About the Author

Prof. Jaya Indiresan was formerly professor of Higher Education at the National Institute of Educational Planning and Administration, New Delhi. Earlier she had taught at Jawaharlal Nehru University, New Delhi. She has been a visiting professor at the University of Manitoba, Canada and a Visiting Scholar at the University of Michigan, USA. Currently she is a freelance consultant to several national and international organizations.

She has authored three books: 1) Education for Women’s Empowerment: Gender Positive Initiatives in Pace Setting Women's Colleges; 2) Institutionalisation of Innovation in Higher Education; and 3) Inclusion vs. Exclusion: A study of Women in Police.

She has produced training manuals on (1) Women in Academic Leadership; (2) Decision Making and Team Building Skills for Women Managers, sponsored by the University Grants Commission. She has several research publications in national and international journals, produced several research monographs and undertaken several evaluation studies for various organizations.

Her areas of interest include Institution Building and Human Resource Development, with special reference to women. She is deeply involved in training for capacity building in various sectors like educational administrators, women in agriculture, women in police and so on.

Disclaimer

The contents in this report are based on the research and study conducted by the author and do not necessarily reflect the views of CAP Foundation. Views and interpretations expressed in this report are solely of the author.

* Names of the children have been changed to protect their identity.
EXECUTIVE SUMMARY

CAP Foundation, supported by Plan International, initiated several developmental projects in 32 communities in Shapurnagar and Balanagar areas located along the industrial belt of Quthbullapur and Kukatpally municipalities of Greater Hyderabad Municipal Corporation of Andhra Pradesh. These communities primarily belong to low income migrant population from Andhra Pradesh and neighboring states.

CAP has been involved in several developmental activities in these communities since 2002. An informal survey and observation of the challenges faced by these communities led to the identification of six major interventions to cover different stakeholders in these communities relating to education, health, economic empowerment, employment of children, teen agers, youth and women. They are (1) The ECCD (early Child Care and Development) project to cover the overall development of preschool children (2) The SDC (School Development Commity ) to create awareness on child rights and other issues related to school going children (3) Self Help Groups (SHGs) for the social and economic empowerment of women in the community (4) HIV/AIDS to create awareness on health issues (5) Teen Channel to rescue and rehabilitate school drop outs and children working in hazardous occupations (9) Junior Vocational College to provide employment opportunities and livelihood for young adults in the community. These initiatives were implemented by 16 community volunteers under the supervision of six cluster managers.

It is interesting to point out here, that these multiple initiatives carried out in the same community has had a ripple effect with all the initiatives having impacted all the stakeholders. Some of the highlights of this ripple effect have been shown in the table at the end of this section.

These initiatives have created awareness in the community on the various challenges and issues facing the community. It has also raised their concern to take action to remedy the situation. There is commitment on the part of all the stakeholders and several agencies, including government departments, corporates, municipality, educational institutions and the civil society to bring about the desired changes in the community to improve the quality of life. Networking with all these agencies has been the strength of this initiative.

CAP has facilitated in the institutionalization of some of the initiatives like the ECCD project under the Integrated Child Development Scheme (ICDS ). SHG initiative has also been brought under Mission for Elimination of Poverty in Municipal Areas (MEPMA). The Vocational Colleges have now become Community Colleges and recognized by the Indira Gandhi National Open University and get the degrees and diplomas of IGNOU.

In conclusion, it needs to be pointed out that this is a unique experiment where multiple interventions were initiated in a single community. It is significant to note that these initiatives had a ripple effect with the various initiatives impacting one another. The stake holders got involved in several initiatives at the same time supporting each others efforts. By and large the community were aware of the various interventions in the community, through different means. For example, some of the mother volunteers were also members of the SHG groups. The Teen Channel students moved smoothly into the Vocational Junior College. SHG women got involved in organizing rallies and exhibitions for spreading awareness on HIV/AIDS. SDC members got involved in social issues like preventing child marriage, fighting for child rights, mobilizing support from the government and other agencies for improving the school facilities like more classrooms, toilets etc. Peer educators in the HIV/AIDS campaign interacted with all the members of the community. The various
functionaries of the municipality, state government departments, NGOs, corporates were all involved in these initiatives in some way or the other. Though it is not easy to quantify the overall development that has accrued to the community, there is a general sense of these multiple initiatives having impacted the community as a whole.

Another important feature of this initiative, is the systematic effort that has been made to institutionalize and sustain the development initiative by empowering the stake holders to own the responsibility for continuing the efforts. It is hoped that this model catches on and total development and owning responsibility for development becomes a norm in the future.

Some highlights of the Ripple Effect of the Multiple Interventions in Shapur Nagar Initiative

<table>
<thead>
<tr>
<th>#</th>
<th>intervention</th>
<th>Beneficiaries</th>
<th>Major benefits accrued</th>
<th>Ripple effect</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ECCD</td>
<td>Preschool Children 3-6 age group</td>
<td>Significant increased in enrolment</td>
<td>Elder girl siblings back to school</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Large Percentage Children admitted</td>
<td>Mother volunteers sharing information with community</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Birth certificates procured</td>
<td>Participating in HIV awareness programs</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>100% immunization</td>
<td>Enrolling in SHGs</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Growth monitored</td>
<td>Participating in SDC meetings</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Awareness &amp; knowledge about nutritious food</td>
<td>Aware of Teen Channel and Vocational college</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Improved health</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>SDCs</td>
<td>School children</td>
<td>Awareness on child rights</td>
<td>Participated in HIV/AIDS campaign</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Sensitivity to social issues</td>
<td>Stopped child marriages</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Confidence to participate to bring about required changes</td>
<td>Interacted with authorities to get social &amp; infrastructure problems solved</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Stopped corporal punishment in schools</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>Participate actively in visioning exercises for better future</td>
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<tr>
<td></td>
<td>Initiative</td>
<td>Target Group</td>
<td>Benefits</td>
<td></td>
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<td>---------------------------------------------------------------------------------------------------</td>
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</tr>
<tr>
<td>3</td>
<td>SHG Initiative</td>
<td>Women in the community</td>
<td>Awareness of legal rights of women, child rights, child abuse, self confidence, help line availability, nutritious food, community needs like toilets, drainage, water etc.</td>
<td></td>
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<tr>
<td>4</td>
<td>HIV/AIDS initiative</td>
<td>Whole community</td>
<td>Knowledge on HIV/AIDS, increased usage of condoms, availability of referral centers, talk freely on HIV/AIDS, got over fear of stigma, mother volunteers participating in campaign, SDC members involved in campaign, peer educators interacting with community</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Teen Channel initiative</td>
<td>Adolescents school drop outs</td>
<td>Chance to complete schooling, relief from hazardous child labour, learnt vocational skills and life skills, got job placements, contribute to family income, opportunity for further vocational/higher education</td>
<td></td>
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<tr>
<td>6</td>
<td>Vocational college</td>
<td>Adolescents and youth</td>
<td>Complete high school and opportunity for higher / vocational education</td>
<td>Aware of social issues</td>
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<td></td>
<td></td>
<td></td>
<td>Job placement</td>
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<td></td>
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<td></td>
<td>Economic empowerment</td>
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<td></td>
<td></td>
<td></td>
<td>Better social &amp; life skills</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Participate in HIV/AIDS campaign</td>
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<td></td>
<td></td>
<td></td>
<td>Formed an alumni network to pay back to the community</td>
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</table>
ACKNOWLEDGEMENT

Working on this story of the Shapurnagar Initiative of CAP supported by PLAN India has been a very enriching experience for me as this is a very distinct and unique experiment. Usually a single initiative is taken up to address a particular need of a community. Here several initiatives were taken up simultaneously to address various dimensions of development relevant to a wide section of the community from preschool children to adult women in the community. These initiatives touched on different challenges relating to education, health, social issues, and employment and so on.

It was indeed a challenge putting the different pieces of the puzzle together and it was a rewarding experience to see the total picture emerging finally. Though it involved a lot of effort and a long time putting this narrative together, it was a very great learning experience.

I am very grateful to a whole lot of persons who helped me in stringing this story together by providing me very valuable inputs without which this narration would not have possible at all. In fact, this story is a huge team effort. The cluster managers were very helpful meeting all my demands. They accompanied me during the field visits and focus group discussions, pulled out a lot of secondary source materials, compiled lot of data, case studies, reports which formed the basis for this narration. The APRR, GFK and PCR reports were particularly very valuable documents in completing this report. My sincere thanks to all the team members.

One individual who has total faith and confidence in my capacity is Dr. Nalini Gangadharan and I sincerely acknowledge my grateful thanks to her for her patience and perseverance in goading me to complete this exciting task. Thank you Nalini.

I must acknowledge the enormous support I got from my family. My husband Prof. Indiresan not only gave me lot of emotional and intellectual support but also took dictation while I dictated some parts of the story! My granddaughter Nandini also chipped in compiling some sections of the story.

Thank you,

Jaya Indiresan
Several projects and interventions have been initiated both by the government and non-government agencies to alleviate the poverty and improve the quality of life of socially and economically deprived sections of the society living in either urban slums or rural areas. Most of these projects are targeted at individuals or at the most individual families. Another notable feature of these initiatives is that they are highly focused trying to solve an identified problem or issue whether it pertains to health, education, employment, environment and so on. Further, the target groups are usually children or youth, women, old age individuals and so on. It is rare that a community as a whole is targeted, identifying multiple issues challenging the various stakeholders in the community. While a single issue, say like fluorosis in the drinking water in the community gets solved through a focused intervention, other health issues, education of the children and youth in the community, employment opportunities for improving their economic status remain unattended. The project moves on to another area where a similar problem exists and the community where this particular problem got solved remains challenged with other major issues holding them back from an overall improvement in the quality of their life.

Recognizing this lacunae and limited impact of single and isolated interventions, CAP foundation undertook a different strategy of initiating multiple interventions in a given community to cater to a number of social, educational, employment and health related challenges covering stakeholders from young children, adolescents and women in that community. This story is the narration of a disadvantaged community in a large urban slum of a metropolitan city. This narration covers various challenges faced by the community, the multiple interventions that were initiated, the ripple effect of the various interventions and the impact of these interventions on the community as a whole. The lessons learnt and the way forward are discussed.

It is hoped that the efficacy and advantage of multiple interventions to improve the overall development of the community as a whole is recognized and sets a trend for integrated interventions in the future.
Chapter 1- A brief Profile of the Community and the Challenges

This chapter starts with a brief description of the geographical location, population details, socio-economic profile of the communities living in this area. This is followed by a detailed identification of the various problems and challenges faced by the different stakeholders in the community.

Chapter 2 – Identification of the Multiple Interventions and their implementation

Based on the understanding of the needs of the community, various interventions were formulated to cater to the different client groups from preschool children, adolescents and women in the community. These interventions were in various sectors like education, employment, health, social issues and so on. This chapter provide a description of the various interventions, their genesis, the process and activities and highlights both quantitative and qualitative outcomes.

Chapter 3- The Transformation of the community

In this chapter an attempt has been made to understand the ripple effect of the multiple interventions and develop a social balance sheet to obtain a comprehensive view of the combined impact of all the interventions on the community as a whole.

Chapter 4 - The Way Forward

This chapter looks at the advantage of multiple interventions in a given community. The pros and cons of this strategy are discussed. Attempt has been made to identify the facilitating factors and impedances that would indicate the way forward....

Annexures

1. Baseline Data
2. Child Protection (CP)
3. Early Childhood Care Development & Education (ECCD & Edn)
4. Focus Group Discussions Guidelines (FGDs)
5. Governance (Gov)
6. Household Economic Security (HES)
7. Health & HIV & Aids
8. Water Environmental Sanitation (WES)
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>APSACS</td>
<td>Andhra Pradesh State Aids Control Society</td>
</tr>
<tr>
<td>APPR</td>
<td>Annual Program Progress Report</td>
</tr>
<tr>
<td>CRS</td>
<td>Customer Relations and Sales</td>
</tr>
<tr>
<td>CWC</td>
<td>Child Welfare Committee</td>
</tr>
<tr>
<td>DPEP</td>
<td>District Primary Education Program</td>
</tr>
<tr>
<td>ECCD</td>
<td>Early Childhood Care and Development</td>
</tr>
<tr>
<td>ETC</td>
<td>Employability Training Centre</td>
</tr>
<tr>
<td>HES</td>
<td>Household Economic Security</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immune Deficiency Virus</td>
</tr>
<tr>
<td>ICDS</td>
<td>Integrated Child Development Services</td>
</tr>
<tr>
<td>IEC</td>
<td>Information Education Communication</td>
</tr>
<tr>
<td>IGNOU</td>
<td>Indira Gandhi National Open University</td>
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<td>ITES</td>
<td>Information Technology Enabled Services</td>
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<tr>
<td>IYDP</td>
<td>Individual Youth Development Plan</td>
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<tr>
<td>JJAct</td>
<td>Juvenile Justice Act</td>
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<td>MSDF</td>
<td>Michael Susan Dell Foundation</td>
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<tr>
<td>NACO</td>
<td>National Aids Control Organization</td>
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<tr>
<td>NGO</td>
<td>Non Governmental Organization</td>
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<tr>
<td>PCR</td>
<td>Project Completion Report</td>
</tr>
<tr>
<td>PTA</td>
<td>Parent Teacher Association</td>
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<tr>
<td>PU</td>
<td>Project Unit</td>
</tr>
<tr>
<td>ROC</td>
<td>Rights of Children</td>
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<tr>
<td>RTI</td>
<td>Reproductive Track Infections</td>
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<tr>
<td>SC</td>
<td>Sponsor Children</td>
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<tr>
<td>SDC</td>
<td>School Development Committee</td>
</tr>
<tr>
<td>SHG</td>
<td>Self Help Group</td>
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<tr>
<td>SSA</td>
<td>Sarva Shiksha Abhiyan</td>
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<tr>
<td>STD</td>
<td>Sexually Transmitted Diseases</td>
</tr>
<tr>
<td>STI</td>
<td>Sexually Transmitted Infections</td>
</tr>
<tr>
<td>TC</td>
<td>Teen Channel</td>
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<tr>
<td>UBR</td>
<td>Universal Birth Registration</td>
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<tr>
<td>VCTC</td>
<td>Voluntary Counseling and Testing Center</td>
</tr>
<tr>
<td>VC</td>
<td>Vocational College</td>
</tr>
<tr>
<td>WES</td>
<td>Water Environmental Sanitation</td>
</tr>
</tbody>
</table>
Profile of the Community

The beneficiaries of this initiative are residents of 32 suburban slum communities in Shapurnagar and Balanagar areas located along the industrial belt of Quthbullapur and Kukatpally municipalities of Greater Hyderabad Municipal Corporation of Andhra Pradesh.

Quthbullapur is one of the Towns in Quthbullapur Mandal, Rangareddy District, Andhra Pradesh State. It is located 13 km distance from its State Main City Hyderabad. Other villages in Quthbullapur Mandal are Bachupally, BahaDurpally, Bourampet, Dommara Pochampally, Doolapally, and Duddigal.

The maps of this project area is shown below

As of 2001 India census - Quthbullapur had a population of 225,816. Males constituting 52% of the population and females 48%. Quthbullapur has an average literacy rate of 67%, higher than the national average of 59.5%: male literacy is 73%, and female literacy is 60%. In Quthbullapur, 14% of the population is under 6 years of age.

The BPL families in this area are estimated to be 37%. The beneficiaries of this initiative are spread over a radius of approximately 6 kilometers along the industrial belt. The population here has been growing rapidly with the current population estimated to be around 1,12,000 and the number of households estimated to be around 22,500.

Primarily inhabited by poor and migrant families, the people belong to heterogeneous groups from neighbouring districts and states. Predominant languages are Telugu and Urdu, followed by a smattering of Kannada and Marathi. While the slum dwellers are an integral part of the city’s economy, they are in insecure, irregular and unprotected job environments. Typically, the slums in Quthbullapur too are characterized by poor sanitation facilities and inadequate access to quality education despite the presence of both Government and private schools. Unsafe conditions for women and children prevail despite urban poverty alleviation Government schemes. With low level of education and skills, majority of these families work on daily wages in local industries, petty trades, and as mobile vendors. Some of the women work as housemaids, at times, supported by their children, particularly the girls. The income thus earned is not sufficient to satisfy their basic needs, which compels the children to enter the workforce at a very young age. Those children who do go to schools are mainly in government schools in the community.
The Challenges

CAP Foundation is a registered Trust, initiated as an innovative public-private-partnership. It demonstrates a model that addresses poverty alleviation by linking learning and livelihood needs of working children and disadvantaged youth (at risk) to equitable qualitative learning that provides market-oriented vocational training opportunities. The Foundation works with the most deprived, vulnerable and difficult to reach sections of young men and women in poor urban and peri-urban communities at risk; CAP has a strong gender perspective. CAP's vision is to be an end-to-end community based solutions provider in quality education to build safer, healthier and productive communities of young people capable of supporting self-directed growth and positive citizenship. Its mission is to promote access to sustainable and affordable integrated learning opportunities for all young people from educationally and economically disadvantaged backgrounds to achieve their career and life aspirations.

CAP Foundation in partnership with PLAN, has been involved in various developmental activities in this community since 2005.

An informal survey and observation of the community and talking to various stakeholders in the community gave us an idea of some of the challenges faced by different stakeholders in the community. These included:

- The lack of access to preschool education for a large number of children in the age group 3-6 in this community resulting in the neglect of early childhood care leading to deficiency on the later overall growth and development of the child. This resulted in setting up ECCD centers in the community.
- Lack of information and knowledge on child rights and understanding what entails violation of child rights making children vulnerable and exposed to exploitation. This resulted in establishing School Development Committees.
- Lack of awareness and skill among the women in the community to organize themselves for their economic empowerment has resulted in the women getting marginalized. This resulted in the project facilitating women empowerment through Self Help Groups (SHGs).
Low level of awareness and knowledge among the members of the community, especially the youth on HIV/AIDS, migration and promiscuity among men, results in the increase in the number of children getting infected and affected by HIV and AIDS. This resulted in the HIV/AIDS awareness program in the community.

A large number of adolescents between 13 and 17 years were observed to be dropping out of school landing on the streets. To cater to the needs of this group the TEEN CHANNEL program was initiated encompassing academics, life skills and vocational education.

Young adults, especially from the disadvantaged communities, pursue higher education without any particular interest or purpose. To enhance individual employability, reduce mismatch between demand and supply of skilled manpower and provide an alternative and assured career path, Vocational Junior College was set up in this community.

Rama Durga Rao, aged 15, native of Bhimavaram migrated to Suraram with his parents, an elder brother and a sister. His brother had to stop his education after 10th standard due to financial problems and started working as a welder earning Rs. 3000 per month. His father who was working as a delivery man was earning Rs.3500 a month but had lot of health problems and was also involved in an accident and the family had to spend a lot of money taking loans for his medical expenses. After his death the mother was supporting the family selling fruits and vegetables. After completing 7th standard Rama Durga Rao discontinued his studies and learnt the welding work from his brother and was earning Rs.1500 a month. Then he learnt about the Teen Channel from his friend and got to know that drop outs can continue their education by enrolling in Teen Channel. He continued to work part time as a welder and also help his mother stocking fruits and vegetables from the wholesale market in the morning. He completed his studies from Teen Channel getting 509 marks out of 600 and passed his SSC (school final) examination. Now he has enrolled in the Vocational Junior College. He hopes to complete Automobile Engineering and get a good job so that he can take care of his family to live comfortably.

All the participants know that the legal age of marriage is 18 years for girls and 21 years for boys. We are aware that early child marriages have consequences like health problems due to immaturity. I try to spread awareness amongst our community members.

-Satyavathi (SHG Member)
As indicated in the previous section, six major interventions were taken up in this community. They are, (1) the setting up of the 25 ECCD centers in various parts of the community; (2) The establishment of the School Development Committees (SDCs) both in the schools and community levels: **There are 42 child councils in these 32 communities. 10 councils are community based and 32 are school based** (3) the Formation of Self Help Groups for women. **85 SHGs were formed in 27 communities.**

(4) HIV interventions are facilitated through 2 peer group members selected from each community and there are 64 (32x2) peer group members (5). Teen Channel for school drop outs to enable them to complete school and at the same time prepare them for a vocation. (6) Setting of Junior Vocational Colleges to provide an assured career path for the youth in the community.

These communities were divided into 6 clusters with a cluster manager and several facilitators to implement these initiatives. This chapter discusses in detail the rationale for the initiative, the strategies of implementation and the activities taken up and their outcome.

1. THE ECCD PROJECT

Rationale for the initiative

The early years are crucial in the development of intelligence, personality and social behavior of children. Also from the rights perspective, the children have a right to live and develop to their full potential. Early childhood education has several benefits in that it reduces inefficiencies in school education in terms of repetition and school drop outs. Early childhood education also reduces health care costs through preventive measures introduced at this stage.

The Indian constitution guarantees that the State shall endeavor to provide free education for all children in the age group 1-6, though not as a fundamental right which is confined to the elementary education in the age group 6-14. The physical inputs in terms of good nutrition and preventive health care provided during the preschool years have a significant impact on the way children learn and develop in later years. Studies conducted in various parts of the country have shown that children who have undergone preprimary education have not only higher achievement in later years but also in their social behavior adjustments compared to children who have not been exposed to early childhood education.

**Genesis of the Initiative**

It was noticed that in many families in these communities both the parents were working. The young children in the age group between 3 and 6 were being taken care of by older siblings or going to primary schools and sitting with their siblings which was not appreciated by the schools. A baseline survey carried out by CAP in 2006, revealed that in these communities, less than 33% of the children in the preschool age group were enrolled in ECCD program and 66% were not in any such program. Nearly 60% of the children in these communities were malnourished. 53% of the children in the age group 12 – 23 months were fully immunized before their first birthday. It is significant to note that only 14.5% of the children had been registered and issued birth certificates. This can be attributed to the lack of adequate ECCD centers in this area and the economic compulsions of parents from sending their children to elite play schools which will give them a “head start”. Further, the older siblings particularly girls, were often deprived of schooling as they were forced to remain at home to assume the role of caregivers.

It is significant to note that the community members were not even aware of the need for early child care program. The parents were also not aware of the relevance of birth registration, prevention of trafficking, communicable diseases, safe drinking water and sanitation, referral of special children and the role of government in providing various
I am Uma Padmavathi aged 16. I come from a poor family of four members including my parents and an elder brother. Father and mother are laborers earning Rs. 100 and Rs. 50 per day and my brother earns Rs.2500 per month. I dropped out of school after the 8th standard. I started working part time as a sales girl in a bangle shop. I could not cope with the job and my studies at the same time. Consequently, I was very irregular in attending classes and was sent out of the school. One day I saw a big crowd in the community hall and went to find out what it was about. I found a madam speaking about CAP foundation and explaining that school drop outs can continue their studies. Next day I got enrolled in the Teen Channel. I managed to balance my work and classes in Teen Channel and completed 10th standard securing 506 out of 600 marks.

I found the education system and style adopted by CAP PLAN very unique. I found the atmosphere excellent with friendly and cooperative teachers. I developed an interest in studies and gained confidence. I found the life skills program not only useful but very enjoyable as well. I was very poor in English but realized the value of English for survival and for my future. I feel that each and every community should have CAP centers so that students like me can continue their studies. I am thankful to CAP for providing me an opportunity to continue my studies. I want to continue my studies. My dream is to become a software engineer and get a good job.

To cope with this challenge and to provide support to the preschool age children in these communities, CAP with the support of PLAN, opened 25 ECCD centers in the various parts of these communities. Initially, meetings were held with the communities and where there was demand from the community and depending on the need of the community and the budget available 10 ECCD centres were established in 14 communities and gradually this increased to 25 among the 32 communities. Other 7 communities were too small to support an ECCD centre. From 2005 to 2011, approximately 3551 children, including 1705 boys and 1846 girls have been enrolled in these centers.

Mothers and care givers of children below 6 years were gathered in ECCD centers and facilitated to form into a committee for dissemination of inputs by the coordinator to larger groups in the community. 15 active women who volunteered to be members of this committee were selected and trained by the coordinator. Each mother volunteer committee consists of 15 mothers from each of the 25 ECCD centers.

Activities

The major activities of this initiative centers around:
- Capacity building of mother volunteers on nutrition and early childcare aspects
- PTA meetings
- ECCD exhibitions
- Preschool teacher training
- Exposure visits to the center volunteers

Capacity Building of ECCD mother volunteers

Mother volunteers were made aware of concepts like good child rearing practices, nutritional deficiency diseases like protean energy, malnutrition milestones in child development, precautions to be taken during pregnancy and lactation, play-way method of teaching/engaging the child and learning disabilities in children and their referral.
These awareness programs resulted in their playing an active role by participating in exhibitions, preparing and displaying low cost nutrition diet. They also participated in growth monitoring of children and shared with the mothers about nutritious food, spreading awareness about birth certificates and immunization of children in the community. Due to these efforts parents of several children procured birth certificates for their children. The mother volunteers also spread the learning they acquired in the center and facilitated in the enrolment of those children who were not brought under this scheme and helped in conducting the exhibitions.

**Parent Teacher Meetings**

In these meetings the focus was on discussion of the child’s progress, both cognitive and physical health. They also discussed the indicators of growth monitoring including malnutrition, importance of free education, good child rearing practices, birth registration, usage of toilets by children and rights and protection of children. It is significant to note that these meetings have had their impact on the parents of the children and the parents reported that the children have become very active and are able to recite rhymes and tell stories. The awareness on health practices and nutritious food has resulted in nearly half of the children’s growth being normal.

**Organization of ECCD Exhibitions**

In these exhibitions, there were exhibits in the form of pictorial information on immunization, age for marriage, physical condition of women before and during pregnancy, positive parenting, growth monitoring, information on HIV, child rights and practical demonstration of low cost nutrition which were displayed and explained by the mother volunteers. It is significant to note that these exhibitions have been very effective in providing knowledge and information on various aspects of early childhood care. For example, many mothers reported that they did not know the importance of sprouts but from the exhibition realized this and now they provide sprouts to their children weekly once or twice.

**Pre-school Teacher Training**

A six day training program had been organized for the ECCD volunteers. The training covered several aspects like behavioral problems of children and play way teaching methods. The teachers were also familiarized on topics like immunization, birth registration, growth monitoring and so on. It is significant to note that this teacher training has had an impact on the teachers as can be observed from the way the children are able to tell stories with gestures, rhymes with actions and are engaged in play and creative activities. The teacher volunteers are maintaining the growth charts and all the records of the meetings conducted with the parents.

**Outcomes**

One of the significant outcomes of this program is the admission of children into regular schools after being exposed to the early child care program in the ECCD centers. A total of 1210 children including 559 boys and 651 girls have been admitted in regular school. The older siblings particularly girls who were taking care of younger siblings are now going to schools after starting these centers. Many mothers reported that they have been meticulously following the immunization program, providing nutritious food to their children and maintaining the growth charts of their children. Another very significant outcome of the program is that the parents have realized the value of birth registration and the birth certificate for their children.

During the focus group discussion with the sample of parents and mother volunteers several significant outcomes of the program were recounted by them. Regarding specific child care and child rearing practices, the parents are now aware of the value of breast feeding and importance of colostrum. They have also learnt the type of weaning food that a child requires and also the importance of feeding at regular intervals. The parents have come to understand the value of nutritious food including green leafy vegetables and vitamins and the preparation of simple foods such as Khichdi. They have understood the need for carbohydrates and so have stopped draining
out the starch while cooking rice.

On the health front the parents have realized the value of immunization and also the value of monitoring the growth chart of the child by recording their height and weight at regular intervals. It is significant to note that only after attending the program the parents understood the value of birth certificates and many parents have now registered their children for birth certificates.

On the social front there has been an increase in awareness about the evils of early child marriage. They have also become conscious of the detriment for the development of the girl child caused by gender discrimination. This is evident by the larger number of girls (1846 girls) that are now enrolled in the ECCD program and a larger number (651 girls) that have been admitted into regular schools. This may be due to the fact that, girls who were initially taking care of their younger siblings are now going to schools after starting these centers.

Overall, the opening of these ECCD centers and their activities seems to have benefitted the community on several aspects, including better health due to the awareness created on the importance of providing nutritious low cost food to the children. The importance of birth certificate and the efforts made by the centers in facilitating the procurement of the same has helped the community in several ways like facilitating the child’s enrolment in regular schools and seeking other benefits. The community has also become sensitized to social and gender issues like early marriage, gender discrimination and so on. On the education front, the inputs provided in these centers will go a long way in the head start for the future educational attainment of the children. The mother volunteers are very satisfied with the benefits accrued to their children, that they have now become role models and are motivating and persuading other parents to enroll their children in this program and that is indeed is a great impact on the community as a whole.

2. SCHOOL DEVELOPMENT COMMITTEES

Rationale

The government’s Sarva Shiksha Abhiyan made concentrated efforts to provide access to formal education to all children up to the elementary level. Though initial enrolment was good, many children dropped out due to various reasons-the inability of teachers to handle large class sizes, pre-existing learning deficits among these children etc. Furthermore children find it hard to transition from the Sarva Shiksha Abhiyan programme which is an activity based in the primary level to the more rigorous lecture method followed in elementary and secondary school. Families and students see no link between academic certification that they are receiving and their future prospects such as career and livelihoods.

The government has concentrated on improving the quality of primary education through programmes such as operation blackboard, DPEP and Sarva Shiksha Abhiyan in the past decade but

“In society there is discrimination between boy and girl children. Some parents are sending boys to private schools whereas girls are sent to government schools.

-Bhawani (Child council member)
their efforts to improve secondary education and enrolment in secondary schools is negligible. Also the government has focused its resources in developing schools in rural area which is commendable but has a sad consequence that the areas which fall under the Greater Hyderabad Municipal Corporation (GHMC) limits have been ignored.

In these communities children are not seen as individuals in their own right but as objects within the family whose rights can be overlooked. They are taken out of school to work as unskilled labourers in often dangerous industries. These children are vulnerable to various forms of exploitation like child labour, violence, early marriages etc. Often these violations occur due to lack of information and knowledge on child rights. The children themselves are unaware of their rights and the redressal mechanisms available in the event of abuse. Because of this low level of awareness, child abuse and child labour continues to exist. Another major challenge for this status is the non availability of data on child rights violations due to the vested interests and silence that surround this issue. Another major challenge is the absence of any structures or platforms for children and community to participate in development programs and address the issues affecting them.

**Genesis**

Andhra Pradesh ranks ninth in the country in terms of children’s school attendance and has high drop out rates after primary and lower high school completion. Among every 100 children who enrol in primary school 43 do not reach 7th class and 64 drop out before completing 10th class. According to 2009s baseline data, 7% and 24% children are out of school in the age group of 6-14 and 16-18 respectively. The numbers for girls are even worse, only 13% of all girls make it to class 6th. As per Qutbullapur Mandal, learning enhancement programme report, 69% of children attain grade level competencies.

Thus School Development Committees were set up to identify the problems of the school and the community and make necessary representations before the authorities in charge in order to deal with the issues identified and resolve them. Available school children were gathered in school and facilitated to form into committees. In that group 15 active mothers who volunteered were selected. 15 children and 10 teachers of the school were also selected to form one group and that was named as SDC (School Development Committee). Totally each SDC consists of 40 members. 32 SDCs in 32 schools were formed and nurtured.

In addition, child councils have also been formed 32 at the school level and 10 at community level. At primary school in standard 3 to 5, 30 active children who volunteered were selected to form into child clubs. IN high school active children from standard 6 to 9, were also taken into the club. These councils are at the school level.

At community level, active children from standards 3 to 9 were formed into child council. The communities where the schools are not available were part of this council. In this private children were also taken in. These are the community level child council members.

32 child councils and with a total of 1260 members has become operational. Orientation sessions and workshops to 64 government school headmasters and teachers have been conducted covering various aspects such as learning disabilities, child friendly practices, activity based teaching, lesson planning etc as a part of the committee plans. Consultations have also been held with 300 local NGOs, other stakeholders, child and alumni council members.

The In-School programme of CAP which covered 4014 boys and 5063 girls from across 32 government schools was initiated. The programme focuses on school-community partnership in Education. It aims to facilitate children to acquire grade level competencies. An important facet of the programme is the School Vision development and capacity building of the School Development Committees.

**Activities**
I am Nirmal Kumar Sahoo, aged 19, a native of Orissa. I migrated with my parents for livelihood and now we live in Sasuram colony, a small slum near Hyderabad. I discontinued my studies when I was detained in intermediate due to health and financial problems. I came to know about CAP-Plan employability center from the mobilization road show and joined the ITES course. I got placement in Just Dial Company as a customer care executive with a salary package of Rs. 9600 per month. I improved my skills with the help of the facilitators and I am very grateful to CAP-Plan Employability Training Center Facilitators for helping me. I believe that I am successful in my life as I am able to support my family financially.

School Vision Meetings
School Visioning meetings are conducted every year to review the progress made in tackling various issues, problems and challenges faced by the school community and to prepare an action plan for the current year. Participants of the class communities are taught how to negotiate with local government officials. The benefit of sensitizing media in mobilizing resources for infrastructure needs was highlighted to the participants.

School Development Committee meeting reports
Various issues and problems of the schools and communities are identified with the help of the CAP staff. Usually four such meetings are conducted in a year; in each meeting five problems are discussed. Also, the relevant actions that must be taken to tackle these problems are debated.

Teacher Training and Capacity Building Programmes
There are various workshops which are conducted for both primary and high school teachers on various aspects such as activity based teaching, child friendly practices, teaching aids etc. The training sessions stresses on the importance of academics in schools and the need to institute clubs and societies which will help with the holistic development of their students.

Workshops for preparation of teaching and learning materials
Workshops are conducted for secondary school teachers, where teaching and learning materials are developed for all subjects. These materials are compiled and printed to produce workbooks for High School students. These workshops provide a platform where resource persons and teachers from different backgrounds share their valuable experiences and give their inputs.

Networking with Government Schools
This exercise is a theme based exercise wherein a particular theme is given to schools in the programme area, and the schools have to present their talents in the form of a skit or role-play. There is a display of the teaching and learning materials which are prepared by the teachers of different schools.

Outcomes
During the School Development Committees, various issues such as water drainage and hygiene problems, domestic violence and discrimination faced by the community are discussed. The members of these committees said that they would take responsibility of interfacing and advocating for these issues in their communities.

Some of the proposals developed by SDC members have been received positively by community leaders. Work has begun on the
construction of sewage lines, water tanks and electricity supply lines due to the efforts put in by SDC members.

The training sessions that were conducted for teachers and volunteers paid special emphasis to issues such as child rights and promotion of learning without fear in the schools. The teachers who attended these sessions, found it very informative and assured that they will practice the teaching methodologies that they learnt to safeguard the rights of children.

During some of the training and capacity building sessions various resource persons have been able to share their valuable ideas on what type of materials and which methodologies will be useful when facing future academic challenges. The suggestions made by some of the government teachers on developing workbooks was appreciated and put into effect. Suggestions were used to develop content for the workbooks which are now in circulation in all the schools in the communities.

Networking with government schools has allowed the dissemination and sharing of good teaching practices among all the schools participating in the programme. This networking has facilitated the development of various learning strategies such as “Gadiyaram Ganganna” (which explains mathematics and time management) by the teachers themselves.

Some of the children attending these workshops shared stories about the gender discrimination they faced. Generally parents sent boys to private schools and girls to government schools. However after the awareness sessions on gender discrimination, early marriage and child rights they were able to perceive a difference in their parents' attitudes towards them.

The importance of birth registration procedures, processes and forms was emphasized to self-help group members. The participants in turn discussed and shared what they had learnt with other community members. The participants gave an undertaking that they would work on birth registration in their communities.

The participants who attended workshops conducted by the child councils stated that they had acquired valuable information on various topics such as nutrition, HIV, child rights. They said they will translate the knowledge they have gained into steps which will help in the holistic improvement of their community.

### 3 SELF HELP GROUPS

#### Rationale

Women in low income migrant populations face several hardships. The Cultural beliefs, values, traditions in the society they come from do not allow them to become financially independent. They are perceived as mothers who have to tend to young children and at the most allowed to work as house maid. Such an environment affects their self-reliance, independance and leads to their marginalisation. This is reflected in their lack of awareness about the need to organize themselves in to groups around savings. They are unaware of opportunities such as micro-financing. Inadequate income enhancing opportunities for these illiterate or semi-literate women has adversely affected their economic independence. Furthermore, children in these families are excluded from socio economic opportunities because their parents are unable or unwilling to spend their income on the children's development, thus affecting future generations.

#### Genesis

The suburban slums in Hyderabad city and the adjoining Ranga Reddy district of Andhra Pradesh is primarily inhabited by the low income migrant population from within and outside the state. The operational area covers 32 neighborhoods including Shapurnagar. These neighborhoods are located along the industrial belt, the majority of the families work as daily wagers in these industries. Other occupations include workers at construction sites, petty traders, mobile vendors and domestic help. The population of these communities is approximately 1, 12,335 and the estimated households are 22,467 according to the 2001 census. The women in these communities were the most marginalised segment and this has an
I attended the session conducted by CAP-Plan on the importance of procuring birth certificates. I shared the same with my parents who in turn applied and procured my birth certificate. I spread this information to my neighbors to obtain the birth certificates for their children.

-Ashirwadam (Child council member)

adverse effect on them and the children of the community.

To facilitate their empowerment The CAP-Plan project initiated self-help groups in this area. Meetings were conducted with women in the community and the importance of SHGs was explained to them. Women who were not part of any group were pooled and formed into new groups. Process of leader selection was facilitated and two leaders were selected and bank account was opened in the commercial banks.

The project conducted exposure visits, awareness sessions on rights, training and capacity building session so as to help women overcome social and cultural obstacles in the path of their economic independence.

**Activities**

**Awareness on SHG concepts**

An orientation for women is conducted before a new self-help group is started. Selecting a group name, selecting group leaders, minimum monthly savings, monthly meetings and other important CAP-Plan and self-help group concepts are introduced to the women.

**Exposure Visit Program**

Exposure visits are organised to increase awareness and help the women of the self-help group to learn new concepts. Participants learn about formation of new groups and are also able to observe the functioning of the groups during their field visits.

**Monitoring and review meetings**

These meetings focus on the importance of participation of all group members in monthly meetings, collection of savings, repayment of internal and governmental loans, preparing loan documents, updating record books and other important group activities. Important concepts and knowledge of issues such as child rights, key hygiene practices, need for participating in local community meetings is taught to the women of the community and the linkage with government schemes are strengthened.

**Capacity building training on banking procedures**

The training is to familiarize the group with SHG account opening, maintenance, book keeping, operation of the SHG bank account, the bylaws, roles of executive members and other banking procedures.

**Capacity building training on group management and documentation**

These training sessions focused on explaining the importance of regular meetings, updating record books, timely money deposits, internal loan processes and management of groups. Along with the significance of networking with the government and other related schemes general issues such as child education and rights, legal rights and nutrition are some of the very important topics that are discussed with the participant of the training program.
Awareness of legal rights and HIV/AIDS

Programs such as these focus on spreading awareness on the legal rights of women and other subjects such as domestic violence, dowry, child marriage, family court etc. Resource personnel openly discuss with the participants about how to face societal and familial problems, their responsibilities and their resolutions. While the other awareness programs deal with generating a consciousness about the background and basic information of the risks, early diagnosis and referral services of HIV/AIDS.

Awareness and capacity building of Self-help groups on child rights and protection

Child protection, gender discrimination, child abuse, JJ Act, child trafficking and child rights are some of the key issues that are dealt with in this program. The women are taught about their responsibility towards their children and how to deal with problems relating to child rights and protection. Selected members are also urged to share their inputs and experiences and promote awareness about social issues such as procuring birth certificates, mobilizing children to centers etc.

Training on petty business on home based products

Training was organised at a cluster level which aimed at developing petty business on home based products such as herbal phenyl, dish cleaning powder, candle making, shampoos, creams etc. The participants were taught how to prepare such products and encouraged to start their own businesses.

Annual general body meeting

It is a platform created so as to allow all the members to interact, discuss common issues and share their experiences. As the stakeholders are also present at these meetings it allows them to understand the volume of operations and helps in further leveraging the relationships.

Networking with the local governments

Networking with the local municipality and government is conducted to strengthen the women self-help groups and integrating them with other interventions. It has also seen to increase knowledge on other government schemes and access to them.

Outcomes

The women participants said that they were motivated to join the Self-help groups as they believed that joining these groups helped them to increase their savings, deposit money and maintain records. Thus they felt that the group helped them to become financially independent and were able to stand on their own two feet.

Their savings in turn helped them to pay for their children's fees, their health problems and to start businesses of their own such as those of tailoring or kirana. The system of internal loans helped the women of the groups who were in urgent need of funds. They were also able to learn the importance of repaying the amount on interest basis and thus they repaid their loans on a timely basis in easy installments.

Not only did the women of these self-help groups gain important financial knowledge but were also able to acquire essential knowledge on how to rear their children and other child rights. They were aware of the need to educate their children and the harm caused by early child marriage and practicing the dowry system. The members of the group admitted that they practiced such systems due to social pressure but stated that now they waited until legal age to get their children married off.

The participants of the groups were aware of the other CAP programs that were implemented in the area such as the ECCD centers HIV/AIDS campaigns, Teen channel and vocational college. In fact the children of some of the members have been admitted to the teen channel and vocational college. The group members were highly supportive of the all other CAP programs and even motivated other members of their community to join in the various programs.

The women believed in strength in numbers and the power of their self-help groups and were
confident that they would be able to tackle various community problems. The members of different groups were able to negotiate with local leaders for help in solving water problems and building community parks.

The communities in which these self-help group were setup benefitted a lot as the women from these groups spread the knowledge that they learnt through out. The awareness of other CAP programs and child rights helped the children of the community receive adequate education and opportunities. The training and capacity building made the women aware of their social responsibilities and also empowered them to be able to contribute positively to their communities.

**4. HIV/AIDS PROGRAM**

**Rationale**

HIV/AIDS is a major concern all over the world. Andhra Pradesh has one of the fastest growing HIV/AIDS prevalence rates in India. According to an estimate of NACO carried out in 2009, more than 8,50,000 people are living with HIV in Andhra Pradesh which is 22% of the total HIV cases in the country. HIV/AIDS has reached an epidemic form in 17 out of 23 districts in Andhra Pradesh. The spread of HIV/AIDS is no longer associated with the high risk groups only but is also prevalent among the general population with the epidemic continuing to shift towards women and young people. Young people are in the center of this epidemic with nearly 50% of the HIV infected being in the age group of 15-29 years. Sexually transmitted diseases (STDs) increase vulnerability to HIV infection. The Behavioral Surveillance Survey 2001 conducted by NACO revealed that Andhra Pradesh had one of the highest levels of STD prevalence and more than 20% of the STD patients in urban areas tested positive for HIV. Further, over 30% of the married people in the twin cities of Hyderabad and Secunderabad have STDs, thereby running a higher risk of getting infected with HIV/AIDS. With Andhra Pradesh ranking number 1 in the country in HIV/AIDS, greater prevalence of STDs and with the increasing trend in the migration from rural areas to the twin cities, the problem is grave indeed. Further, the levels of awareness and knowledge are very low among the people. Stigma surrounds reproductive health, RTI/STD and HIV/AIDS. This encourages a culture of silence, resulting in the youth and adolescents being misinformed about these issues and they resort to unreliable sources of information.

**Genesis of the Initiative**

Since sexual route is the most widespread and common source of the transmission of HIV, it becomes critical to create awareness and build knowledge of the adolescents and young people on reproductive health. The Andhra Pradesh government has taken various steps to handle the issue of HIV/AIDS, still a large amount of work remains to be done. A study carried by CAP in 2008 to assess the existing knowledge and behavior of the community with respect to HIV/AIDS revealed very low levels of awareness in the community.

> Participated in CAP-Plan programs and what we learnt there is being implemented like: SHG groups, Child rights and protection, Nutritious food, HIV/AIDS, Birth certificate, early child marriage, Importance of education

- Anasuya
including adolescents and women. 76% of the respondents were unaware of the modes of transmission of HIV/AIDS. Only 0.5% were aware that there could be transmission from mother to child, 1.6% knew about the use of infected syringe as a means of contracting HIV/AIDS and 8.6% were aware of the dangers of sex with multiple partners. It was also observed that there were inhibitions among the people to talk openly on reproductive health. Further there were many myths about the mode of transmission of HIV/AIDS.

Some of the critical issues affecting the community in the spread of the HIV/AIDS in the community are:

- Low level of awareness and knowledge among the community and the youth
- Migration and promiscuity among men
- Increased vulnerability among children and youth to become susceptible to infection
- Significant increase in the number of children infected and affected by HIV/AIDS
- Only 7% of 14-24 year olds have access to adequate information and training on reproductive and sexual health
- Only 9% of young people have access to voluntary counseling and testing centers.
- Hesitation among people with RTI/STDs related health problems to talk about them and get treated, increasing their vulnerability to acquire HIV/AIDS
- People with HIV/AIDS are ostracised from society.

To contain this menace of HIV/AIDS spreading further, CAP initiated this project in the community in 2007, through several activities to create awareness and provide knowledge to enable people to take the required precaution and protect themselves.

**Activities**

Several strategies were adopted and activities initiated to spread the message on HIV/AIDS, to create awareness, provide authentic knowledge and information on various aspects of this challenge. The process adopted for reaching out to the community centered around lectures, group discussions, exhibitions and so on. Initially 2 members were identified from among the adolescents from each of the 32 communities and trained as peer educators by resource persons from APSACS, to act as co-facilitators in this initiative. In the following years, these trained youth became peer educators and two more members were inducted into the training program. Thus, over 600 adolescents, with equal number of boys and girls have been trained on voluntary testing counseling and testing centers to provide information on sexually transmitted diseases, modes of transmission, prevention methods, prevention of parent to child transmission and sharing of present statistical data on HIV/Aids. 300 women members of the Self Help Group (SHG) who are in the reproductive age group and ECCD mother volunteers provided support by organizing rallies and conducting exhibitions to create awareness on HIV/AIDS by using IEC materials from APSACS.

**Outcomes**

One rally and one exhibition was organized in each of the 32 communities to create awareness on HIV/AIDS, RTI/STDs and reproductive health. It is significant to note that several community members, including men, women, youth and adolescents, community leaders, staff of the local government school/health centers, SHG members, mother volunteers actively participated in these events. Information in pictorial forms, exhibits and slogans were depicted focusing on vulnerable groups, need for youth to show prudent behavior in these events. All these efforts resulted in removing the inhibitions among the adolescents and youth and now they are more willing to talk about matters that they were uncomfortable to talk about earlier.

It is significant to note these initiatives have yielded the desired outcomes. The participants in these programs and visitors to the exhibitions have reported that they have learnt many new topics which they did not know earlier. Some of the knowledge and information gained were on the usage of condom, what is STI, existence of referral
centers and so on. It is also interesting to note the change in their earlier perception that HIV/AIDS as a dreadful disease. Behaviorally, the change noticed is that about 9% of the adolescents have accessed VCTC. There is still a long way to go, as there is still hesitation and apprehension among the community members for discussing these aspects of reproductive health and HIV/AIDS openly and accessing the services. Still efforts are required to facilitate people to overcome these inhibitions and access the services provided.

5. TEEN CHANNEL

Rationale

While government has been making efforts to provide children access to quality education these efforts largely go up only to the elementary level. Thus, teenagers and young adults belonging to vulnerable communities often drop out of school post primary education. Furthermore, these children are required to work because their families are unable to do without the wages they bring in. Many children who are forced to go for work end up staying at home or on the streets. These out of school children are left out of education; they become child workers which leaves them vulnerable to exploitation.

As a consequence of dropping out they face several problems and disadvantages in their transition to the work world. Poor academic preparation and poor work-world orientation leads to a mismatch between the demand for skilled workers and the adolescents. There is deficit in knowledge, attitude and skills and workplace competencies.

Genesis

In Andhra Pradesh, only 13 out of every 100 adolescents in high school complete their higher secondary education. The reasons for this alarming situation range from economic compulsions to socio-cultural beliefs and issues that prevent adolescents, especially girls, from going to high school. There is a serious problem of school leavers as witnessed by the incredibly high dropout rates from the classes VIII to X- 66.4% for boys and 71.5% for girls.

The teen channel was started in Shapurnagar, an industrial area in the Quthubullapur municipality, in 2003. Most of the families here work as daily wagers in the industries, construction sites, petty trades and mobile vendors. Early discussions and surveys revealed that there were many physical, mental and emotional challenges that the adolescents faced which forced them to drop out of schools. Lack of flexibility in school hours prevented many of the older children from opportunities to earn a side income, which their families depended on. They felt that the existing education system did not provide them with sustainable career and livelihood opportunities.

“am very grateful to CAP-Plan Project for giving me an amazing opportunity to successfully complete the Customer Relation and Sales course [CRS]. I got a job as a Front Office Executive which helped me to fulfill my Dreams.

-Priyanka, Short Term Vocational center, Shapurnagar.
Academic failure in formal examinations combined with easy availability of temporary work opportunities was also cited as a major reason for the high dropout rates.

The scenario is even worse for the girls in this age group as social norms of early marriage and family culture compelled them to drop out of school early. They face discrimination due to the lack of awareness and responsibility in the schools to provide for clean and proper sanitation in schools. They are pushed in taking up adult responsibilities at an early age, such as tending to their younger siblings or carrying out domestic chores.

The formal schools are not able to provide a conducive learning environment and thus the teenagers are unable to cope with the education pressure. They do not have access to reinforcement opportunities to combat this academic failure and thus they drop out.

Thus, the teen channel was started with the aim of linking quality learning and sustainable livelihood for these children and young people from susceptible communities. The goal of the program was to build safer, healthier and productive communities of young people capable of supporting self-directed growth and positive citizenship. The program addresses critical issues affecting the quality of life and future of high school drop outs and working adolescents between the ages of 13-17 years. It aims to create an enabling environment that addressed their needs – academic, educational, social, recreational and work readiness.

**Activities**

The components that the Teen channel programs address are:

- Life skills
- Career exploration
- Work place preparedness
- Apprenticeship
- Academic certification
- Individual youth development plan (IYDP) assessment matrix
- Employment/placement support
- Entrepreneurship development support
- Advanced learning opportunities for alumni

In brief, the unique feature of this Teen Channel is the exposure the students get in developing life skills along with the academic and vocational inputs. These life skills include a variety of self development modules like clarifying values and perceptions, developing self esteem, balancing interpersonal relations, decision making, conflict resolution, communication skills, time management, handling responsibilities and so on. They learn all these life skills through interactive experiential exercises. The students find these very exciting and useful. Many students have acknowledged these life skills as the most useful component of their exposure in the Teen Channel program. Career exploration and work place readiness is strengthened by their visit to various industries and apprenticeship in selected work places. Another unique feature of CAP vocational training programs are the employment and placement support provided. This is made possible by the market surveys conducted prior to enrolment and the tie up with corporates for placement. For those students who exhibit some entrepreneurial aptitude, CAP provides support both through training and guidance for setting up their enterprises.

**Outcomes**

One of the significant outcomes that were observed after the implementation of this program was an increase in the completion of high school by teenagers who had initially dropped out. Secondly there was a reduction in the potential drop outs at the high school level. Teenagers were drawn to this program due to the various benefits it presented such as flexible timings and economic benefits such as a fee exemption and free text books for the 10th grade provided by the state educational department.

On the academic front the teenagers and the parents commented that the education that their children were getting was extremely beneficial in helping them to cope with the educational pressure
and achieve higher scores in examinations. The parents remarked that the friendly atmosphere and the dedicated teachers provided their children a conducive setting for them to grow and learn much faster and to develop necessary work skills.

The program included many career visits to banks, industries, hospitals, hotels and many other such industries so as to allow the teenagers to explore various different career opportunities that were open to them. Combining these career visits with apprenticeships and job shadowing had a significant impact on the teenagers. An effective business to youth network and mentoring also helped the teenagers enormously in making them fully equipped to deal with the work world.

They believed that the qualified and competent administration and staff provided an environment that was free from discrimination and thus provided them with equal opportunities and removed social distances among peer groups. This allows for the students to become more confident and to develop a positive attitude.

The stress placed by the program on essential life skills has also had a great impact on behavior and attitude of the teenagers enrolled in this program. The teenagers noted that they had become more self-confident and were able to clearly define their goals. Their parents also noticed a considerable positive change in the behavior of their children. They observed that their children had become more respectful towards their elders, they were more disciplined at home and had greater confidence and were able to manage time better.

On a community level the teen channel has received great support and success as can be witnessed by the strong mobilization within the community itself. This can be attributed to the fact that the good performance of the alumni of the program persuades many other parents to send their children for the program. The effective and youth oriented learning, life and work skills modules provides the families with the results they require and so they are more than willing to recommend this program to other family and community members. Thus there is a major impact on the community as whole

Overall the Teen Channel demonstrated that it was a sustainable and replicable program that provided an alternate integrated system which was successful in linking learning and livelihood. The program is so successful that parents have stated that, even when given the opportunity to send their children to regular schools, they would prefer to send their children to the teen channel program only. Even the students themselves are very happy to go for classes and refrain from absenting themselves.

“I completed the Information Technology Enabled Services (I.T.E.S) course. I was placed at Aegis as a call center executive at Begumpet and I am drawing a salary of Rs.5500/- per month. Now I am sharing the responsibilities of my family’s financial needs. I am planning to go for higher studies in distance mode. Thanks to CAP-Plan project.

-Laxmi, Short term vocational Center [ETC], Shapur Nagar.”
6. VOCATIONAL JUNIOR COLLEGE

**Rationale**

The CAP-Plan operates in the suburban slum communities in Hyderabad including Shapurnagar. While the slum dwellers are an integral part of the area's economy, they have low levels of education and skills and hence are mostly casual workers. The income earned by them is not sufficient to satisfy their basic standard of living. Thus they are unwilling to use the available income or resources to ensure their children's development. This also, at times, compels children to enter the workforce at a young age.

The youth are denied a range of economic opportunities that their peers from more advantaged households have access to. Consequently the youth are unable to acquire the necessary skills to gain entry to the new economy market. Even those who do have the ability to acquire skills find it difficult to cope with the changing demands and competitiveness of the new economy market.

There is an inability of existing education learning models in colleges to provide a link between academic certification and the future career and livelihood of the youth in these colleges. Thus there is large number of these youths who do not go in for higher studies.

**Genesis**

In order to facilitate the families in these communities to strengthen their economic base which in turn reduces the economic compulsion for youth dropping out of college, a program which provides vocational skill training along with academic training was introduced by CAP in the form of a community college. The CAP Vocational Junior College was started in June 2005 in Shapurnagar.

The Vocational College is an alternate system of education and skill development for the poor and disadvantaged youth which is recognized by Indira Gandhi National Open University (IGNOU), New Delhi. The vision of the Vocational College is to be of the community, for the community and by the community for producing responsible citizens. The Vocational colleges promote job oriented, work related employability skills training along with life skills. The colleges offer the advantage of tailoring programs to local needs and state-based requirements by using approaches that will be most acceptable to workers in the given community.

The colleges offer various courses and job placement support on full time and part time mode. Scholarships are provided to needy students. After successful completion of the courses, the candidates are awarded a certificate from Indira Gandhi National Open University (IGNOU). Aside from the theoretical inputs, the students are encouraged to interact with industry through guest lectures, Industry Visits, field visits, on the job training, tours, market surveys, Career Exploration Visits etc. The interface with the industry is an integral part of the course as these courses are linked to apprenticeship/on-job training in various companies and placements after the completion of the courses.

Thus the Vocational Colleges aim to improve the existing situation of the youth and ensure that their right to adequate standard of living is attained.

**Components and Activities**

The components that the vocational college focuses on are:
- Life skills
- Career exploration
- Work place preparedness
- Apprenticeship
- Academic certification
- Individual youth development plan (IYDP) assessment matrix
- Employment/placement support
- Entrepreneurship development support
- Advanced learning opportunities for alumni

As already explained under TEEN CHANNEL, these activities are similar but in greater depth to suit the requirements of the students of the vocational junior college.
Outcomes

One of the most significant outcomes is that the students who undergo vocational training are more competent and better prepared for the labor market. The training they receive in the community college has substantially improved their basic education skills. They also develop valuable occupational skills through this program which has proven to be most useful for them in securing employment.

The students of the community college have acquired world of work knowledge due to the emphasis placed on the modules such as work preparedness and career exploration. They are also encouraged to develop leadership and entrepreneurial skills which notably reduces the risk of unemployment and in fact helped to make these communities more attractive for industrial development.

The community college also provides for on the job training as well as placement in training related fields. This has allowed the students to find jobs that are tailored to their skill set and their expectations and thus increases their job satisfaction.

Employment is not the only area of concern at the community college. The program is structured in such a way as to ensure the holistic development of a student and thus modules such as life skills and implementation of the Individual Youth Development plan are included. These modules have helped the student in understanding the various aspects of practical life. It has also equipped them with skills to deal with difficult situations, make rational decisions, and establish positive interpersonal relationships. It has had a very positive effect on their self-image and development of self-help skills.

The community college has great support from members of the community as they are aware and have witnessed the benefits of the program. Those who are participating in CAP programs motivate their neighbors and encourage other members of their family and community to join in as they are conscious of the advantages of the community college.

“Short term Vocational Training courses are very helpful to families because immediately after completion of the course, our children are getting jobs.

-PARENTS OF SURARAM COMMUNITY.
In the previous chapters, we discussed six different interventions that were identified as some of the significant challenges that required amelioration to provide a better quality of life to the different stakeholders in this community. These included preschool children, adolescents and young adults and women. Several areas were covered touching on education, from preschool education to vocational education, health related issues like nutrition, immunization, HIV/AIDS, employment and entrepreneurship through vocational training and forming SHGs, social issues like child rights including right to education, prevention of child marriage, gender equality and so on.

Any change or transformation to happen through planned intervention, there are four essential stages. The first stage is building **Consciousness** or awareness. That is, one should become aware of the problems or issues that need to be addressed. Without this consciousness no change can happen as one is not even aware that something is lacking, inadequate or is not there. Mere consciousness is not enough, unless there is a **Concern** to do something to change the situation. Very often, one is aware of the problem or issue but is not sufficiently concerned to do anything about it. This may be due to lack of interest, casual attitude, accepting the problem as inevitable or the problem is not of any personal concern. This brings us to the next stage of **Commitment**. One should become conscious of the problem or issue and get concerned that something needs to be done to change the situation and have the commitment to do something about it. Commitment is an essential stage but that will not bring about the change unless there is **Competence** to put strategies in place to achieve the desired changes.

CAP has been involved in several developmental activities in the Shapurnagar area and became conscious of the various challenges faced by this community. The challenges identified have already been discussed in an earlier section of this narrative. CAP was sufficiently concerned to bring about a change in the quality of life of this community. CAP not only had the commitment but competence to raise enough funds, mobilize enough personnel both from within the community and outside to carry out the various interventions. This required lot of planning, strategizing, mobilization, training, networking with various government and corporate agencies. Above all it required good leadership at various levels to sustain the efforts to reach the desired outcomes.

The impact of these interventions to satisfy the unmet needs of the community can also be analysed using Maslow’s framework of hierarchy of needs. Attempt has been made to identify the basic physical needs of food, health and hygiene aspects which have been impacted by the interventions. Security needs have been addressed through interventions in forming School Development Committees to comply with child rights. Mobilizing the community and bringing them together has greatly facilitated in satisfying some social needs. The formation of SHGs and empowering the women and facilitating their economic independence has contributed to the enhancement of esteem and autonomy needs. The Teen Channel and Vocational College has contributed to a large extent in enhancing the self esteem and the self - actualization of the potential of the adolescents and youth in the community.

**Impediments in the implementation**

CAP-PLAN had all the intentions to implement the various initiatives to bring about the desired change. However, good the intentions and initiatives are, the process of implementation does encounter several impediments. It is interesting to recount some of the impediments encountered that needed to be overcome.

As this was predominantly a migrant community, the problems of migration and relocation of the families and communities posed several problems in the capacity building efforts. Several delays and dislocations were encountered in carrying out the
programs according to the planned schedule. Due to poverty, both the parents had to work and they could not spare the time to attend the various programs. Getting the support of the government to conduct the programs in the schools was another hurdle that had to be negotiated. The turmoil due to agitations was also another major disrupting factor in the smooth running of the initiatives. As a fall out of this agitation, some companies closed down or moved out making the market scan for the employability training programs difficult to predict. The migration of families also posed the problem of tracking the beyond six months.

**Some notable changes in the community**

It is difficult to quantify the changes and outcomes. Though some quantitative data are available, the main focus of this narrative is to provide a qualitative sense of the perceived impact based on the focus group discussions held with different stake holders, observations, narratives and some case studies.

To illustrate, the impact of the kind of education on the community, provided by CAP comes through qualitatively. CAP works intensively to improve the class room practice by addressing the deficit learning so that the children in the school in the project area acquire basic reading, writing, number skills and consequently grade level competence. This was achieved by developing strategies and materials to be provided to children and teachers. English bridge materials were provided as a coping mechanism for transition of children from Telugu to English Medium at the post-primary level. The focus was on scaling up, consolidation and documentation of the learning approaches and successful teaching-learning strategies. Methods and materials were adopted for improving the quality of school education and enabling children in acquiring grade level competence. This included a Learning Improvement Programme focusing on developing strategies for improved class room practices through provision of training to teachers. Development of materials were undertaken where required. Before initiating these identified projects, a baseline survey was conducted in 2006 and some salient features have been highlighted here. An overview of the data shows that, in several aspects the awareness in the community was rather low. Though a post project survey was carried out, the analysis of the data could not be carried out to due to some technical problems. After four years of intervention, some data are available. However,

"I am deeply impressed with everything you introduced me to today. The visit to the family was well organized. The way you try to help these by giving them goals which they can reach on their own investment is commendable. I am glad to support your project, children and people in these communities.

-Bala Sai Ram, Bucka"
qualitative responses gathered during focus group discussions, informal sharing of experiences and observations do provide a sense of there being a definite improvement in the status of this community on several aspects of the interventions.

**The ECCD Initiative**

In the ECCD program intervention, a major change that happened was in the enrolment of children. At the time of baseline survey in 2006, less than 32% children of preschool age going children were enrolled in any ECCD program. Till date, approximately 3551 children (Boys 1705 and girls 1846) of the age group 3 to 6, have been covered under this program and 1210 (boys 559 and girls 651) have been admitted in to regular schools. The older siblings, particularly girls who were taking care of the younger siblings are now going to schools after the 25 ECCD centers were started in community. Some other improvements noticed in this community after the intervention are, members who had registered the birth of their children and had their birth certificates initially, was less than 15% but it increased to 54% after four years of intervention. Similarly, the percentage of children who were fully immunized before their first birthday increased from 50% to 100% after the intervention. Percentage of children currently enrolled in formal or non formal primary education is over 67%. Number of maternal deaths is almost zero as the percentage of institutional deliveries or attended by skilled birth attendants have gone up to over 45%. Another interesting feature is the significant increase of nearly 90% of the parents who know about the child's developmental milestones. This is the result of a significantly large percent of parents now know about the access to early childhood care and development services available in the community.

The significant point to note is that the awareness programs and regular meetings with parents and center volunteers on early childhood care aspects and sharing of data on their children's weight, height and immunization has resulted in the parents becoming more aware and sensitive to the health of their children. The mother volunteers also share the inputs gained by them during capacity building programs with other members in the community thus impacting a larger number of people in the community.

It is also significant to the point out here that the ECCD centers started by the CAP PLAN project in this community have now been converted into the Government Anganwadi Centers which works under the supervision of Child Development Project Officer, under the ICDS (Integrated Child Development Services) scheme. The transition has been smooth. CAP continues to work with the 55 Anganwadi Centers in the 32 communities. Currently, the CAP's role is to train the Anganwadi workers, extend support in mobilization by creating awareness among the parents, providing the material already developed, formation and strengthening of the mother committees, Child Council Members and Youth clubs.

While it is desirable that the ECCD program has been institutionalized with government support, there have been both positive and negative outcomes. The positive outcomes are (i) under this scheme children and pregnant women are provided nutritious food, including boiled eggs twice a week, whereas in the ECCD scheme there was no provision for supplying food.

(ii) All the children in the community now have access to early childhood education. Presently, on an average, one center is established for every 1000 population (iii) further, these centers now have access to the other government schemes under the women and child development department like Balika Samrakshana Pathakam and so on.

On the negative side, while the timings were 9 a.m. to 4 p.m., under the CAP PLAN scheme, the timings have now been reduced to 8.30 am, to 1.30 p.m. This has to a certain extent diluted the program and this has especially affected the children of working parents who leave the kids in the center and go for work. Earlier, they could pick up the children in the evening. Now they are forced to make alternate arrangements after 2 p.m.

In the earlier scheme there was greater emphasis
on pre-school education. The parents were also sensitized to social issues and preparing nutritious food on their own. Parent Teacher Meetings were held regularly and the teachers were well trained. In the new set up, mother committees which were the administrative tools to run the centers, are yet to be formed. In certain areas like imparting training in the preparation of nutritious food and arranging for universal birth certificate (UBR) the progress is tardy. Previously, Child council Members at school level were involved in mobilization of children for ECCDs. Now the anganwadi workers themselves are mobilizing the children. Child Councils are yet to be formed in these Anganwadis. Government concentrates on a particular problem of the community one at a time, whereas the mandate of CAP-PLAN was to tackle multiple issues simultaneously.

Now there are 190 centers compared to the 55 centers that were there earlier. In the mandal there are 64 communities and CAP is continuing with the earlier 32 communities. There is a demand from the remaining centers for CAP support. In this transformation process, the challenge is to inculcate in the Anganwadi workers the value and importance of the overall development of the children catering to their entire varied intellectual, social, economic, emotional and health needs. The timing of the centers to meet the needs of the parents also needs to be kept in view to support the working parents. Otherwise, the older girl siblings who were relieved of this burden and responsibility of caring for their younger siblings, at the expense of their own education will have a setback again.

**The HIV/AIDS initiative**

The baseline study of 2006 in this community on the level of awareness on HIV/AIDS was nearly zero, among male and female adolescents and mothers. Only 50% of mothers of child bearing age who did not want anymore children were using any modern family planning methods. Rallies and exhibitions were conducted in all the 32 communities and awareness programs on HIV/AIDS covered over 300 women in the reproductive age group. It is significant to note that, after these exposures and awareness programs the participants reported that they have acquired several new knowledge and information on the usage of condoms, STD,

I am Pooja Sethia from Shapurnagar. My father is a private employee and mother is a housewife. I have two younger sisters and one younger brother. Though I was eager to continue my studies, I had to discontinue due to poor financial condition of the family. I came to know about CAP Foundation from the road show in the village. I went to the center and the facilitators explained the process of joining the ETC. I joined the CRS course and learnt marketing skills, life skills and effective communication skills. I joined as a Tele Marketing Executive in SHASTER Technologies Private limited on a salary of Rs. 6500 per month.

When I went to the CAP-Plan Employability Training Center, the facilitators explained the process. I immediately joined the CRS course. Here I learnt marketing skills and life skills. I can now solve my problems in an effective way. I have not only improved my communication skills but also my personal appearance. The mock interviews and group discussions conducted by the facilitators helped me in getting the job as a Tele Marketing Executive. I am very grateful to CAP-PLAN for giving me this opportunity.
availability of referral centers and so on. Above all, they are now able to talk openly on this sensitive topic and changed their perception that HIV/AIDS as a dreadful disease and those affected to be condemned.

**The Teen Channel Initiative**

The baseline survey showed that over 98% of the families in the community reported that at least one of their children was engaged in hazardous/exploitative child labor. The survey further revealed that the percentage of children from this community who had completed primary education and currently enrolled in formal or non-formal post primary education, (secondary or vocational) was less than 40%. CAP Foundation in the year 1988 initiated activities with the Andhra Pradesh Police Department to remove the children at risk from hazardous conditions and the school drop outs to bring them back to education through the innovative residential bridge school concept. Out of the idea of integrating adolescents into this program, Teen Channel took birth in the year 2003.

3400 out of school adolescents accessed Teen Channel program and completed their tenth grade (high school) board exams. Because of the flexible timings of the Teen Channel, more number of working and out of school adolescents were able to resume their studies. Life skills, friendly teachers, discipline, comfortable class rooms, activity based teaching methods and group learning encouraged the students to come to these centers. The students were also provided pre-vocational education and basic computer skills. The students were taken on career exploration visits to local companies. The students were also oriented on how to face examinations and overcome stress. Through networking with the education departments, fees exemption of Rs. 800 per student was mobilized.

**The SHG Initiative**

Only about 50% of the community reported that they had access to sustainable financial services at the time of the baseline survey in 2006. The survey also revealed that just 4% of the communities reported an increase in household disposable income. To facilitate the economic and social empowerment of the women in the community and to improve the family financial position, the SHGs were formed. It is significant to note that after the initiative has been in operation for over four years, now 30% of the women report an increase in the household disposable income. During this initiative, the capacities of the 80 women SHGs were further enhanced on various aspects of group management. Cumulative savings of the 1100 women members of these SHGs is Rs. 20 lakhs. These groups have been registered with the local municipalities and government loans for setting up micro enterprises. Some groups are taking internal loans from group savings which are to the tune of Rs. 2.24 lakhs. These groups through local municipalities have got government loans of Rs. 26 lakhs for setting up petty and small businesses.

Because of savings, self-confidence of SHG members has increased. Earlier, when they formed the groups, the family members did not encourage them but now, their family members are very supportive. 300 members of SHGs are now aware of the Child Protection and Legal Rights of Women, gender discrimination, child abuse, CWC, JJ act, child trafficking, dowry, child marriage, child rights, domestic violence, sexual harassment, summary of legal provisions, family court act and so on. Women shared that their learning from these sensitization programs has increased their confidence and that in future if they come across any issue related to their rights they will bring it to the notice of the concerned departments.

Women were also sensitized on girl-child issues like importance of girl-child education, importance of safe reproductive health, safe-guarding rights of the children, importance of nutritional food, evils of early marriages, lack of infrastructural facilities like toilets and appropriate class rooms in government schools, availability of women helpline so that the SHG members can contribute by their effective participation in addressing the issues of girl child.

Like the ECCD initiative, the SHG initiative started by CAP-PLAN is also undergoing major transformation. Under the CAP-PLAN scheme, 85
SHGs were formed in 27 communities. Under this scheme, a one time measure of Rs. 32500 was provided to 10 SHGs as revolving fund for their internal lending. Now in one single community, there are many SHGs formed by the government under the Mission for Elimination of Poverty in Municipal Areas (MEPMA) which a government organization under Municipal Administration. Here again efforts are being made to merge them with MEPMA which forms Federation of SHGs in the communities.

There are differences between SHGs promoted by CAP and those promoted by MEPMA. CAP supported 85 SHGs covering 1175 members and of these 35 were bank linked. On the other hand, there are 2626 SHGs promoted by MEPMA. One major difference between these two categories of SHGs is that, as has been already described in detail, the CAP supported SHG members are actively involved in all the initiatives of CAP in this community. SHG members also get regular capacity building support through monitoring visits and meetings. 240 SHG members were trained on entrepreneurship by NIRD. SHG members are given training in UBR and sensitized about the harmful impact of early child marriage. Another important role played by the SHG members are their involvement in enrolling children in ECCDs, schools, procuring Birth Certificate Etc. On the other hand, MEPMA SHGs are getting several benefits from Government.

While regularising has its advantages, the government bureaucracy constrains the overall involvement of the SHG members for the development of the community as an integral part of all stakeholders.

Some of the emerging challenges are CAP supported SHGs are not getting support from MEPMA staff. MEPMA staff is not linking CAP SHGs for the bank loans as these SHGs are not ready to provide gratification to the government staff. There also problems in admitting SHG members into the federation formed by MEPMA. There are some drop outs from the SHGs due to non availability of bank loans and government schemes.

The School Development Committee (SDC)

Currently there is a lot of concern about child rights and with the passing of the Right to Education Act, a National Council for the Protection of Child Rights has been set up at the national level to look into the implementation of the provisions of this policy. However, lack of information and knowledge on child rights and understanding what entails violation of child rights makes children vulnerable and exposed to exploitation. CAP works towards promoting increased awareness about child rights and child protection at four levels – among the children, family, community and government institutions. This resulted in establishing School Development Committees (SDC) in this community which acts as the platform for the development of the community. The formation of the SDC itself is a major change agent for the development of this community. So far, 1260

This was a very exciting day for me. It feels good, when you know that sponsoring is a good thing to support people like you who are doing a good job. I wish you all the best for this project.

- Ms. Burchardt.
children have been trained on child rights and protection issues.

SDCs are formed both at school and at community level for increased participation and awareness of child rights. Approximately, 8500 students were covered under the in school program since the program initiation. The executive body of the SDC consists of proportionate representation of children, parents and teachers. The executive body approaches authorities like local police personnel, business people, elected representatives, doctors and other community leaders for protection of children, crime prevention, building better relations with the communities, networking, resource mobilization and advocacy activities. Different committees exist within the SDC on health, education, recreation, savings, environment, and so on. The capacity of the forty-two SDCs formed were enhanced through various orientation workshops for its core and support staff on child rights, and child protection covering UBR, gender discrimination, early child marriages and corporal punishment. In addition to the orientation to members of the SDCs, workshops have also been conducted for all field person including 25 Teen Channel facilitators, 30 Vocational course faculty, 40 teacher volunteers of ECCD centers, faculty of bridge school and government schools on revised child protection policy and the roles and responsibilities of all concerned in implementing this policy.

An interesting and significant component of this SDC is the visioning exercises carried out to review the progress made in the light of issues, problems and challenges faced by the school and community and to prepare an action plan to deal with them. Almost all the schools have common problems like absence of compound walls, toilets, inadequate drinking water, electricity, tree plantation and the like.

It is interesting to recount here some of the significant progress achieved due to the effort of the members of the SDC. For example, the sewerage work for the canal behind one of the schools was sanctioned but for nearly a year, no work was started. With frequent representation to MEO and the local leader and with pressure from parents the work is now under progress.

A number of SDCs in different schools played a major role in getting funds allocated for some long standing demands for construction of toilets, gate for the school, power connection, water tank and a bore well as well as additional class rooms. Work on these projects is in progress.

It is significant to note that these SDCs have realized the value of these visioning exercises and plan to continue them year after year. They have also realized that government alone cannot solve all these problems and propose to enlist the contribution from other agencies like voluntary organizations. The SDCs have started networking for leveraging resources. Another significant development is that the alumni and child councils have decided to initiate small projects in their communities on issues affecting children and youth.

**Vocational College**

The setting of the Junior vocational colleges in this disadvantaged community provided a great opportunity for those adolescents who completed the high school to aspire for higher education with specialization in vocational streams. This also provided the next step for those students who passed out of the Teen Channel as these two year vocational courses are recognized and certified by the Board of Intermediate, Government of Andhra Pradesh. 650 students who had completed high school accessed the two year vocational courses. In addition, 2684 youth went through short term employability training in Information Technology enabled services, customer relations and sales. 74% of these trainees have accepted placement in well known companies with monthly salary ranging from Rs 3000 to Rs. 5500.

During the interaction with the parents and the community, it was noticed that the parents were very happy and satisfied with the opportunity and training that the children got from this vocational college. The parents also shared how this junior college has not only provided a good employment opportunity to their children but also changed the
behavior by enabling the children to become more disciplined, self confident, regular in their habits and also contributing to the family income. The parents were very satisfied and reported that they will definitely recommend this program to other members in the community. It is significant to note that many parents reported that they preferred this vocational junior college to other private and government institutions providing general education as these courses were more focused and provided ready placement also. It was also pointed out that some children were leaving the general education provided in other private and government institutions and were opting for the junior college as evidenced by the increasing demand for admission in these colleges. Thus the junior colleges have been well received and recognized by the community and have made a good impact on the community.

The Ripple Effect of the Interventions

The six major interventions by CAP Foundation in this community has been described in detail in the previous chapter. These interventions were carried out in 32 communities with 16 community volunteers and 6 cluster managers. These interventions have brought about considerable changes in the community as described in the previous section. It would be interesting to analyze how far the problems and issues have been addressed, what are the tangible outcomes and what is the overall impact on the community as a whole. Though these projects were stand alone in some respects, handled by different resource persons, facilitators, volunteers and cluster managers, it is interesting to observe that there is a general awareness of the different interventions in the community. This awareness about the various programs is the result of the conscious effort and strategies adopted by the facilitators to reach out to the community. These strategies included road shows, door to door canvassing of the various initiatives by community volunteers, house visit by teachers, through meetings held in the community, rallies and exhibitions and so on. Further there were sign boards which attracted the passers by. Community members also got to know about the initiatives from neighbors and children.

During the focus group discussions, the members of the various interventions were able to identify most of the other interventions taking place in their community. Another interesting feature is that, some participants of a particular intervention were actively involved either as volunteers or participated in multiple interventions. For example, mother volunteers in the ECCD program and members of the SHGs took active part in the rallies and exhibitions conducted for spreading awareness on HIV/AIDS. Parents were involved in the School Development Committees. Children from the schools were actively campaigning for HIV/AIDS, child rights, school amenities, prevention of child abuse, reporting corporal punishment by teachers and so on. In one group discussion with children of the School Development Committee, they reported that when

“Thank you for arranging visits so wonderfully and for providing me with all the information. It was a pleasure getting to know your impressive programs and meeting you. Congratulations on your marvelous work.

-Mrs. List

"
they got to know that a girl below the eligible age for marriage was to be married, they went and argued with the parents and the community and stopped the child marriage.

The multiple interventions in this community were facilitated by networking involving several agencies contributing to the overall development of the community. Network and collaboration with SSA, Education department, resulted in getting permission for fee exemption and concessional bus passes for adolescents. Collaboration with Board of Intermediate and State Institute of Vocational Education, facilitated in setting up of junior colleges and short term courses. Networking with corporates for placement of adolescents was another area of successful negotiation. Other institutes partnered with included APSACS, Urban municipality, Department of Women and Child Welfare especially for training purposes. Corporates and other local NGOs provided support in various training programs. This networking was also successful in leveraging funds from several other donor agencies like MSDF for Teen Channel and Employability Training centers in the project area.

It is significant to note that these interventions are gradually getting internalized. The alumni and child council members have initiated small projects in their communities on the issues affecting children and youth. Child members of various programs like ECCD, Teen Channel, Vocational and employability courses have started paying back in small installments.
RECOMMENDATION AND WAY FORWARD:

Interacting with the various stakeholders who have benefitted from these interventions to elicit their perceptions and views resulted in identifying several areas of gaps that needs to be attended to enhance the effectiveness of these interventions. For example, the mothers in the ECCD program pointed out that the children learn only the English Alphabets. Several of the children go to Telugu medium schools after their preschool. It was suggested that it would be useful, if the children are taught the Telugu alphabets also. Another suggestion that came was to include some nutritious food for the children who attend these ECCD centers. Now with the ECCD centers having been integrated under the ICDS, children and pregnant mothers are getting boiled eggs twice a week.

Parents also came out with certain suggestions from their point of view but there would be practical problems in implementing these requests. For example, the parents wanted that it would be nice to have kindergarten to vocational college in the same premises. This is feasible when there is a planned development and all the facilities can be provided in a single campus. But here the situation is very different. This project area is very congested and totally built up. CAP had to put in lot of effort to identify available space and buildings where these ECCD centers, Teen Channel and Junior Vocational Colleges could be established. On the other hand, the suggestion to include spoken English is a very valid suggestion and this is already being attended to.

Several areas that are already in operation but need further strengthening have been identified. One area of major concern that needs strengthening is the child protection focus including prevention of girl marriage before the legal age and learn without fear campaign. There is a need to continue to reinforce the child protection policy, by ensuring that all concerned, including new staff, vendors, sponsors and other stake holders internalize the child protection policy for full implementation.

It was pointed out earlier that the percentage of UBR has increased significantly after the intervention. Still, this needs to be strengthened further by capacity building of different groups including child councils, alumni/youth councils, mother volunteers, parents, caregivers of ECCD centers, sponsor families, SHGs and SDCs to campaign and promote UBR and also network with local municipality to ensure that all children of ECCD centers and sponsored children are registered and have birth certificates. There is also need for networking with the government for accessing integrated Child Protection Scheme and work with the State Child Protection units and concerned district level functionaries for building capacity and community based protection mechanisms in the form of school teachers, child and alumni councils, SDCs and women’s groups to increase awareness and strengthen child protection issues across various levels.

While the ECCD centers have been regularised under the government through the ICDS scheme and nutritious food in the form of boiled egg is provided to the children, the efforts to teach the mothers the importance of preparing simple nutritious food at home should be continued. Further the focus on the psycho social development of children in the preschool age group and efforts to increasing the birth registration and total immunization of children need to be sustained. Provision also needs to be made for the care of the children beyond 2 p.m. for the benefit of working parents.

Capacity building of various functionaries and stakeholders is another area which requires greater effort and inputs to institutionalize, continue and sustain the initiatives. Capacity building of SDCs which include child council representatives would facilitate the implementation, monitoring and review of school community vision realization plans and enrolment drives to mobilize out of school children. Negotiation and decision making skills training to these members would help in leveraging resources and safeguarding child rights and their
participation. This needs to be preceded by awareness building of school head teachers, teachers, child council members, education functionaries, SHG members on Right to Free and Compulsory Education.

It was pointed out earlier how the school visioning efforts have led to the actual implementation for the benefit of the community. There is a need for advocacy with the government at Mandal, district and state level to achieve and adopt successful strategies demonstrated in teaching learning activities and for integrating aspects of school community vision plans. Further, there is a need for child councils in every school for implementing the child protection efforts, promoting pre-vocational education and the critical need of better sanitation facilities, especially for girls.

The concept of SHGs has gathered momentum in the community to a large extent. While it is laudable that the SHGs have now been brought under the MEPMA scheme, the involvement of SHG members in the other developmental initiatives in the community should be continued and strengthened. The SHGs formed under CAP PLAN should also be eligible for all the facilities available under MEPMA.

Considerable headway has been made in the area of creating awareness on HIV/AIDS through rallies, exhibitions and peer education efforts. However, this is an area of major concern and unless the campaign is kept alive and sustained there will be a relapse. Capacity building of peer educators needs to be strengthened, counseling centers need to be more easily accessible and supportive.

Junior vocational colleges have already been made more attractive by integrating them as community colleges recognized by the prestigious Indira Gandhi National Open University (IGNOU). These students now get the certificates, diplomas and degrees awarded by IGNOU paving the way for further opportunities in higher education.

**THE WAY FORWARD**

It has been noticed that very often, projects are initiated with funding from different donor agencies. Once the project funding ceases the initiatives also come to an end with the community reverting back to its original status. Unless the initiatives are institutionalized and made self sustaining the gains attained are frittered away. CAP foundation is fully aware of this problem and efforts are made to empower the community to become self sufficient and sustain the efforts so the gains achieved are maintained and the community continues to benefit from the interventions. The above discussion clearly indicates the progress made in each of the initiatives, their impact on each other and the community as a whole.

There is a considerable change in the awareness on the several challenges facing the community.

> I am glad that I could see all the projects and the good work you are doing. It was good to see that you help so many children get a good education for a better future. Keep on working as you currently do. Thanks for letting me see your programs.

-Mr Gorski
For example the community’s awareness has increased for the need for early childhood care in terms of better nutrition, need for immunization for better health of the children, need for the birth certificate for all future purposes and for the overall social and psychological development of the child. The community is aware of the health hazards of HIV/AIDS. There is awareness about the need for the protection of child rights. There is also awareness about the value of vocational education leading to better employment opportunities and so on.

There is now a perceptible concern that these challenges be addressed to achieve the desired change. The involvement of the various stake holders like mother volunteers, SHG members, peer educators for the HIV/AIDS initiative, the school children, teachers, parents and heads of institutions for child rights, the facilitators, corporates, various government bodies in providing support for the Teen Channel and Junior Vocational education efforts, shows the commitment at various levels for supporting these initiatives.

The various capacity building initiatives of various stake holders like mother volunteers, SHG members, School Development Committee members from school children, their parents, teachers and heads of institution with visioning exercises and other strategies has provided the competence to deal with these challenges.

Now efforts are required to institutionalize and maintain these initiatives at different levels so that benefits accrued are not only sustained and but also further progress is achieved. As already pointed out, CAP has been working in 32 communities with 16 community volunteers and 6 cluster managers. In continuation of the progress made by CAP Foundation so far, CAP has introduced their new brigade called “CAP Community Service Youth CLUB” who will actively involve in all the interventions at the grass root level to sustain and improve the communities where they have been working so far. The dream is to see that these communities do not regress back but continue to be free from the challenges confronting them and achieve overall development, socially and economically.

For this purpose it is proposed to form 2 units of youth brigade in each of the 6 clusters with a minimum number of 20 adolescents/youth alumni totaling 240 members. They will work hand in hand with CAP Foundation volunteers in their own community for the overall socio-economic development. CAP Foundation will facilitate this effort by providing support and capacity building of the members of this youth brigade.

The first step will be to identify the gaps in the desired outcomes. For this periodic surveys will be carried out in the community to assess the development achieved so far and identify the problems and issues still persisting that needs to be addressed. Consultations will be held with all the stakeholders of the community including parents and elders.

The next step will be to develop the appropriate strategies for filling these gaps by identifying the solutions and planning their implementation for achieving the desired outcome. One approach will be strengthening the existing programs like ECCD for sensitizing the communities about early child care covering education, health, nutrition, importance of birth certificate among pregnant women and their families. Another program will be to establish SDCs in all the schools and strengthening the existing School Development Committees to identify and report cases of child abuse and exploitation, help in withdrawing children from work, especially those engaged in hazardous work. Efforts will also be made to raise awareness among the community and children regarding child safety nets like child line and advocacy in the community for the prevention of girl child marriage and its harmful effects.

Some new initiatives have also been planned. One of them will be the launching of the News Letter “Asha Kiranalu” by child council members and media team members. Another new initiative will be launching “Shapurnagar Times” to hold a mirror to the local community and act as the voice and vision of the community. This Weekly Newsletter will also
provide information on employment opportunities to CAP students and Alumni and empower the residents of this community. Further, these media will be used effectively to spread awareness regarding child rights. Another initiative will be mobilizing school drop outs and enroll them in Teen Channel and CAP Vocational Junior College for improving their employment opportunities by providing technical and life skills. The Alumni Clubs will be strengthened and youth SHG groups will be formed to set up their own business enterprises by providing overall skill development and motivate them to take up higher education for better job opportunities to the youth and their siblings. To facilitate this, the habit of monthly savings will be inculcated in the youth. The youth will also be encouraged to become members of the School Development Committees and carry out visioning exercises periodically and bring the issues to the notice of the concerned authorities for action.

The CAP will provide support to the youth brigade by capacity building and empower them to achieve the desired outcomes. Peer counseling training will be provided to bring about desired behavioral changes in the adolescents and youth. These groups will go to the schools and address student issues and also conduct skill training program for classes of 7 to 10, especially girls. Youth brigade will also be facilitated to network with others working with children in Hyderabad on issues to be addressed such as adolescent relationships, parenting and crisis counseling.

In conclusion, it needs to be pointed out that this is a unique experiment where multiple interventions were initiated in a single community. It is significant to note that these initiatives had a ripple effect with the various initiatives impacting one another. The stake holders got involved in several initiatives at the same time supporting each others efforts. By and large the communities were aware of the various interventions in the community, through different means. For example, some of the mother volunteers were also members of the SHG groups. The Teen Channel students moved smoothly into

“I am very happy to meet Sangamesh here. He has a very good family and I am so impressed with his smile. It was a great experience during my first visit to India. Thank you so much your hospitality.

-Mr. Park Han Sam

We are also glad to see how these engaged group is working. The results are excellent. We wish you and your whole team continue the good work and we will support you. Thanking you.

-Mr Jaeger
the Vocational Junior College. SHG women got involved in organizing rallies and exhibitions for spreading awareness on HIV/AIDS. SDC members got involved in social issues like preventing child marriage, fighting for child rights, mobilizing support from the government and other agencies for improving the school facilities like more classrooms, toilets etc. Peer educators in the HIV/AIDS campaign interacted with all the members of the community. The various functionaries of the municipality, state government departments, NGOs, corporates were all involved in these initiatives in some way or the other.

Though it is not easy to quantify the overall development that has accrued to the community, there is a general sense of these multiple initiatives having impacted the community as a whole.

Another important feature of this initiative is the systematic effort that has been made to institutionalize and sustain the development initiative by empowering the stakeholders to own the responsibility for continuing the efforts. It is hoped that this model catches on and total development and owning responsibility for development becomes a norm in the future.
I have attended awareness sessions on nutrition and early child care programs and learnt about the importance of sprouts and now I am giving it to our children regularly.

-Shakuntala

Some of the parents are not sending their children above 4 years of age; I personally brought such children and joined them in the center.

-Urmila

I did not know the importance of breast feeding. After I became aware in the meetings I fed my daughter till she turned 2. Before that I did not know the importance and I fed my son only for 6 months, so he is very weak when compared with my daughter.

-Urmila, Chandragirinagar

Both our children did not have birth certificates. After attending mother volunteer meetings I came to know about the importance of birth certificates and now I have taken birth certificates for my children.

-Sridevi, Qutbullapur

We were unaware of the nutrients present in starch. After attending the meetings we are cooking with out straining starch from rice.

-G. Suseela

Earlier we used to cut vegetables and leafy vegetables and wash later. Now after getting awareness at first we are cleaning the vegetables then cut and cook.

-Devi

Before I joined CAP – Plan, some of my superstitious family burnt one of my baby's stomach with needle since she had digestion problem. I stopped the practice for my second child after getting awareness from CAP-Plan.

-Krishnaveni
CAP’s roadmap for various domains is as follows:

- **Invest in schools for holistic** School Community Development through development of stakeholders’ competencies, necessary structures and processes for collective leadership for planning, implementing and sustaining interventions. The stakeholders will include: school children, teachers, parents, other community members and leaders, local elected representatives, and other stakeholders (e.g., local police personnel, doctors, business and media people).
- Intensify work with the families and schools through consultations and capacity building to position the school as a ‘community base’ and an effective point of convergence of all stakeholders, resources and opportunities to strengthen families and school communities for consolidation and sustainability.
- Study and document the learning from emerging strategies and good practices for regularisation and policy advocacy.
- Take up advocacy of the established models/initiatives by collaborating with the Government at state/national level; linking up with existing Government programs; and networking with relevant groups such as NGOs, Corporates, and civil societies/citizen groups.
- Build capacities of Project Unit (PU) staff on various thematic aspects to provide enhanced program support in the light of new directions and challenges.
- Develop CAP Urban Learning Resource Centre (ULRC) for mainstreaming and advocacy as part of institutional development. This is seen as one of the most significant outcomes for advocacy and mainstreaming. Adequate provisions would have to be made available for the CAP ULRC towards institutional development to be able to mobilize, activate and service networking and advocacy initiatives in response to challenges.
- Link learning and livelihood so that a continuum of development is achieved through early child care education; and primary, secondary and post-secondary education for both out-of-school and in-school children with particular emphasis on high school and post-high school education and girls education. Work towards providing better livelihood opportunities through the vocational and employability skills training program in new market economy jobs for youth, as well as promoting self help groups (SHGs) and entrepreneurship among women and youth.
- Use Early Childhood Care and Development (ECCD) centres and SHGs to build capacities of women and promote their effective participation in programs. Create awareness and build capacities on child survival, safe motherhood and child protection issues including physical and sexual abuse, early girl marriage, and hygienic practices.
- Strengthen children and alumni groups to increase their participation in school community programs.
- Strengthen School Development Committees to promote community Governance.
- Facilitate creative resourcing by the community groups to network and mobilize resources and other services like improvement in school infrastructure, health, water and environmental sanitation (WES) and livelihood promotion in the communities.
- Networking and collaborations between specialist organisations (in the field of education, health, alternative employment and skill development) and schools will help upgrade the quality of life of children, their families and their community. This is an indicator of community level sustainability and empowerment. Other than financial gain, this will result in increased competency of the community to mobilize and manage the resources in a sustainable way.
- Network and collaborate with Government departments, Police, Corporates, INGOs/NGOs and other civil society organizations to access resources, scale up and mainstreaming of the programs. Advocacy will be undertaken through consultations, campaigning, seminars and conferences.
- Actively participate in thematic networks promoted by Plan India.