safe guard oneself from being exposed to the corona virus.

9. Microenterprise (Tailoring Production)

The women that have trained in tailoring skills have been stitching cotton bags and the Karuna team has been helping in getting buyers for the bags. Some women are involved in stitching face masks since there is a bigger demand for the masks. The first batch of three hundred face masks was distributed among the beneficiaries of Karuna Project. While we are looking for opportunities to sell the face masks, we want to also ensure the safety of the beneficiaries. The women who stitched the masks felt a great sense of satisfaction when they came to know that the face masks are going to be distributed among the people affected by leprosy. Both the bags and the face masks stitching are examples of how the women can sustain themselves by utilizing the skills they have acquired to earn a living.

10. The Karuna Team

The Karuna Team meets once a month to discuss and deliberate the functioning of the project. However, since the lockdown the team started meeting once a week over zoom video calls. These meetings have helped the team stay focused and informed about the current situation. The team was able to render good service to the beneficiaries despite all odds. The team is trying to fund raise to meet the needs of the project and to cover the shortfall. The team has also taken a 10% cut in their salaries to help meet the shortfall. The team continues to meet once a week in the ambulance in order to achieve the desired outcomes of the project.

Were there any unexpected results, either positive or negative?

The rapid spread of Corona virus in Mumbai and the subsequent lockdown was very much unaccepted; as a result, the entire city came to a standstill and the project had to stop the functioning of the mobile clinic for the first time. The positive outcome to this is that team was still able to interact with the beneficiaries. We were able to serve them beyond the usual by providing ulcer care kit, face masks and dry ration. We also noticed people were more kind to each other by willing to share resources with others, they did horde or collect more food than that was needed as they said someone else could benefit from the supply.

Case studies and Photographs: Case studies help us to see the impact of our work with real people. They may also be used by the Mission to publicise our work and raise awareness about what we do. Kindly provide at least one case study with two or three (high resolution) photographs illustrating change as a result of this project.

Case Study # 1

One case study that stands out for Karuna during the pandemic is that of Susheela. Susheela is one among the twenty odd migrants from Andhra Pradesh that lived under one of the flyovers in Mumbai. Under the flyover there are two small walls on either side and the broad flyover as their roof makes them feel secure. The migrants stay here very much like their home and the society around has accepted them as a part of that area of the city. The entire group has resorted to collecting alms as a means to earn a living in different parts of Mumbai city. The group would leave their area of stay in the morning; they would beg the entire day and would return back in the evening with food and cash. The Karuna Mobile clinic visits them every Thursday to provide medical care since they all suffer from leprosy.

The day started as usual for all of them on the day of the lockdown but did not end the usual way for Susheela. When the group heard about the lockdown, they somehow quickly gathered all their belongings and left the city on the last train available to Andhra Pradesh to reach their villages. Except for Susheela who happened to come to the place of stay a bit late that evening and found out that the group has left to their villages without her. Thankfully for her the other group that lived under the same flyover was still there. When one of the Karuna team members went to find out the welfare of the group he met a distraught Susheela. He reassured her of Karuna's support and encouraged her to call the team if she is in need of anything. The team tried placing her in a shelter but none of the shelters were willing to take anyone new on board due to the pandemic. The team arranged for food, milk and other essentials including medicines that she needed. The team member visited her once or twice a week to ensure her well being. She was provided with dry ration and face mask. As soon as the lockdown was eased the team member helped her get special permission from the police department and arranged for tickets to travel to her village. The relatives in the village were contacted and Susheela was put in a taxi to the train station. Shusheela and team were relieved when she called up the next day to let us know that she made it to her home safe.

Case Study # 2

Case Study #3 Fifty-Eight-year-old Hamida a PAL from the Borivali area was brought to the Karuna Mobile Clinic in emergency by her relative and her aged husband. She had a fall and had a deep gash on her left upper eyebrow. She was bleeding and had already lost a lot of blood. She was feeling very weak due to blood loss. Referring her even to the nearest government hospital would mean more blood loss and would have made matters worse. Assessing her condition, the doctor decided to attend to her in the Karuna Mobile Clinic. The patient was taken in, while the doctor attended to the patient, the nurse prepared for stitching the wound. The team rallied around and helped, while one of the staff went to procure medical items from the local medical shop, the others managed the rest of the patients. Under local anesthesia her wound was sanitized, stitched and neatly bandaged. She was given TT injection, antibiotics and analgesic tablets and dressing material for her wound. The next time she visited after ten days the wound was completely healed, there was no scar left and was perfectly well. She and her husband had a great sense of relief and gratitude towards the Karuna Team.

CASE STUDY # 3

Ali a 42 years old male patient visited the Karuna Mobile Clinic complaining of itching, pain, burning sensation and discharge in both his feet., the doctor examined and diagnosed that he had a bad case of eczema. He had tried different treatments for the last five years and he was willing to do anything to get some relief. The Karuna doctor put him on a weekly treatment, besides medicines he was given a bottle of oil prepared locally by the team doctor for local application. After a week's treatment he was feeling better, he said for the first time in a long while he got some relief. Weekly treatment and follow up helped him recover eighty percent in one month. He was much relieved with the results and he continues to seek treatment and we at Karuna are committed to see him fully recover.

CASE STUDY # 4

Rupa lives in Trombay colony, she is 29 years old, she also one of the leaders of the Microfinance Group. As a leader of the microfinance group, she had gone to the municipal office for her microfinance group work. While she was at the office, she discovered that there are various job skill courses offered for women. Rupa joined the Nursing Assistant Care Taker course. She completed the course in six months with government certification. On completing the course, she got a job at a care center. Later she joined the night angel office and they placed her as a private caregiver for patients. She is currently earning fourteen thousand rupees and she is very excited that she is now working and enjoys financial freedom. She has been helping other women too, two women have taken up similar jobs as Rupali and they are earning too. These women are such an inspiration to the others in the community.

CASE STUDY # 5

Minu lives in Malad she has been benefited a lot from being a member of the Microfinance Group. Her story began when she joined the Microfinance Group. She is a leader of one of the groups. Although she has a disability in her foot, she joined the tailoring class in Malad. When she was going visiting the municipal office for the microfinance group work, she got an opportunity from municipal office to set up stalls. While at the stall, a man visited her stall and when he noticed has a disability, he offered a job with an organization that work with people with disabilities. She readily took up the job. Since she has to travel a lot for her work the organization offered her a two-wheeler with extra wheel attachment. The vehicle was offered at a very nominal price and that too she needs to pay in easy installment. This is such an encouragement for the work of Karuna as this supports our efforts towards advocacy and empowerment of the people in the community.

CASE STUDY #6

When Pooja heard that the Karuna Project are starting Tailoring classes she was very keen to join and learn a skill which she knew would help her earn an income in the future. However, after joining the class she realized that using the sewing machine is not as easy as it looks. For the first few days somehow, she could never make the machine rotate in the right direction. She was utterly disappointed and was wanting to quit thinking tailoring is not for her. Seeing her predicament, the Karuna Trainer came alongside Pooja and encouraged her a lot. The trainer patiently spent time teaching her the right way of using the machine and everything else related to the tailoring course. She has nearly completed the course moving from wanting to quit to completing the basics course, moving on to the advance and fine finishing products. Today she has not only learnt tailoring she has been taking private orders and earning more than her peers. She says “having learnt tailoring I am able to earn as well as save money on stitching charges for the entire family. Karuna is in the process of getting free sewing machine from the local municipal corporation for the graduates.

CASE STUDY #7

Nami came with prior basic skill in tailoring, however, she needed to learn further in order to make tailoring her profession. She was one of the first few who joined the tailoring classes on the day the Karuna Team made an announcement of commencing tailoring classes in her community. Although she had basic skill she worked hard on the advance skills and learning the finer finishing skills. Nearing completion of the course she is confident and started stitching her own clothes and her family members. During the lockdown she started taking stitching orders from her home, the Team decided to let her take one of Karuna’s sewing machine to her house, this way she could continue practicing as well as maintain the machine in working condition. Being encouraged by students like Namira and Pooja the Karuna team is planning to set up a production unit in the coming year.

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?
One important lesson we learnt as a project is that both internal and external communication is a key component, in a crisis situation. Regrouping and communicating on a regular basis helped the team strategize our next steps. Also, it opened up opportunities for everyone to share ideas and give suggestions. Communicating with the project participants also helped us stay connected with them, we could continue to monitor their wellbeing. At a time when they could not reach out people, hearing a familiar voice was reassuring. The items in Ulcer care kits were the most helpful things that the patients looked forward to during the lockdown. Since movement of people were restricted including supplies and access to medical care was cut off the kits were a of great help. As a team we learnt these are some of the things that we could be ready with if a similar crisis or lockdown takes place again.
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. Especially during the pandemic where people movement were restricted having built a good relationship with the local community leaders helped us reach out as well as ensure the wellbeing of our project participants. The leaders also asked for our help whenever needed especially in the area of medicines, face mask and awareness on the COVID virus. Post lockdown we are in the process of getting sewing machines gifted to the women who are completing the tailoring course. The local leaders in the community are now seeing Karuna Project as a good ally for their community's development.
Participation: How have you engaged the target population and the wider community in the implementation, management and monitoring of the project during the year?
Many volunteers from our target population came forward to help reach the wider community during the time of distribution of food, ulcer care kits, face masks and medicines. Some were also involved in giving us vital information about the wellbeing our Karuna's beneficiaries as well as helped in convey our messages to specific individuals as well as the others.
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. The current crisis has brought the team to a point of realisation that each one's role is crucial in implementing the project and working together as team is vital for the implementing of the project. The team has also grown to understand the strengths and needs of each other and so be ready to pitch in where ever there is a need during rush hours.
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?
The last year has been a unique year for everyone. Face to face interactions were very limited, however, the Microfinance Groups are getting to think towards working together in not only savings but also work together in income generation, support each other by passing on information about jobs or skill training availability. They are beginning to see that they could be of help to each other and that this is strength in being in a group than to act as individuals. The local community leaders took lot of initiatives in providing food supplies and distributing them in a fair way that everyone received enough. They have also come forward to take up concerns that matters the wider community to their higher ups for further action. One particular group in Kalyan have actively working towards building a local medical centre for PAL in their community, they have made requests for better roads and access to clean water all this done on their own initiative. The Karuna Team is also training the leaders of the Microfinance groups to play an active role in the development of their community.

5. Annual Report

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
	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual
Child < 18yrs					133	116	**133**	**116**
Adult 18- 59 yrs	1459	1385		151	350	748	**1809**	**2284**
Adult >60yrs								
Total	**1459**	**1385**		**151**	**483**	**864**	**1942**	**2400**