

**RURAL EDUCATION AND CHILD HEALTH  
SOCIETY OF INDIA**

**ANNUAL REPORT**

**2017-2018**

Reach's



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# **Rural Education & Child Health Society of India Muddebihal Annual Narrative Report**

**1<sup>st</sup> April 2017 to 31<sup>th</sup> March 2018**

## **Introduction**

**Rural Education & Child Health Society India (REACH's)** from the past 25 years is empowering rural poor through education and economic development measures. Our main focus on protection of Child & their rights, Prevention of Child Marriage women empowering & Sustainability of Person with Disability, providing education support through sign language.

## **Vision &**

Empowering ,women and children to lead happy and healthy life.

## **Mission**

Children learning and living happily, awakened and self reliant Men and women , Eco-friendly development , self governance, is our action forwards the vision.

## **Programme**

- 1. To Manage Deaf Education and Family Support Programme**
- 2. Adult Literacy Programme**
- 3. Workshop On Role of Women in Water , Sanitation & Hygiene.**
- 4. Nirantara Capacity Building Programme of Dhvani**
- 5. Early Intervention Programme**

## **1. To Manage Deaf Education and Family Support Programme**

Deaf education program is the one of the key programs of REACH's which began in the year 2012 with the support from APD (Association of People with Disability) and has reached 200 beneficiaries in the intervention area. The program identifies and trains the children of the age group of 0-18 years for deafness.

### **Goal of deaf education:**

- To Ensure Education and Rehabilitation for Children with Deafness & Capacity Building of Stakeholders

### **Objectives:**

- Understand the needs and situation of children with deaf and provide required Education and medical rehabilitation.
- Ensure all eligible deaf children enrol in to schools and enhance communication skills and language building
- Capacity Building of the Stakeholders about deafness, deaf education and issues of deaf community.

## **Key Events:**

- Language & Capacity Building for Parents & Caregivers
- Trainings to the teachers to adapt to the needs of the beneficiaries.
- Model school program to reach out to more children with hearing impairment.
- Trainings to the Anganwadi & Asha workers .
- Sensitization for peer groups in schools

Under the program, when the child is brought to the center or in the villages, the child is screened for possible under development (delayed developmental milestones), and detailed assessment is carried out. The parents are counselled and provided with enough information on possible ways of handling the child and the available resources the child can receive through various systems including education. The parents and the teachers are trained to deal with the child's training.

### ➤ **Parents & Caregivers Training**

In this reporting period we organized 4 meeting for Parents & Care givers . In this meeting mainly discussed about Rapport With Parents we conducted parents meetings, programmes, discussed about their child education, Module school important of module school, role of parents and teachers. Mythology of module school etc 126 parents got trained & 105 parents got sign language training through DRM .

### ➤ **Sensitization for Peer Group in School :-**

In this reporting we successfully completed 22 peer group program in Schools. 372 male & 344 female Total 716 members will got benefit.

- Deafness
- How to use kit
- Courses of deafness
- Role& responsibility of teacher
- Disability Types& Causes
- Importance of Sign language
- Relationship between teachers &
- parents in deaf children development.



### ➤ **World Deaf Day :**

On 14-10-2017World deaf day at krishna mangala karyalaya muddebiha World Deaf Day Programme we distribute Rs-52,000/- nanna Bashe1&2 to deaf child it help to regular parents learning & teaching to deaf child ,we interact with donor funded books & also support to place & food also, In this distribute sports activity winner 12 prizes

**Out Come :**

- 1) Deaf children are actively participated .
- 2) World deaf Day help to understand Deaf children , their situation in the community .
- 3) Deaf children are able to learn in normal school , they are also very actively understand subjects .
- 4) BEO office officer said Reach's NGO conduct lot of programme but this is one of the best programme . Through this activity children got their all rights.
- 5) CRP said 400 to 500 PWD's children disability card to read to distribute , come to take all benefits from Education Department.
- 6) Reach's NGO helps to school teachers to teach deaf children in sign language through teacher trainings .
- 7) Some parents are share their Opinion like their effects , children growth etc.)\* Parents of Chamundeshwari said parents role is very important in the growth of Deaf child , support to your children , give them justice . My daughter get training hospitality in APD Bangalore ,now she got Job & earn monthly 7000.

**Staff Capacity Building :-**

This reporting period our staff got 13 different training Ex :Sign Language, Physio therapy training, Inclusive Education, Goonjan etc In this they got knowledge about

- Issue Child Growth ,language
- Deaf Child Education Methods
- Types of Communication
- Social Development Stages
- Type of Sign Language
  - 1) American Sign language
  - 2) Britan sign Laanguage
  - 3) Indian sign Language
- Deaf Child Learning methodology
- How to Fill Assessment Form & etc.
- Inclusive Education Methods .

**Hear Aid Distribution Camp**

In this reporting period On 4-11-2017 Collaboration with Kalpruksha trust & Reach organized Hearing aid need children camp at Karnataka Bank Muddebihal .In this Camp Deaf Children Parents are involved & we submitted 20 children's list to Kalparuksha Trust Vijapura for the hearing machines.

➤ **Unanticipated Outcomes –**

- On 12-12-2017 Lions club members Distributed Study Material Kit to 21 model school children's, Each Kit cover Books, Pens, Dictionary, Maps, School Bags, Drawing Books, Geometric Boxes etc. Each over 1000 cost Total they distribute 21,000 rupees TLM materials for Deaf Children. Its help to all children.
- On 14-10-2017 World deaf day at krishna mangala karyalaya muddebiha World Deaf Day Programme we distribute Rs-52,000/- nanna Bashe1&2 to deaf child it help to regular parents learning & teaching to deaf child ,we interact with donor funded books & also support to place & food also, In this distribute sports activity winner 12 prizes.
- Taluka panchyati and Gram panchayati given the 3% budget in Early intervention awareness programme at 10 Gram panchayati in Muddebihal taluka. about Early Intervention & plan GP level awareness programme .And interact with CEO on Support to Reach NGO Rs 5000/- per each GP in Muddebihal .Through this they organized camp for identification of Disability persons. Also refer to RBSC Schema for bet better support.
- Collaboration with Kalpruksha trust & Reach organized Hearing aid need children camp at Karnataka Bank Muddebihal .In this Camp Deaf Children Parents are involved & we submitted 20 children's list to Kalparuksha Trust Vijapura for the hearing machines. On 22-01-2018 Kalparukha trust Distrbuted 15 children's Hearing Head machines.
- District Disability Department gave Award to our Director K.Budeppa for best work in Disability Sector. And given the Arivina Sinchana awareness programme

**Note:-This programme is helpful more deaf children's we have identification**

**The program reach and impact:**

- 90% Parents understood their children need.
- Parents & Teacher Understood Importance of Modal School.
- 3% budget utilization for Disability level is increased.
- 80% Increase in the awareness level in community.
- The program has helped the children to achieve better results .
- Children are Able to Communicate through Sign Language
- The program also has helped in accessing the social security schemes.

The program has helped the children to achieve better results as they are able to communicate through sign language as well the parents and teachers. The program also has helped in accessing the social security schemes which are very important in sustaining themselves in the later stages of their life. The children with the support of the program have developed themselves alongside the normal children.

## 2 .Adult Literacy Programme

### Computer Based Functional Literacy Project



The adult Literacy Programme targets to enhance the learning, reading, writing and cognitive skills of adults from the most marginalised communities in North Karnataka. The project strives to address the functional literacy of adults, woman in particular. This will lead to higher self –esteem and self –confidence enabling them to engage in economic activities. Improved functional literacy will directly impact on people’s ability to understand their rights, and claim their entitlements, enabling them to be able to influence Govt, policies that affect them. The Adult Literacy Programme is co implemented by Development Focus and Tata Consultancy Services (TCS). In that we will be plan to identified 25 villages for Adult Literacy programme.

Based on the criteria the facilitator and committees Will identify and enroll at least 160 adult learners in their Village for this programme -40 in each quarter. Supervisors are appointed by the partner organization to guide the facilitator’s and help the partner organization in the implementation and monitoring activities.

#### **Objective :**

- To enhance the confidence level of individuals and families, enabling them access and capitalize economic/livelihood opportunities
- To improve awareness among rural households that enables them to demand and access their rights and entitlements

In partnership with Development Focus and TCS, we have conducted computer based literacy program to 4000 illiterate women in the age between 16 to 75 across 25 villages in Muddebihal Taluk. Identification of 160+ learners in each village by AL committee and Facilitator around 40 every 3 months , 2 batches of training will be taken up. Each of these 2 batches will have 5 classes of 1- 2 hours duration each in a week accounts to a minimum 20 hours per month. 25 Facilitator conducted night classes in their village through 25 Netbook (laptop) & projector this new technology (software) helps to motivate women read & write.

#### **➤ Village identification :-**

Adult Literacy programme in each identification 25 villages. if the need education and improve awareness among rural households that enables them to demand and access their rights and entitlements.

➤ **Class schedule:-**

- Each project village will have 8 batches of approx..20 Learners each.
- At any given time in a village ,2 batches of training will be 5 classes of 1-2 hours duration each in a week accounts to a minimum 20 hours per month.
- A module of 45 sessions will thus take approximately 9 weeks to complete
- After completing a batch , the facilitator will conduct a simple test .
- A report on exam data, attendance and learners' data has to be send to DF.

➤ **Teaching Learning materials :-**

TLM the aids used by the facilitator to help him/her in facilitating his /her lesson effectively & attractively.

➤ **Capacity building overview :-**

In this reporting period we conduct 5 capacity building training to facilitators we teach facilitator to how to conduct classes, teaching methodology , effective use of teaching materials , follow up training to slow learners and computer skill , reporting & case study writing skill etc.

➤ **Technical Training :**

The training program would consist of orientation to basics of computers and the use of 'the Computer Based Functional Literacy' software consists of modules equivalent to grade

SL NO	Name of the Programme	Date	Place	No of Participants
1.	Technical and Programmatic Training	26-7-2017 to 28-7-2017	Devadurga	16
2.	Programme Review meeting	30-11-2017 to 1-12-2017	Sindagi	23
3.	Technical training	2-3-2017	Vijayapur	14

➤ **Case study :-**



**Smt.Pavitra.Siddayya.Hiremath** is a 30 year-old housewife from Amaragol Village of Tangadagi Gram Panchayat, Muddebihal Bock, Bijapur district, Karnataka She dropped out of school after completing Class-IV.

Now, she is the mother of three children, She says, after her marriage, her responsibility was to manage all family duties. But she faced difficulties in supporting her children's school education. Most of the time she felt a sense of dependency in supporting her children. With the CBFL program she has got an opportunity to bridge this gap. She attends the sessions regularly and is improving her fundamental knowledge by reading, writing and practicing arithmetic regularly. She says education shows the path of life. She is grateful for a program such as CBFL that gives her an opportunity to do the same.



**Shakuntala** is 50 years old Happy women living at Tangadagi Village. She has 5 children house wife. Before she unable to read & write, hesitate to intraction between others .

Now she come out superstitious beliefs .After attending regular class her learning skill was improved ,able to read & write .In her home all of them give respect her. AL Project help to change her life.

Now “ **I am Happy Adult Literacy Project Change my Life.**”

## “Workshop on Role of women in management of Water and Sanitation”.



National commission for Women supported for Workshop organization in Muddebihal . On 27.03.2018 the workshop titled “ Role of women in management of Water and sanitation” was held at Sri Krishna Mangala Bhavan. It was inaugurated by Dr.S.C.Chaudhary, CDPO, Muddebihal. In his inaugural speech he stressed the participant that water is precious thing on the earth, it should be kept pure and protected not only for the present but for future generation too. Further he said that cleanliness and hygiene must be the top priority in the nation, to make a clean India (swatch) and healthy India. He strongly recommended that every house must have roof water harvesting, so that every drop of water is saved.

### Objectives of Work shop:

1. To educate and empower the beneficiaries on importance of water and sanitation and how to managing it.
2. To promote campaign for safe drinking water, sanitation in the area.
3. To bring together beneficiaries and stakeholders together, discuss problems and challenges relating to water and sanitation and find solution.
4. To Come up with clear cut recommendations to local governance, state and central government for effective implementation of schemes pertaining to water and sanitation.

### Session-wise-summary – lecturers by Various

#### 1<sup>st</sup> session: : Water challenges: Resource person: Mrs.SarojaBiradar.

In her presentation she highlighted that there are five rivers flowing in Bijapur district; water of these river mainly consumed for industrial and agriculture purpose. State government and local bodies have not made adequate plan for drinking water. As a result 50 % of villages, including Muddebihal municipal town is facing acute shortage of drinking water.

Water is supplied twice a week. Further she also said that majority village even today depending on river open well and bore well for human consumption of water. Very few villages have “safe drinking water unit”. As a result human and animal are suffering from water borne diseases. For the question raised by Vidya Nagar participant, that the colony is getting water supply only one or two time a week, she motivated the participants to write memorandum to town municipal council demanding regular supply of drinking water and ensure that women take charge of water supply management.





## 2<sup>nd</sup> Session: Mr.Madhukeshwar

### Water borne diseases and how to control it



Through his presentation he presented the facts and figures relating to quality of ground water in the area, what are its contents, what safe water mean, what can cause by consuming contaminated and fluoride water and so on. Further he also said with figures that 308 physically challenged people are there in Muddebihal takuk alone, 208 Speech and hearing impaired, 254 mentally retorted and 130 visually challenged. For all these, apart from hereditary factors, there is a connection of water that we consume, food that we eat, and environment in which we live. Hence we have to be careful and ensure safe drinking water and give high priority for clean sanitation. There were couple of questions from the participant on what are the genetic factors for disabilities? do we have national water and sanitation policies?

why people in spite of so much awareness on swachh bharath mission people are not bothering for clean environment by constructing and using toilet room? All the questions were clarified with relevant answers by the resource person. After he show PPT about Types of Disability express their Role of women in Disability sector.

### 3<sup>rd</sup> session: Role of women in management of water and sanitation.

The resource person **Mr.G.N.Shimha** being senior social worker, having more than 30 years experience of community work, with live case studies, examples of the success stories, made the participants to understand that if the individuals, communities, CBOs take responsibilities to save water by roof water harvest, construction of check dams, creation of social forestry, ponds, lakes and related, then all animals and human being can be safe and healthy. Further, he said that due to modern agriculture system we are pouring synthetic fertilizers and pest to our mother land and becoming responsible for pollution and bad health.

Hence a self reflection, realization is necessary at this crucial juncture. We need to have sustainable agriculture practice even to save water and to make ground water safe and secure for present and future generation. Further, he affirmed the women participant that they should demand a good sanitation, within the house and neighbor by having good drainage system, cleaning of garbage, cleaning of streets and public places and compulsory having latrine rooms and effectively using it. He concluded his session saying that “**clean is god and god is clean**”. While saying all these he took examples from the communities who have achieved this. Etc

## **4<sup>th</sup> session**

### **Role of media in water and sanitation:**

Mrs. Chitrlekha Jogur, a journalist shared how community can use media for advocacy and campaign to act local governance, state and central government to effectively implement the existing schemes and programs pertaining to water and sanitation.

The other resource persons like **Mr. Basavaraj** demanded the government like 1098 (child line), 108 (mobile health unit) 100 (police) there should be free water and sanitation line for public to register their problems and demands to address them immediately. **Mr. Venkatesh** spoke on the future of water & Presented role of Women in water & Sanitation, **Mr.Kumar.Shima** presented their paper on Rain water Harvesting & its importance.

## **Nirantara Capacity Building Programme**

This is one of the Major Programme in the development of our organization. Supported by **Dhwani Foundation Bangalore**. The main purpose of Dhwani Foundation is to ensure productivity and efficacy of the social sector through both direct and indirect program engagements. Through this conducting capacity building training to organization leaders & Operation Managers. Making Reach's Compliant , Accountable and more transparent.

### **Key Task of Om is :**

- Programme Management
- Data Base / MIS
- Compliance
- Marketing & Fund Raising
- Donor Management
- System & Process
- HR System & Policies
- Finance Maintenance.



# Early Intervention Programme

**One of the major project** The overall goal of the proposed project is to strengthen the ecosystem for CWDs and their caregivers in the Muddebihal taluk, Bijapur district. Disability NGO alliance (DNA) 1 year technical training support to 2 staff .

## Objectives: 2018

- Promote Early Stage Intervention and Early Education among children with developmental Delays between the age group of Birth to 6 years (Relaxation of 2 years (i.e 0 to 8 yrs) in Muddebihal Taluk, Bijapur district.
- Training of parents both in rehabilitation and further prevention of disabilities through structured training programmes, counselling sessions, peer interactions and orientation to future possibilities
- Capacity building of local stakeholders such as PHC doctors, Health Workers, Asha Workers and Anganwadi workers in order to ensure early identification, referrals and follow up support.



## With Whom

- Children (under 6 years),
- Parents
- Frontline functionaries such as Asha/Health/Anganwadi Workers, PHC functionaries.

**Activity** : Screening and Referrals, Intervention at Service Centre/NGO's Early Intervention centre, Assessment and Re-assessment of each identified child by technical person/specialist ,Preparing Individualized Early Intervention Plans based on "SPRUCE" which is the 5 different areas of Development. Therapeutic intervention and Plan for Medical rehabilitation by specialists, Develop mechanism for follow-up .

- To train & engage 200 stake holders, who will know the importance Early Intervention and Early Education, are equipped to support these children in their families and local institutions.
- In 10 gram panchayat we organised awareness programme on EI & EE.
- More than 35 children referred to RBSK.
- 65 children screening & assessment was done & follow up service provide .
- Support to get 3% budget & govt facilities .

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