

ANNUAL REPORT



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CONTENT

- 3 Partners and Budget Allocation
- 4 Education
- 5 Health
- 6 Economic Empowerment
- 7 Civil Society Strengthening
- 7 Sponsorship
- 8 Annual Network Meeting and Workshop with Partners
- 8 Participation and Cooperation
- 9 Intervention Work
- 10 Mobile Health Education Program
- 12 Bombay Mithayi Changed the Fate of Poor Women
- 13 Happy Family
- 13 Case Study of Aklima Begum
- 14 Fair Trade Celebrations
- 15 Staff Training
- 15 Communication

PARTNERS AND BUDGET ALLOCATION

Partner	Component	Budget
Tibetan Children's Educational and Welfare Fund	Education	28,45,000
Tibetan Voluntary Health Association	Health	23,66,000
Central Tibetan Relief Committee	Economic Empowerment	17,80,000
Sisters of the Little Flower of Bethany	Education	17,81,000
Kiran Society	Education	23,50,000
Reaching The Unreached	Economic Empowerment	23,00,300
Maximising Employment to Serve the Handicapped	Fair Trade	31,28,007
Tribal Educational and Environment Development Trust	Economic Empowerment & Education	42,00,000
Asha Deep Foundation	Economic Empowerment	22,92,000

EDUCATION

Objective: Access to good quality primary and secondary level education to approximately 8 000 marginalized boys and girls, including children with disabilities, by 2014 in order to enhance their career opportunities and enable them to live to their full potential.

Indicators	Results or progress towards results
4000 marginalized children, including children with disabilities, have access to educational and vocational training opportunities.	<ul style="list-style-type: none"> - 884marginalized children have had access to educational opportunities. - 390 children have had access to educational opportunities through the evening study centre. - 76 youths have had access to vocational training. 24 received employment after the vocational training. - 2 self-help groups supported 9 children belonging to poor families in buying school stationeries and encouraging them to attend schools. - 2 Pre-primary centers received food and medicine through Department under Integrated Child Development Scheme (ICDS). - Enrolment and attendance of children with disabilities is increasing. - 13 schools have accepted to admit children with disability after their completion of high school. - There is good initiative and cooperation from other schools in regards to the concept of inclusive education.
Teachers and parents from 22 schools under SPARKE project are aware of the rights of children and have knowledge on methods for positive disciplining and prevention of bullying.	<ul style="list-style-type: none"> - The compiled results of the SPARKE project will be reported separately in the final report for 2012-2014
Improved teaching skills of 85 teachers through exchange program and exposure between Tibetan schools.	<ul style="list-style-type: none"> - 21 science teachers improved their teachings skills through in-service training at National Council of Educational Research and Training (NCERT). - 14 school guidance counsellors improved their counselling skills through workshop. - 10 university science students got practical teaching experience.

3700 Tibetan school students from grade 6-12 and 300 Tibetan college students have access to career counseling and are aware of the opportunities.

3872 (1952 girls and 1920 boys) school students and 242 college students received counselling on various educational and vocational options available and are aware of career opportunities.

Local authorities support the implementation of successful models, based on experiences from education projects.

- 13 government and private schools are ready to adopt the concept of Inclusive Education.
- District Basic Education officer and the Block Resource Centre in the Project areas is supportive of concept of Inclusive education and the replication of Inclusive education in government schools. A big support is also coming from private schools.
- 2 groups of 50 trainee teachers and 74 teachers of Govt. school teachers were networked for sensitization of their schools on Inclusive education.

HEALTH

Objective: Improved health and knowledge on preventive health measures among individuals from marginalized groups through awareness raising and service delivery.

Indicators

Increased awareness on how to prevent tuberculosis, sexually transmitted diseases and water borne diseases in three Tibetan settlements with a target population of 11 000 through campaigns and workshops.

Reduced number (70% of target population) of new cases of tuberculosis (TB), sexually transmitted diseases and water-borne diseases through improved access to clean water and awareness-raising.

Results or progress towards results

- 9696 people participated in workshops and awareness campaign on Tuberculosis, sexually transmitted diseases, cervical cancer, sanitation, hygiene and general health issues.
- Improved access to clean water through installation of water treatment plant, renovation of one water tank and pipeline. 30% reduction in water borne diseases.

ECONOMIC EMPOWERMENT

Objective: Improved socio-economic status of marginalized individuals and communities through waste management, income generating activities and self help groups.

Indicators	Results or progress towards results
Enhanced socio-economic status and self-confidence among 450 self-help groups with 7000 marginalized women in rural communities.	<ul style="list-style-type: none"> - Approximately 241 self help groups functioning with 3900 members. - Self help group women actively participate in village level meetings (Grama Sabah) to discuss their grievances and demanded street lights, adequate and regular supply of drinking water, maintenance of the public toilets for women from the village governing body(gram panchayat). - Self help group members are confident to invite government officials for an interaction meeting to get information on government schemes on livelihood. - Self help group members have raised voice against exploitation for example against fake job cards created by middlemen under the government schemes of guarantee 100 days of wage employment.
Improved environment and public awareness amongst three Tibetan settlements in Central India with a population of 4 800 through Solid Waste Management.	<ul style="list-style-type: none"> - Three field staff gained knowledge on Solid Waste Management through exposure visit training. - Public awareness raised through talks on waste management system and environment protection, 1036 persons participated.
10-15 job opportunities in the three settlements through this intervention.	<ul style="list-style-type: none"> - 12 job opportunities created in three settlements.
Improved forest cover and income generated from the produce from the tree plantation program.	<p>One project was supported during 2014:</p> <ul style="list-style-type: none"> - Tea plantations that is projected to result in sales of 200 ton tea leaves per year after five years.

CIVIL SOCIETY STRENGTHENING

Objective: SOIR-IM has contributed with technical and management capacities to the partner organizations, in order for them to be articulated, constructive organizations open to dialogue in society. The partner organizations in their turn have strengthened the target groups they work with.

Indicators	Results or progress towards results
19 partner organizations have improved their knowledge and capacities in the coordination of projects and management.	- Seven partners have increased their understanding and thereby improved their work with developing objectives and indicators and conducting baseline studies.
Dissemination of information and knowledge-sharing among SOIR-IM's 19 partners through Development Network Magazine and the Annual Network Meeting for partner organizations.	- Once development magazine issues have been published and distributed. One annual network meeting was conducted.

SPONSORSHIP

Below is a summary of the sponsorship support during 2014.

Types of receivers	Target groups	Types of support	Individuals reached
8 schools and children groups under NGOs and foundations, and 15 Tibetan schools run by NGOs, foundations and under the management of CTA Tibetan Children's Educational and Welfare Fund	Orphans, abandoned, HIV/AIDS affected, tribal children, children with leprosy parentage, refugee children.	Hostel maintenance, midday meal/extra diet, teachers' salary, general running costs, school fees, and books.	3086
7 school clinics, 2 Individual TB cases	Newly arrived refugee children, 2nd and 3rd generation refugee children, TB patients	School clinic running costs, TB eradication work and treatments	3564
7 Tibetan Old People's Homes, 3 NGO's leprosy colonies and elderly support	Refugee elders, elders with leprosy and impoverished elders	Old People's Homes' running costs, medical care, nutrition, individual weekly financial stipends	303

ANNUAL NETWORK MEETING AND WORKSHOP WITH PARTNERS

The partner Network Meeting was conducted as planned during four days in August 2014. The main topics were developing objectives and indicators for their 2015-2017 SOIR-IM-funded interventions as well as making plans for their baseline studies for the same interventions.

In the plan it was mentioned that two issues of SOIR-IM's own Development Magazine would be distributed, but only one was completed, partly due to a heavy work pressure for the office.



PARTICIPATION AND COOPERATION

The SOIR-IM office places very much emphasis on the participatory approach in the dialogue with the partners. Along with the concept of strengthening civil society, it is a constant issue on the agenda for the discussions. We can definitely see results from these efforts, from for example Bethany Sisters and Tibetan Voluntary Health Association who both have improved tremendously in their perspectives for giving space for participation in the PME from the target groups.

2014 marked the first year when all partners did proper baseline studies for the SOIR-IM funded interventions. Besides the obvious important data collection and analysis, it led to an increased understanding among many of the partners in terms of the actual situation for the target group and the benefits of their involvement in the design of the interventions.

INTERVENTION WORK

THE IGA DIMENSION TO SELF HELP GROUP

Partner: Bethany Sisters

Intervention: Children's Education and Prevention of HIV/AIDS

The Self Help Groups (SHGs) have been a vital aspect of the Bethany Promotional schools which are fostered by the SOIR-IM intervention at Guwahati. The Bethany Social Service society working in the northeastern States does have a history of producing large impact among the rural poor and the tribal through the SHGs. But when it comes to forming groups among the migrants in the urban slums of Assam, the process does have its own pace and more often unpredicted effects. The groups formed here constantly face the challenge of stability as the members are from those families which keep moving back and forth to their homeland within the state of Assam and outside in rare cases.



Considering the scenario, the 30 plus groups formed and are active in the slums of Guwahati is indeed a sufficient result for the intervention 2012-14. These are formed with membership of the mothers of the Bethany Promotional School children. The groups are in the process of bank linkage, and later Registration. They have a strong learning reference in the few older groups which are now about 10 years old and have just prospered over the years keeping to the aims of a SHG.

The SHGs of the present intervention are presented monthly animation, with a special focus on orienting to IGA. In the 1st quarter of this year all the 30 SHGs were introduced to the idea of IGA as their future course at different meetings. One day orientation for 20 members on Manufacturing and packaging of pickles and sauce making at the Indian Institution of Crop processing Technology (IICPT), Guwahati was organized.

Out of total 336 members, 90 have initiated IGAs (as individuals or group). During the quarter there was an added result to this SHG initiative, and that was- 2 more outsider groups having formed and one of it getting registered.

In a relative manner, regular trainings to the SHGs and capacity building for the Staff are planned to keep the growth of SHGs going. During the quarter 2 staff attended 4-day training on 'Sustainable Group Mode of Financing' at RRTC, Meghalaya. The 2 staff have gained knowledge on: a) Assessment, grading and credit linkage of SHGs, b) Role of NGOs in promotion and hand holding of SHGs, and, c) Income enhancement planning process.



In addition to the SHG activities of Savings, loaning, income generation, an important aspect of community living too is getting evolved among the migrant families of the SHGs. The members who are often unknown to each other before they have come to these slums, have now introduced to a state of mutual trust and a fellow feeling among the families.

MOBILE HEALTH EDUCATION PROGRAM

Partner: Tibetan Voluntary Health Association

Intervention: Water & Sanitation and Health Awareness Program

Tibetan Voluntary Health Association organized SOIR IM funded program "Mobile Health Education Awareness Program" in Tibetan settlements, schools and monasteries located in the North East States of Sikkim and West Bengal from 2nd to 9th December, 2013. Ngawang Tenzin, Mother and Child Health Coordinator and Trinley Palmo, Public Health Program Officer of Tibetan Voluntary Health Association, CTA, visited five Tibetan settlements respectively at Ravangla, Gangtok, Kalimpong, Darjeeling and Sonada to create awareness about health problems like hypertension, tuberculosis, hepatitis B, HIV AIDS, cancer, hygiene and nutrition using PowerPoint presentations, pictorial visuals and brochures. Additionally, health talks were also provided to three major Tibetan schools namely CST Kalimpong, CST Darjeeling and CST Sonada and 4 major monasteries in this region which include Ralang, Rumtek, Mirik and Drug Sangag Choeling Monasteries.

The health talks in schools and monasteries specifically focused on personal hygiene particularly techniques and benefits of proper hand washing and oral health as most of the participants were between the age group of 6-25 years old. Different informative and educational materials were distributed to the students, monks and the general public who attended the health talks. PowerPoint presentations in both English and Tibetan along with pictorial illustrations were used to make the health talks more interactive and lively.

This mobile health education tour, funded by SOIR IM, aim to generate greater consciousness and outreach regarding preventive health among the Tibetan populations based in North East India. On site facilitation was done by the Settlement Officers and staffs of the Tibetan settlement offices of Ravangla, Kalimpong, Gangtok, Darjeeling and Sonada. A total of about 1684 people benefitted from this mobile health education talk series in North East region of India. Earlier, the first completed series of this mobile health education program in Shillong, Miao and Tezu Tibetan settlements, on the same themes of personal hygiene and disease prevention, covered about 1000 people. Generally, the talks stressed on:

- Symptoms, risk factors, prevention and treatment of hypertension
- Stressed on the importance of maintaining a healthy life style like regular exercise and avoiding unhealthy food to prevent hypertension
- Created awareness about Hepatitis B
- Importance of vaccination and testing to prevent life threatening complications like liver cancer and liver cirrhosis due to chronic Hepatitis B.
- Clarified the confusions regarding the diagnosis and treatment options available for Hepatitis B.
- The health educators also explained about the incentives provided by the Tibetan Voluntary Health Association - under initiatives in regard to TB, Mother & Child Care, disability support, substance abuse prevention and rehabilitation, mental health program and HIV AIDS program.
- Conducted sessions of role play explaining the process by which the HIV virus attacks the immune system of the infected person

Participant's feedback:

- Many of the participants expressed their satisfaction and mentioned to the health educators personally that the health talks were very helpful. It was also encouraging to observe that both young and old came forward to ask questions during the health talks. The local women also took great interest in attending the health talks and in asking questions. According to one of the participant at Gangtok, "DOH has given such a comprehensive health talk which we really appreciate. It was very helpful and would like to request similar health talks in the near future".
- They suggested need for more frequent health talks and for longer durations in their region in the near future.

Challenges faced:

- Since the Tibetan communities in the North East are self sustaining and are not clustered as organized settlements except in Ravangla and Sonada, it was particularly difficult to gather people together. However, due to impressive efforts of the Settlement Offices, we had an average to good turnout of participants. One of the participants at Kalimpong mentioned that he had travelled for about 2 hours to attend the health talk.

Lesson learned:

- There is a general confusion among the people regarding the diagnosis made by the modern medicine doctors versus Tibetan medicine doctors and we clarified that they are not exactly the same. So, a basic knowledge and understanding of Tibetan medicine would prove beneficial while planning similar health talks in the future in the Tibetan settlements.

Final thoughts:

Last but not the least, both the health educators were deeply touched by the warm response and cooperation they received from the local Tibetan population in North East India particularly the women who came forward to ask questions to clarify their doubts. These women, both young and old, expressed that since they are responsible for the wellbeing of their children and family, they must have right information and awareness and also the need for them to voice their concerns about their health and wellbeing. The sheer commitment, passion and dedication of these women to have a healthy family and community was evident during this mobile health education program which eventually became a memorable and significant highlight of this program.

The local community leaders and Settlement officers played an important role in making this program a great success. And, most importantly, all thanks goes to SOIR IM for facilitating such a wonderful platform for the local people, particularly, the women who have grass root empowerment and participation through this program with the larger goal of improved health awareness at the community level. This mobile health education tour was instrumental in achieving its basic objective of encouraging people to have greater community mobilization and culturally relevant dialogue regarding health issues, thus promoting grass-root public health outreach initiatives in the Tibetan community.



BOMBAY MITHAYI CHANGED THE FATE OF POOR WOMEN

Partner: TEED Trust

Intervention: Sustainable Tribal Empowerment Program in North Kanara District

Korava and Kunchgar community of Valmiki Samudaya at Salgav, (Mundgod Block) leading a pathetic life. Selling 'Bombay Mithayi' (Sweet) and stationeries (hairpin, bangles, ribbons, toys, cosmetics) wandering by bicycle was a source for living. Daily, they had to cycle 25-30 Kms covering remote 4-5 villages. Hardly, earning was 50-60 rupees. In the evening, they had to purchase kerosene, sugar and color from local market for preparing 'Bombay Mithayi' from those who have 'Mithayi Making' machine. These families don't know any other work than selling, were not getting any loan as they don't have any asset or land. Sometime, it was very hard to arrange money for the purchase of stationeries, sugar, color and kerosene which needs to be bought in bulk. They also had to carry their kids and siblings while selling Mithayi, as there were no care takers at home.



One day, Nagavva with her husband came to Nandikatta for selling 'Mithayi' and stationeries as usual. They saw a group of woman talking, discussing something very seriously. Nagavva with curiosity went to nearby the group and observed. Few relatives were also present in the group. Later, Nagavva heard that the discussion was about formation of a SHG and TEED would help women in organizing SHGs. Nagavva shared what she heard at Nandikatta with her friends – Laxmi, Marakka, Huligevva and Shantavva. All together they approached TEED and formed Durgadevi SHG with 13 members, who were all like her. Group started regular monthly saving of Rs. 50 and participated in training and other SHG meetings. After one year, Shantavva member of Durgadevi SHG, purchased 'Mithayi Making machine' from Harihar town through loan from Sangha (SHG) and a loan from another member, as she could get only 4,000 from Sangah. SHG members came to Shantavva to prepare their 'Mithayi'. Shantavva also started charging a nominal rent for using the machine. Meanwhile, Durgadevi SHG under NRLM got support of Rs. 10,000 through Taluka Panchayat. As a result, Laxmi, another member purchased a new machine. Now the members have access to two machines. Gradually the members started increasing the number of 'Mithayi Packets' from 100 to 200, improved the quality and started to produce bigger size packets while increasing the coverage area to 6-8 villages. SHG members experienced an increased sale of 'Mithayi' as well as stationeries. Net earnings also enhanced to Rs. 400-450 per day. Later one more member, Marakka also purchased a new 'Mithayi making Machine'.

Now, Hanumantappa, husband of Laxmi purchased a two wheeler and both are selling Mithayi and stationeries on two wheeler. Shantavva repaired her house and is helping her two children to continue education. Marakka developed her land, using bore well and is now getting higher yield through multiple crops. Members have their own house and leading a happy life. SHG members are now procuring the raw materials like sugar, colors and stationeries from Hubli in much bigger quantity on credit over mobile. Laxmi, Shanattvva and Marakka are planning to expand their 'Mithayi Market' to big cities like -Hubli and Sirsi. Shantavva is sharing their experience with other new SHGs and motivating them to take up new income generating activities.

'Bombay Mithayi' changed the fate of poor SHG members of Durgadevi.

HAPPY FAMILY

Partner: Reaching The Unreached

Intervention: A Proposal for Women Empowerment

Mrs. Muthumani (27) is one of the SHG member, living in Plalapatti village. Her husband Mr. Paurraj (31) was a tailor. They have two children, a daughter name Dharshini (8 years old), studying in 3rd standard and a son name Lokesh (6 years old) studying in 1st standard. He was an alcoholic. His liver and body were affected and had also nervous problems. His wife raised this issue in her SHG meeting and sought the advice of the other members frequently. Other members discussed the issue with her husband Mr. Paurraj and counseled him to change for the better. Later he was diagnosed of having swelling in his liver and was admitted to alcoholic rehabilitation hospital. He recovered after 18 days. After this dreadful experience, there was a sudden change in his attitude and he quit his drinking habit. Now, he bears testimony to his changed life before others and becomes a model for other drunkards. Following him, his two intimate drinking partners also came out of this drinking habit. The credit goes to the SHG members who took-up this cause and dealt with it.



Now a day, he and his family members are happier and both children are going to the metric schools. He and his wife are good tailors earning monthly income around Rs 8000 – 9000 per month.

Mrs. Muthumani (his wife), is grateful to her SHG members and RTU in helping her during the crisis.

CASE STUDY OF AKLIMA BEGUM

Partner: Bethany Sisters

Intervention: Children's Education and Prevention of HIV/AIDS

Aklima Begum is from Dhirenpara, she is 22 years old. She is a SHG member at Pragati SHG that started in 2013. Her husband is Mrs. Fajal Ali and is a rickshaw puller. She has only 1 daughter; her name is Aktara Ahmed who is a BPS present student and is 6 years old. When she joined the SHG she had a plan that one day she will open shop. Aklima began her small vegetable shop on the footpath. She started this IGA in February 2014. She has taken a loan from the group of Rs. 2000 for a business purpose. Every day she sells vegetables and she earns more or less 3,000/- per month. She is looking after her family and husband too supports her. Her parents are originally from Barpeta district. Since 10 years they are living in Guwahati.]



Every month she saves Rs. 100 rupees in a SHG and she is saving an additional monthly Rs. 500 also. Her desire is to give her daughter better education like in English medium school. She is living in rented house and per month they are paying rupees 1,700. She is happy with the group and is regular in saving. She is now planning to take loan Rs. 10,000 from the SHG in order to put up a bigger and permanent shop.

Case study: by Linda Teron, Staff, Bethany Social Service center, Guwahati

FAIR TRADE CELEBRATIONS

PHOTOS OF THE 10 MAY WORLD FAIR TRADE DAY CELEBRATIONS:



Staff and artisans of Dekyiling Handicraft Centre, Dehradun.



Spreading awareness on Fair Trade, Dharamsala, Himachal Pradesh (artisans of Lungta Handicrafts Centre)



Staff and artisans of Himalayan Fair Trade Handicraft Pvt. Ltd., Rajpur, Dehradun

STAFF TRAINING

Staff Training and Capacity Building activities implemented during the year.

The planned training on indicators and objectives was conducted in the form of a Network Meeting together with partners during four days in August of 2014. An external resource person, Mrs. Aasha Ramesh, facilitated the training.

The planned training on monitoring and internal control was conducted by the auditor Mr. Agarwal from the firm Sanjay Agarwal & Associate (SAA), who conducted two financial evaluations of SOIR-IM's partners Kiran and TEED during 2014. The training was done as a follow-up on those reports. The objectives in the Annual Operational Plan (AOP) have been fulfilled, but the training was not based on the donor's monitoring guidelines and guidelines for internal control as described in the AOP.

The planned training on income tax laws was also conducted by Mr. Agarwal as one day training in December of 2014. The objectives in the AOP have been fulfilled. The only deviation in relation to the AOP was that the Program Officers also attended the training, in addition to the Finance Officer and Accountant.

The planned training on Foreign Currency Regulatory Act (FCRA) was conducted by the auditor Mr. Shivakumar during two days in July 2014. The objectives in the AOP have been fulfilled. The only deviation in relation to the AOP was that the Program Officers also attended the training, in addition to the Finance Officer and Accountant.

The planned training on sustainability and phase-out was conducted in the form of a half-day session in November 2014. The objectives in the AOP have been fulfilled.

COMMUNICATION

Two issues of SOIR-IM's Development Magazine have been published and distributed to approximately 175 recipients within our network. A survey was also sent out to recipients in order for the Office to learn how the magazine should develop. The survey showed that most readers appreciate it but would like more issues about SOIR-IM's strategies and policies to be included, which is something that was taken into consideration when the 2nd issue of the year was published. These recommendations will also continue to be taken into consideration in the future.

The Office during the autumn of 2014 conducted a mapping and analysis of networks that could be relevant for SOIR-IM to join. This product will be used as a basis for decisions during 2014 on how SOIR-IM should improve its work with networks and alliances.

The characteristics of SOIR-IM

SOIR-IM has three characteristics that shall guide our work and pervade the organisation:

Compassion – We show interest, knowledge, respect and openness when meeting people. All human beings should be treated equally, regardless of gender, ethnicity, sexual orientation, age and disability. We give marginalized and discriminated groups priority in our work. Our work is made possible thanks to the compassion and commitment of people around the world to uphold human rights.

Empowerment – Our aim is to support women, men, girls and boys so that they can empower themselves. We strive to support sustainable solutions and it is our ambition that our partner organizations become independent.

Presence – Good results are dependent on proximity to partners and participants in our programmes and a good knowledge about the local context. SOIR-IM interacts closely with our partner organisation.

