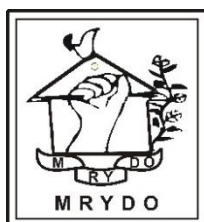


Model Rural Youth Development Organization

Annual Report 2019-20



From the Desk of Chief



The journey of Model Rural Youth Development Organization (MRYDO) entered its 33rd year and has covered a long way in its endeavour to serve the most marginalized communities of the Society. From the beginning MRYDO has tried to follow the path shown by its founder members and has tried to leave its footprint to ensure integrated urban and rural development.

In its journey to serve the marginalized section, MRYDO takes pride for its commitment to achieve the goals set during the inception of the organization. But at the same time, we are also fully aware of the fact that what we have achieved is just a drop in the ocean. Due to its uncompromised ideology and commitment MRYDO has taken objectives step by step and has grown from its infant stage and its youth. We at MRYDO feel that we have played our part in a very small way to change and catalyse the society and bring a sustainable change for its betterment. And we are also aware of the fact that there are many more miles still to go. Throughout our journey we have faced many challenges but all the challenges were dealt with smiling face with the thinking that these are the opportunities.

MRYDO believes in working with and for the most marginalized rural and urban poor sections of the society in their ongoing struggle for livelihood security, social justice, Health, Water & Sanitation, Child Rights and protection, live a life with dignity. To reach out the vision, the organization i.e. MRYDO has consciously moved from a sustainable development approach and Right based approach. MRYDO is working closely with duty bearers (State and District authorities, local administration), right holders (targeted communities), stake holders, media and the larger civil society organizations to protect and promote the human rights of especially the most marginalized communities. On the further networking and co-operation with State Government, various ministries, donors and civil society organizations is an ongoing process and has improved significantly during the year in a different mindset to move further and bring development within the community. MRYDO implemented 25 social development projects supported by Nation and international donors both from Govt. and Non-Govt. sector like Ministry of Women and Child Development, India; GNCT of Delhi; Delhi and Punjab State AIDS control society; Mission Convergence, NABARD, Save the Children; Water Aid, SESSAME etc. These projects have had many successes in improving the socio-economic, cultural and political status of the most marginalized communities in the target operational areas.

In the year 2019-20 MRYDO is successfully implementing 12 projects partnering TI-FSW, TI-Migrant Delhi State AIDS control Society, GNCT of Delhi, TI-FSW PCAS Chandigarh, Surviving Street Children-The Invisible Save the children, Promoting Safe Water, Sanitation and Hygiene at Urban Slums of Delhi, Mahila Panchayat Delhi Commission for Women, TB Dots Centre and Child Line in Haryana.

I sincerely hope that this Annual Report of MRYDO will give all the stakeholders and interested persons an overview of our collective work for the period of 2019-20, and I look forward to critical and constructive comments and discussions for further improvement in all aspects MRYDO as an Organization.

SHRI OM
Chief Functionary, MRYDO
Prem Nagar, New Delhi-43

Acknowledgements

We express our heartfelt appreciation and gratitude to all our partners and associations who stood by us over the year.

We would especially like to thank all our field staffs for their untiring hard work, the contribution is invaluable, always meeting up with new challenges and for believing us and continue our work on the ground.

We would like to thank all the government Departments:

- Department of women and child development
- Delhi Commission for Protection of Child Rights
- Department of Health and Family Welfare
- Child Line Govt Of India
- Delhi State Aids Control Society
- Punjab State Aids Control Society
- Delhi Commission for Women
- NABARD

We would extend special thanks to:

- Save the children
- UNICEF

Besides this we would like to all our friends and well-wishers and-

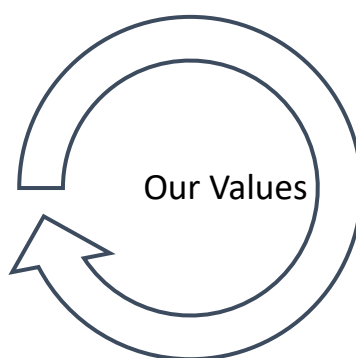
- Asha workers
- Community inducers/ Community leaders
- All volunteers
- Self Help Groups
- Health units
- Teachers and School heads.

*Most importantly, we thank all the **Children** for motivating us and for keeping our expectations high.*

Executive Summary

Model Rural Youth Development Organization (MRYDO) - The Organization

Model Rural Youth Development Organization (MRYDO) is a registered non-profit, philanthropic organization working in Najafgarh, Delhi, Haryana and Punjab. MYRDO was established in 1986 by a group of like-minded social development professionals to work on social issues affecting the most marginalized sections of the society. MYRDO has been working on social development issues including socio-economic research, training and capacity building, economic development and political empowerment of urban poor, youth, women and children and other marginalized communities. Over the last 33 years, the Organization has developed a good rapport with targeted communities and the Government in the field of youth, women and child development. The Chief functionary of the Organization is Mr. Shri Om supported by dedicated and qualified project staff from various socio-economic strata of the society including women and men.



- Integrity
- Mutual Respect
- Courage of Conviction
- Fairness, Equity and Justice
- Respect for the rights of women and children
- Independence
- Solidarity, Humility

| | |
|---------------|--|
| Vision | A society based on social justice, equality, non-discrimination and self-reliance where all people live a life with dignity. |
|---------------|--|

| | |
|----------------|---|
| Mission | To channelize the potentialities of youth, women, children and other marginalized communities for their own development and work towards a healthy society free from hunger, disease, discrimination and injustice. |
|----------------|---|

| | |
|-------------------|--|
| Philosophy | MRYDO's philosophy is to work with the most marginalized communities through a people-centered approach to bring about a positive change in the lives of targeted communities. |
|-------------------|--|

Objectives of Organization:

Work with most marginalized urban and rural communities for their socio-economic, cultural, economic development and political empowerment.

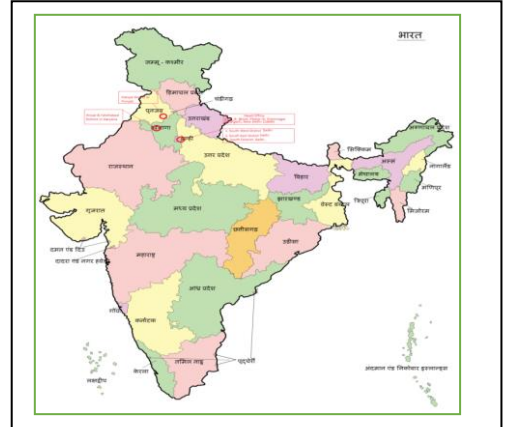
Secure, protect and promote the constitutional and citizenship rights of most marginalized communities including Right to Water and Sanitation, Right to Food and Work, Right to Life and Right to Education

Work with the State, like-minded development support organizations and civil society organizations to implement various socio-economic development programs, undertake research and influence policy in favor of the poor and most marginalized.

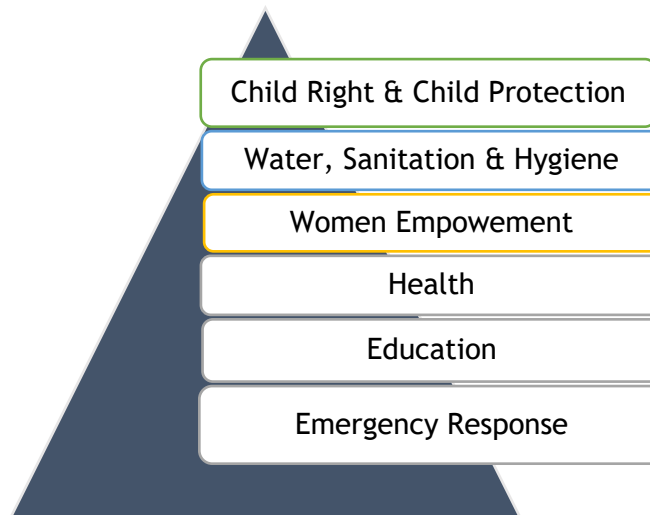
Operational Area at National Level-MRYDO Reach

Our various programmes and activities are executed in rural, semi urban and slum areas of **Delhi, Haryana, Punjab** states.

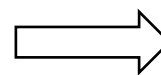
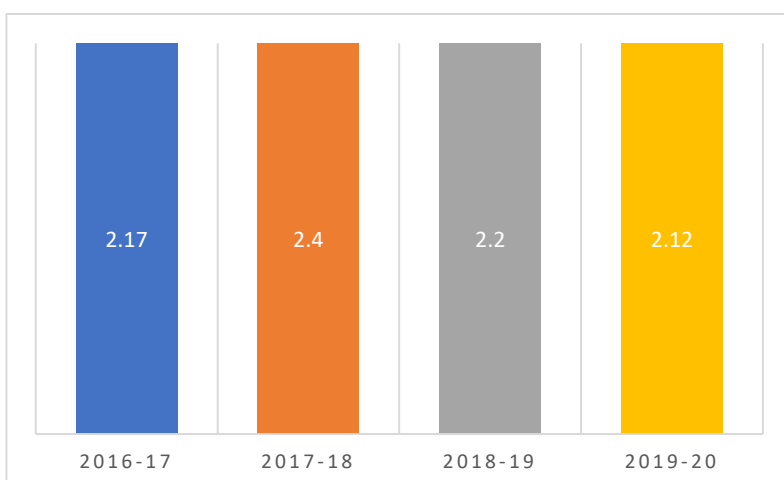
1. While in Delhi, our programmes are being executed in **South, South East, South West, North East, North, North West**, located Delhi.
2. In Haryana, we are covering two districts namely **Hisar** and **Fatehabad**.
3. In Punjab, we are covering one districts namely **Patiala** District.



Thematic Areas

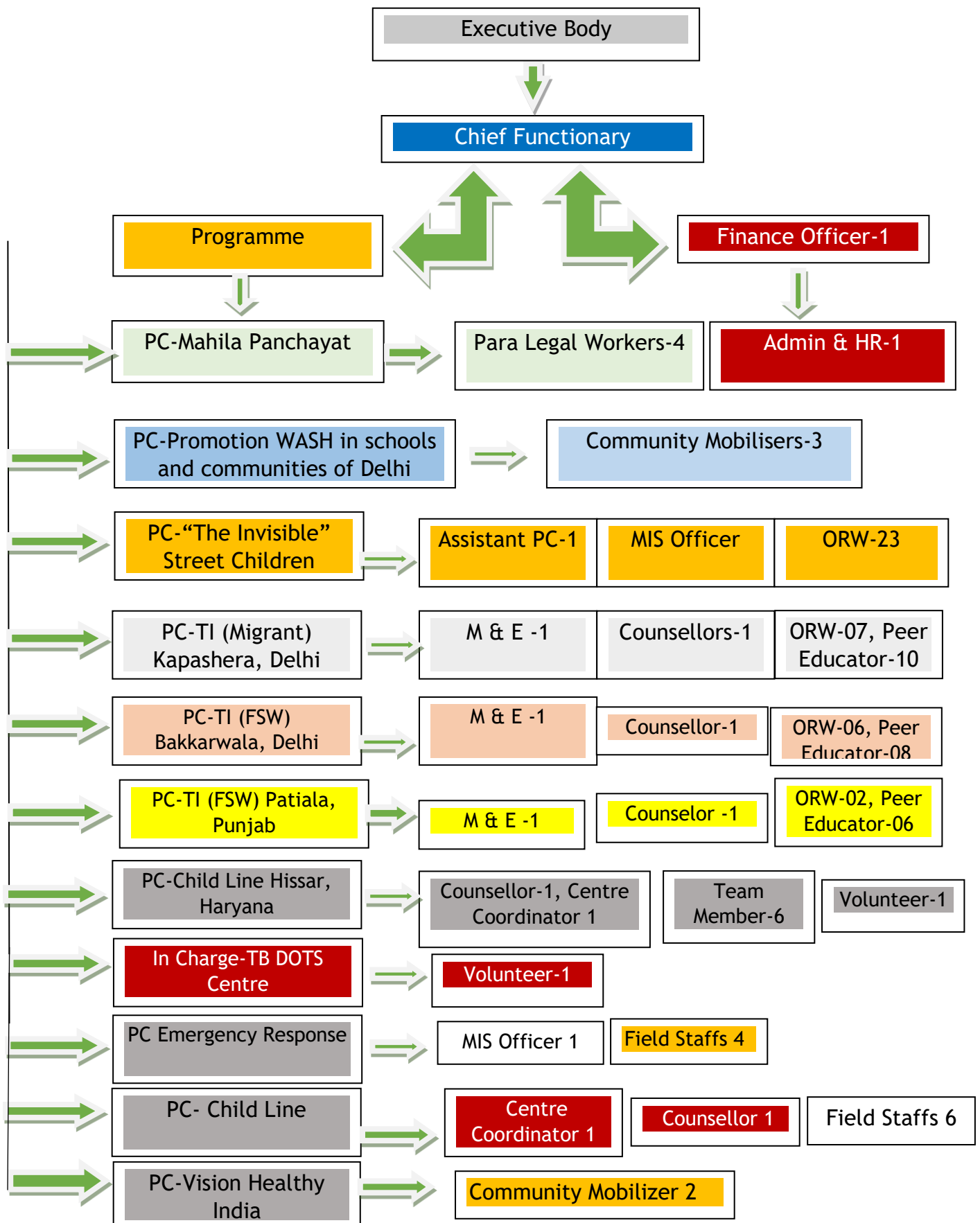


Financial Turnover in last 3 years



The Graph Shows Turn Over in crores.
In the Financial Year 19-20 we have 1.83 crores turnover.

Organizational Structure and Existing Manpower



Legal Status

- ❖ Registered under the **Society Registration Act, of 1860** vide Registration No. 17076 Dated on 12th September 1986, as name **Model Rural Youth Development Organization**.
- ❖ Registered under the **Foreign Contribution Regulation Act, 1976** vide Registration No. 231650743 Dated on 11th August 1995 and **Renewal due** on 1st November 2021.
- ❖ Registered under the **Income-Tax Act, 1961** PAN No. AABTM0666K.
- ❖ Registered under **Section 12A** of the Income-Tax Act, 1961 vide Registration No. DIT (E)/2003-04/M-1115/587 Dated on 31st July 2007.
- ❖ Registered under **Section 80G (5) (VI)** of the Income-Tax Act, 1961 vide Registration No. DEL-ME 27882-12072017/8727 Dated on 12th July 2017.
- ❖ Registered on **NGO Portal (NGO Partnership System)** of **Niti Aayog, Govt. of India** on Delhi State DL/2012/0053758/NGO list Darpan

Projects at a Glance

| Sl. No. | Name of project | Funding Agency | Thematic Area | Area |
|---------|-----------------------------------|-------------------|-----------------------|---------|
| 1. | Delhi Riots Humanitarian Response | Save The Children | Emergency Need | Delhi |
| 2. | Vision Healthy India | Save the Children | Malnutrition | Delhi |
| 3. | Adhikar | Save The Children | Education | Delhi |
| 4. | Child Line-1098 | Child line India | Child Protection | Haryana |
| 5. | Targeted Intervention (FSW) | DSACS Delhi | Health & HIV Aids | Delhi |
| 6. | T.I (Migrant) | DSACS Delhi | Health & HIV Aids | Delhi |
| 7. | Targeted Intervention (FSW) | PSACS Chandigarh | Health & HIV Aids | Punjab |
| 8. | Mahila Panchayat | Delhi Government | Women Rights & Issues | Delhi |
| 9. | TB-DOTS Center | Delhi Government | Health | Delhi |

Our Funding Agencies: Our Partner



DELHI COMMISSION FOR WOMEN
दिल्ली महिला आयोग

Project Progress

Promotion of Safe Water, Sanitation, Hygiene in schools and communities in Delhi

| | |
|--|-------|
| Total Institutional Reach outs (AWCs, Schools, Community Managed Toilets) | 18 |
| Total Community Groups Reach outs (Community Groups, Toilet User Groups, Community Inducers/Volunteers) | 70 |
| Total Direct Reach of Beneficiaries | 16455 |

Vision Healthy India- Fight Against Silent Emergency

| | |
|--|------|
| Total Reach outs of Beneficiaries till now | 1715 |
| Total Community Groups Reach out till now | 6 |

Surviving Streets in India # The Invisibles

| | |
|--|-------|
| Total Reach (Children) | 56678 |
| Total Children received identification Documents | 33221 |

Delhi Riots Emergency Response

| | |
|---|------|
| Total Reach of Vulnerable families till now | 3655 |
|---|------|

ChildLine

| | |
|------------------------------|-------|
| Total Reach (Children) | 28017 |
| Total Calls received on 1098 | 623 |

TI Female Sex Workers(DSACS)

| | |
|---|------|
| Total Reach of High Risk Female Sex Workers | 3343 |
| Total Clinal Attendance | 5173 |
| Total STI Treated | 66 |

TI Female Sex Workers (PSACS)

| | |
|---|------|
| Total Reach of High Risk Female Sex Workers | 1085 |
| Total Clinal Attendance | 2000 |
| Total STI Treated | 44 |

TI Female Sex Workers (DSACS)

| | |
|---|------|
| Total Reach of High Risk Female Sex Workers | 3343 |
| Total Clinal Attendance | 5173 |
| Total STI Treated | 66 |

| | |
|------------------------------|------|
| Mahila Panchayat | |
| Total Cases Solved | 1204 |
| Total Cases Solved | 1091 |
| Total cases referred to DSLA | 20 |

Brief Description of the Projects

Promotion of Safe Water and Sanitation, Hygiene in schools and communities of Delhi

Being the national capital, Delhi has been witnessing rapid urbanization in recent decades. As per census of 2011, Delhi is home to around 16.7 million people, 97% of whom live in urban areas with inadequate water supply and sanitation provisions and poor hygiene practices. Despite the existence of various policies and programs for slum improvement / development, the health status of people (especially women and children) living in slums of Delhi is significantly worse than the rest of the urban population.

The population living in slums is a heterogeneous group from different socio-economic backgrounds, with varying access to urban basic services, and is governed by both national and state level policies. They are primarily dependent on community toilet complexes for their everyday use. The government has made large and sizable investments and constructed more than 1,500 toilets all over Delhi. However, most of the toilet complexes are not fully functional and are in a dreadful condition. This is primarily due to a lack of proper operation and maintenance (both community and service provider led), caused by limited hygiene awareness and ownership. There is no strong monitoring mechanism to ensure cleanliness in the toilet complex and in absence of that the toilet complexes become the ideal places for antisocial elements. As a result, many users avoid accessing the toilet complex, especially young girls and women. Moreover, the caretaker does not take care of broken / damaged toilets. As a result, the toilets are in deplorable condition, which makes open defecation a widespread practice.

Major Outcomes

1. Two communities out three have been declared ODF by Government of Delhi.
2. 80 Seats community Managed Toilet at Bhanwar Singh is functioning successfully since last one year and running as self-sustain mode.
3. Due to awareness people are purchasing safe drinking water from the CMT's Water ATM on minimum prices.
4. 80% community members are well aware about the sanitation, water and hygiene as a result 80 to 85% children are washing their hands with soap at critical times.
5. Young children are playing a vital role to forwarding the messages on sanitation and hygiene at each HH through their club and community inducers.
6. Under the project we are covering three primary Government schools and they are provided the facility of safe drinking water and hand washing platform. Children clubs are ensuring the hand washing with soap before eating the mid-day meal.

Total Direct Beneficiaries (Year 3)

| Quarter | Girls | Boys | Women | Men | Total Direct Reach | Girls | Boys | Women | Men | Total Indirect Reach | Total reach |
|-----------|-------|------|-------|-----|--------------------|-------|------|-------|-----|----------------------|-------------|
| Quarter 1 | 331 | 320 | 148 | 50 | 849 | 2500 | 2800 | 2200 | 800 | 849 | 8300 |
| Quarter 2 | 90 | 60 | 150 | 50 | 350 | 1200 | 1150 | 1450 | 765 | 350 | 4565 |
| Quarter 3 | 95 | 115 | 50 | 20 | 280 | 850 | 650 | 750 | 680 | 280 | 2930 |
| Quarter 4 | 45 | 35 | 30 | 25 | 135 | 260 | 150 | 140 | 110 | 135 | 660 |

CMT (Community Managed Toilet)-

In order to address the challenges that had been identified during the baseline survey in Bhanwar Singh Camp, MRYDO & Save the Children, India in collaboration with Delhi Urban Shelter Improvement Board, a body of the Government of Delhi State, has built a Community Managed Toilet (CMT) Complex in the slum of Bhanwar Singh Camp, Vasant Vihar, New Delhi. On-going activities such as the formation and capacity building of CMT user groups, engaging with community groups and mother groups for use of WASH facilities, capacity building and handholding support of self-help groups for income generation, all focus on making the CMT infrastructure self-sustainable and functional with the support and contribution of the community.

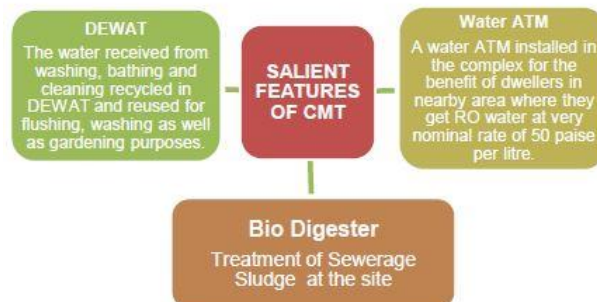
This intervention addresses three major aspects for the development of the slum population 1) improved sanitation facilities; 2) safe drinking water; and 3) solid waste management. Developing innovative hardware facilities such as the installation of bio-digester (sludge treatment to be used as manure), Decentralized Waste Water Treatment system -DEWAT (waste water treatment to have pathogen free water), Water ATMs (to provide access to clean safe drinking water), solar electricity and; inculcating behaviour change through capacity building of community based organizations (user groups, mother groups, PRIs), children health and hygiene clubs (CHHC), community based campaigns, counselling through contextualized social behaviour change tools for using the CMTs.

Photo Gallery



Vision Healthy India-Fight Against Silent Emergency

This intervention primarily focused on- Severe Acute Malnourished (SAM)/Moderate Acute Malnourished (MAM) cases identified in the screening brought under the 'normal' nutrition category. Children will access clean and comfortable WASH facilities at one school and two Anganwadi centres, leading to improved personal hygiene and sanitation practices. Improved storage and use of drinking water will be experienced amongst at least 50% of the 1500 households. Frontline health-workers will have improved skills and motivation to carry out their role better in furthering the overall wellbeing of the community.



Project Area: Bhanwar Singh Camp

Overall Objective

To decrease the burden of child under nutrition through both preventive and curative measures while improving coverage of essential nutrition and WASH interventions in the chosen slum community.

Severe Acute Malnourished (SAM)/Moderate Acute Malnourished (MAM) cases identified in the screening brought under the 'normal' nutrition category.

- Three newly-established model NCCS centres will prompt the government to replicate such centres and modify the scope of the centres as showcased by SC's NCCS centres.
- Children will access clean and comfortable WASH facilities at one school and two Anganwadi centres, leading to improved personal hygiene and sanitation practices.
- Improved storage and use of drinking water will be experienced amongst at least 50% of the 1500 households
- Frontline health-workers will have improved skills and motivation to carry out their role better in furthering the overall wellbeing of the community
- Overall, generate evidence for the efficacy in improving nutritional outcomes via an intervention that has nutrition-sensitive and WASH components

Project Achievements so far:

| | | | |
|--------|---|---|--|
| Sl No. | Screening of community children to identify SAM and MAM cases | 561 children reached | Covered Bhanwar Singh Camp and Nepali Camp |
| 1. | Regular follow up of identified SAM MAM children via house-to-house visit and counselling | 32 Home Visits | Covered Bhanwar Singh Camp and Nepali Camp |
| 2. | Screening and assessment of pregnant mothers and registration at health centers | 11 pregnant women from Bhanwar Singh Camp, 1 MOIC, 2 Gynaecologist, 1 ANM, 2 ASHA Workers | Covered Govt dispensary, Vasant Ganv |
| 3. | Screening and assessment of pregnant mothers and registration at health centers | 15 lactating women, 1 ANM, 2 ASHA Workers | Covered Bhanwar Singh Camp |
| 4. | Formation of Community Groups (women's groups, mother's groups, adolescent groups, men's groups etc.) | 6 Community Groups | Covered Bhanwar Singh Camp |
| 5. | Training and capacity building of frontline workers | Six frontline workers | Two meetings organised at DSPO and on-site Office with 10 volunteers |

TOTAL DIRECT BENEFICIARIES (October'19- March'2020)

| Year 1 | Direct Reach | | | | | Indirect Reach | | | | | Total Reach |
|-----------|--------------|------|-------|-----|--------------------|----------------|------|-------|-----|----------------------|-------------|
| | Girls | Boys | Women | Men | Total Direct Reach | Girls | Boys | Women | Men | Total Indirect Reach | |
| Quarter 1 | 15 | 10 | 49 | 10 | 84 | 30 | 25 | 150 | 130 | 335 | 419 |
| Quarter 2 | 252 | 214 | 133 | 22 | 621 | 150 | 100 | 350 | 75 | 675 | 1296 |

Photo gallery



Survey



Screening of Under 5 children



Meeting with Frontline workers



Regular Check Up

KEY NEXT STEPS Way forward for second half of 2020

- ✓ Create awareness about Covid'19
- ✓ Conduct of Nutrition Child Care Sessions
- ✓ Screening of SAM/ MAM children with collaboration with ICDS
- ✓ Screening of Pregnant Women (ANC) at Vasant Ganv Dispensary
- ✓ Orientation of teachers & Sensitisation of school children
- ✓ Demonstration of low-cost recipe at community level
- ✓ Identification and linkages of community service providers
- ✓ Improve WASH infrastructure in the targeted ICDS centres.
- ✓ Facilitate the community to raise their voice on the issues related to community sanitation before the service providers.

Mahila Panchayat

MRYDO Mahila Panchayat gives direct support to women who are experiencing abuse and injustice. The 20-member team is trained on legal issues, dispute redressed mechanism, the laws relevant to crimes against women, the existing legal position regarding property, maintenance, marriage, custody etc. They are also given training in counseling, FIR writing, pursuing with police station, how to proceed for legal recourse. The Mahila Panchayats itself acts as a "Watch Dog" and its members, after orientation, and training, can handle delicate and family disputes. They find solutions at the local level through the workers in the field itself in some cases they link up with lawyers as well. Issues which cannot be resolved at the Mahila Panchayat level are either resolved by the lawyers or alternative course of action is determined in consultation with lead NGO, Lawyer and Delhi Commission for Women. The group (MRYDO-Mahila Panchayat) has been formed in the year 2001 in collaboration with Delhi Commission for Women. This group executes the services in the 2 different locations i.e. Laxmanpuri (West District of Delhi) and Prem Nagar (South-West District of Delhi) earlier; presently MRYDO is running single Mahila Panchayat at its Head Office at Prem Nagar for South West Delhi.

Role of Mahila Panchayat

Raising the voice against Dowry Provision, and make the arrangement of refunding the same

Educate the community on various legal and the facilities available at the community level

Familiarize and educate the women of the community about the various departments and help lines which may be also used in the future by them in time of need.

Arranging legal awareness camp with the female community and do provide them the help as per their need.

Orienting the community on various provision of legal right and motivate them to make use of that in such in routine life.

Role of the Mahila Panchayat worker

The primary role of the Mahila Panchayat worker is to link community to the legal assistance required by its members. Hence, their role would be from creating awareness to continuous assistance of the members on the legal case. This would imply case registration, investigation and regular follow-up of the same. For this there must be weekly meeting with the members and sharing with them of the new legislations. The activities taken by Mahila Panchayat during the reporting period made considerable inputs on reducing the violence against women and increasing the awareness of legal literacy among the women. The project also facilitated Pre- Marital Counseling workshops with young girls and women especially from the rural areas.

Over a period of time Mahila Panchayats have been able as a strong grassroots unit which works especially for the cause of women and children. It has also emerged as a major decision making body to resolve disputes among the family members. Two Mahila Panchayats have been formed till now and they are running successfully and solving the family disputes very actively. Mahila Panchayats have been formed in Prem Nagar with women 25 members. The progress of Mahila Panchayat for 2018-19 is as under.

| Sl no. | Particulars of cases | Achievements |
|--------|---|--------------|
| 1. | No of Cases registered at initial stage | 1204 |
| 2. | Cases Solved | 1091 |
| 3. | Referred case to DLSA | 20 |
| 5. | Community meetings | 49 |
| 6. | Panchayat Meetings | 79 |
| 8. | Follow ups | 289 |

Photo Gallery



Community Meeting



Legal Assistance



Hearing

TB-DOTS Centre:

DOTS (Directly Observed Treatment) helps tuberculosis patients recover quickly and helps preventing spreading. MRYDO found that the people suffering from tuberculosis cannot get themselves treated for a simple reason that the conventional centers work in a time schedule which does not suit most of the patients who belongs to labor class. Their timings are quite typical and they cannot visit the conventional medical centers for their treatment. The situation of the patients is very poor as they cannot afford the expensive medicines as they have to earn their living on a daily basis. They cannot afford to miss work even for a single day. The women and children are the worst sufferers. The Tuberculosis patients are provided medicines directly from the MRDO Dots centre. Follow ups are also done for the Tuberculosis patients for regularly intaking of Tuberculosis medicines.



Coverage: Currently two centres of DOTS are running in Kapashera, South West Delhi.

Targeted Intervention: Migrants- Delhi

The Targeted Intervention project is sanctioned by the Delhi State AIDS Control Society (DSACS) for covering 20000 Migrants of South West district of Delhi with an objective to learn about the knowledge and Perception, identifying migration locations, providing them information about HIV/AIDS, STI, safe sex practices during migration and linking this population to the public health services to preventing Sexually Transmitted infection, Integrated Counselling & Testing Centre, Anti Retro Viral Therapy.

Objective

To promote safer sex behavior among the HRGs and their clients through regular facilitation of condoms and its education with improvement of the negotiation skill.

- To provide proper referral/counselling services and to promote healthy life style.
- To provide regular medical check-ups and STI treatment as per qualitative norms
- To ensure comprehensive Care, Support & Treatment for PLHIV
- To do efforts towards the community ownership among the HRG

Project Achievements

| High Risk Migrants | IPC Sessions | Congregation Events |
|---------------------------|-------------------|---------------------|
| 76229 | 5998 | 8 |
| DIC | Health Camp | Condom outlets |
| 4 | 291 | 60 |
| STI Diagnosed and Treated | Advocacy Meetings | Street Plays |
| 469 | 24 | 24 |

Photo gallery



Focus Group Discussion and Condom Demonstration

Health Camp

Awareness on STI, Hygiene

Targeted Intervention: FSW- Patiala Punjab

Patiala district is one of the famous princely states of erstwhile Punjab forming the south-eastern part of the state. The HIV positivity among General Population of the district for the year 2012-13 is 2.8%. Punjab, being a border and an agrarian state, which is undergoing rapid urbanization, has multi factorial vulnerability to the HIV epidemic. Large scale in migration of labor for agriculture and industrial purposes, and out migration in the form of truckers, armed force personnel and to foreign lands create a social milieu very conducive to rapid HIV transmission.



DGA Meeting

Tageted area: The Project area is located in Batta Public School, Near Rose Garden, Opp. Bus Stand, Rajpura Colony, Patiala (Punjab). The Sex Workers are located in Patiala City. At present their population is 574. Women engaged in sex work are in the age group of 18 to 45 years.

Role of the Organization: MRYDO was contracted by PSACS, for carryout Targeted Intervention programme among Sex worker project in Patiala district, the area given to the NGO was F-Block, Sanori Adda, Sanour, Ablawal, Hira Bagh and Sular. The NGO is carrying out this project for last Seven years. Initially there was no awareness about HIV/AIDS and related issues. People of these areas didn't even imagine for discussing all such topics due to disgrace. The situation has now changed since the NGO started implementing the project in said areas.

| | | |
|----|--|------|
| 1 | Total No. of Registered Active Population against 500 target on 31 st March.20. | 574 |
| 2 | Total No. of Individual contact to HRG by Field Staff | 6525 |
| 3 | Total No. of Clinical Attendance | 2000 |
| 4 | Total No. of STI treated | 44 |
| 5 | Total No. of individual new HRG given Presumptive treatment | 30 |
| 6 | Total No. of Syphilis Testing | 1015 |
| 7 | Total No. of individual HRG tested for HIV | 987 |
| 8 | Total No. of individual HRG found positive for HIV | 5 |
| 9 | Total No. of individual positive HRG linked with ART | 5 |
| 10 | Total No. of Review Meetings Conducted | 96 |
| 11 | Total No. of Demand Generation Activity conducted by TI | 72 |
| 12 | Total No. of Hotspots | 6 |
| 13 | Total No. of Active Stake Holders | 8 |

TI FSW: Delhi

As far as today concern, in India is the Third highest number of HIV positive People in the world with 2.1 million Indians accounting for about 4 out of 10 people infected with deadly virus in the Asia-Pacific region. HIV treatment coverage is only 36 per cent in India, where 51 per cent of AIDS–related deaths occur. The proportions of people who do not have access to antiretroviral therapy treatment are 64 per cent in India. It is the worst and deadliest disease that humankind has ever experienced. Having a population of around a billion, an increase in 0.1% of HIV prevalence would mean an increase by over half a million in the HIV-infected patients. HIV/AIDS in India is heterogeneous with respect to the vast geographical stretch of the country, differences in the income, gender, occupational structure, and socio-cultural variations.

Coverage: South West Delhi: Premnagar (Rewla Khan Pur) and Dharampura

| | | |
|----|---|-------|
| 1 | Total No. of Registered Active Population against 1500 target on 31 st March.20. | 1879 |
| 2 | Total No. of Individual contact to HRG by Field Staff | 13566 |
| 3 | Total No. of Clinical Attendance | 5173 |
| 4 | Total No. of STI treated | 66 |
| 5 | Total No. of individual new HRG given Presumptive treatment | 0 |
| 6 | Total No. of Syphilis Testing | 2598 |
| 7 | Total No. of individual HRG tested for HIV | 3238 |
| 8 | Total No. of individual HRG found positive for HIV | 2 |
| 9 | Total No. of individual positive HRG linked with ART | 2 |
| 10 | Total No. of Review Meetings Conducted | 58 |
| 11 | Total No. of Demand Generation Activity conducted by TI | 86 |
| 12 | Total No. of Hotspots | 19 |
| 13 | Total No. of Active Stake Holders | 12 |

Photo Gallery



Community Based HIV



Health Camp at cluster Samalka



PLHIV Follow up Counsellor

Child Line

Model Rural Youth Development Organization (MRYDO) is running successfully Child Line at Hisar with the support of Child Line India Foundation since last many Years. MRYDO is taking care and respond the District Hisar call received. We also create the awareness through IEC tools and community meeting for making calls on 1098 in situation when a child is in an emergency. CHILDLINE works for the protection of the rights of children in general. But its special focuses in on all children in need of protection, especially the more vulnerable section.



| Types of Calls | April 18-March 2019 |
|--------------------------------|---------------------|
| Medical Help | 12 |
| Shelter | 2 |
| Rescue/ Protection from Abuse | 367 |
| Sponsorship | 17 |
| Missing Children | |
| Child lost | 27 |
| Parents Asking Help | 14 |
| Emotional Support and Guidance | 9 |
| Unclassified | 48 |
| Did not Respond/Find | 127 |
| Phone Testing calls | 607 |

Major Achievements: The total number of weekly meetings with team members is 48 and the total awareness programme conducted is 248 and total open house is 11.

Grass roots level outreach with children and concerned adults

| Target Group | No. contacted | Nature of outreach | Number of programmes |
|------------------|---------------|--|----------------------|
| Railway station | 761 | Individual, Small Group, Group | 4 |
| Bus stops | 209 | Individual, Small Group, Group, Night Outreach | 3 |
| Shelter children | 39 | Individual | 1 |
| Cinema halls | 79 | Individual | 1 |
| Parks | 467 | Individual, Small Group, Group, Night Outreach | 7 |
| Tourist places | 142 | Individual, Small Group | 2 |
| Religious places | 69 | Individual, Small Group | 1 |
| Schools | 21571 | Small Group, Group, Open House | 118 |
| Slums | 1536 | Individual, Small Group, Group, Night Outreach, Open House | 23 |
| Others | 5571 | Group, Small Group, Night Outreach | 88 |

Case study: 319662

Submission date: 15/02/20

Case Category: Missing

Location: Railway Station District Hisar

Case details Date: 15/02/20, Childline receive a call that child was found at Railway Station District Hisar whose age is 4 years old.

Case registered in which section (E.g. POCSO, JJ Act etc.)NA

Response by CHILDLINE team while handling case

Childline spoke with caller and take all information about the case. After that ChildLine visited Railway Station, Hisar and counselled the child and can got the child's school address and contact number. After that ChildLine do a video conference call with principal and the matter was discussed with School's Principal and asked for child's family contact number. After that Childline called to child's maternal uncle who was called in RPF thana Railway Station Hisar. The child recognised his uncle after that child was handed over to his maternal uncle.

External stakeholders support: RPF Thana Hisar

Case status (Open / Closed): Closed

Date (case closed/follow up): 15/02/20

Other information if any:NA

Press clipping/media coverage website link or attachments if any: NA

Surviving the Street Children of India” The Invisibles (Delhi)



MRYDO is a child centric organization who believes that children are the future of Nation. MRYDO is partner of Save the Children -Bal Raksha Bharat in Delhi and implementing two projects one of them is The Invisible. Surviving streets in India Project is implemented by MRYDO with the support of Save the Children in Five districts of Delhi. The main objective of the project is to provide identity to street children and link them to social protection scheme which are implemented by Government departments. Under the project, we are identifying the children and linking them to schemes as well as providing Aadhar card through organizing Adhar camps and daily enrolment. As per the survey done by Save the Children found that still 80,000 children are living in Delhi without their identity document. So, Save the Children formulated a SOP for that and started above namely project targeted to provide identity to each child with the support of their two partners. MRYDO is implementing this project in five districts of Delhi North, North East, North West, Wes and South West since last one year.

| Major Achievements in the FY 19-20 | |
|--|-------|
| Total children reached directly: 56497 | |
| Output 1 | |
| Aadhar Card | 17115 |
| Pan Card | 16106 |
| Output 2 | |
| ECCE | 7977 |
| School Admission | 3295 |
| Health Services | 11075 |
| Bank a/c | 901 |
| Skill Building | 28 |
| Linked to Social Protection Scheme | 181 |
| Educational certificates | 2626 |
| Certificates from MLA | 294 |
| Birth Certificates | 34 |

Under the project many activities carried out at the field level to meet out the goal of project. Some major interventions are as under.

Enrolled for Aadhar card and ensure that has received to them.

- 1.PAN Card
- 2.School admissions.
- 3.Enrolled in Anganwadi Centres
- 4.Opening bank accounts and link with schemes like Sukanya Samridhi, ladli Scheme.
- 5.Immunization, Health check-ups and Health camps.

CRC Week Celebration

In the initiative of UNICEF, the period from 14th to 20th November is celebrated as the Convention on the Rights of the Child (CRC) Week. On this great occasion, as a part of the Surviving Streets of India Project supported by Save The Children India, Model Rural Youth Development Organization (MRYDO) took initiative to celebrate CRC week with the help of Outreach Workers. The activities were planned as per the suitability and the Outreach workers are oriented as per the plan. The ORWs is taking great initiative and lot of effort in making all the sessions successful. A lot of activities were planned for the children so as to make the sessions interactive and joyful.

The objective was spreading awareness among the community regarding child rights, to create awareness among stakeholders that children get their rights and respect, offer them a chance to fully develop and enjoy their security, to make sure that all the laws, regulations and aims of the child rights are being followed.



Activities like Wish Tree, Street Play, drawing competition, Rally, passing ball, movie screening, awareness on identification document, lemon race, session with ICDS took place with children. The total reach of children is 1393.

Mask Distribution

Delhi Pollution had reached its worst level, with air pollution rising to almost 40 times the amount deemed healthy and airplanes diverted away from the city. In children and adults, both short- and long-term exposure to ambient air pollution can lead to reduced lung function, respiratory infections and aggravated asthma. Maternal exposure to ambient air pollution is associated with adverse birth outcomes, such as low birth weight, pre-term birth and small gestational age births. Emerging evidence also suggests ambient air pollution may affect diabetes and neurological development in children. MRYDO with support of Save The Children took part of mask distribution and the objective was to take care of the health of the children in Delhi in a long run, to prevent children from permanent health effects such as asthma, bronchitis and to sensitize and raise awareness among the parents regarding the use of masks. Targeted children between the age group of 8 years to 15 years and are considered as priority population.



| Sl. No. | Hot spot | No. of masks distributed |
|---------|------------|--------------------------|
| 1. | North East | 84 |
| 2. | North | 133 |
| 3. | North West | 100 |
| 4. | West | 62 |
| 5. | South West | 346 |
| Total | | 725 |

Adhikar

Adhikar is a scale up Project of The Invisibles. The children in street situations are provided after school education support to bridge up the learning gaps to meet up to the competency level. Also, Children upto 6 years are linked with ICDS to improve health, nutrition and development of children. Adhikar provides:

- Three Learning Centers for children
- Three Mobile Van Library

MRYDO with the support from Save The Children have started its initial phase of implementation of Adhikar.

Emergency Response

Emergency Response MRYDO and Save the Children has been committed to reducing children's vulnerability to emergencies, ensuring their right to survival and development after an emergency providing the hel they and their families need to quickly recover and re-establish their life, dignity and livelihoods. **Delhi Riots 2020**

The Delhi Riots which took place in 23 February 2020 caught up with multiple waves of bloodshed, property destruction and rioting in North East Delhi. As an emergency response MRYDO actively surveyed people in the relief camp and distributed all the basic essential kits to all the beneficiaries.



To ensure children in fulfilling their right to development during the emergency crises and reduce the risk of mental trauma, team of MRYDO with Save the Children established and supported the Child Friendly Space (CFS) for the children. Also, the team identified all the school going children and distributed education kits to them. To analyse the livelihood situation of the families, MRYDO with Save the Children conducted livelihood survey from door to door. MRYDO has reached 300 affected families in the North East Delhi, Mustafabad.

Corona Virus Outbreak

Due to the lockdown imposed in India, lakhs of people are left with no earnings and nothing to eat. Children are highly affected as corona know no boundaries. In this time of crisis, MRYDO and Save the Children have come in front line to distribute hygiene kits and food kits to the most vulnerable people. We have reached approximately 3000 needy families in North Delhi, North East Delhi and South West Delhi.

| Location | No. of Families |
|--|-----------------|
| North | 1200 |
| South West | 300 |
| North East | 855 |
| Bhawar Singh Camp | 1000 |
| Total Reach in COVID 19 Pandemic till now | 3355 |



Social Distancing and Awareness on COVID 19



Sanitization



Distribution of Essential kits to most needy family

A story amidst the lockdown - For them Corona is just a cold, the worry is food and other basic needs..

Name of the respondent Kajal

Age 28

Present Address: Gali No. 23, Near Bus Terminal, Najafgarh

Visually impaired individuals face obstacles in their lives that make them feel more dependent and not equal to people who can see. Visually impaired people are not able to see such as earning, identification of needs and judging the facts. Research on visually impaired people shows that their dependence on family members is high and seems to be only their primary option that they have.

Now on the world level each and every person is suffering with COVID 19 virus and they are struggling to live due to no earning option, less savings, less food. People who are struggling in normal life due to permanently disability specially with eye have life under darkness. A visually impaired individual life gradually ends when he/she are unable to get his/her basic needs such as food, medicines, proper care and if those are unable to earn any kind of money for fulfil his/her these basic needs. Kajal's story is both an example and reflection of struggle and endurance of visually impaired people.

Kajal is a visually impaired mother and currently living in Gali No. 23, Near Bus Terminal, Najafgarh with her three children. She is a widow; all her three children are also visually impaired and the entire family is bond to live this hellish life. She is residing in a tent with her small family. She is the key person of family and responsible for managing her family needs. Due to this COVID lockdown her life has been shut down and the entire family is suffering out of hunger. Due to shortage of food, medicines, nutrition, they could not find any way out. The occupation of begging was only source of income that used to fulfil his family needs. Her two sons also helped her to earn money. However, due to COVID 19 lockdown, her earning is stopped. They don't have any kind of savings and now they were struggling for food and face the direst consequences of hunger.

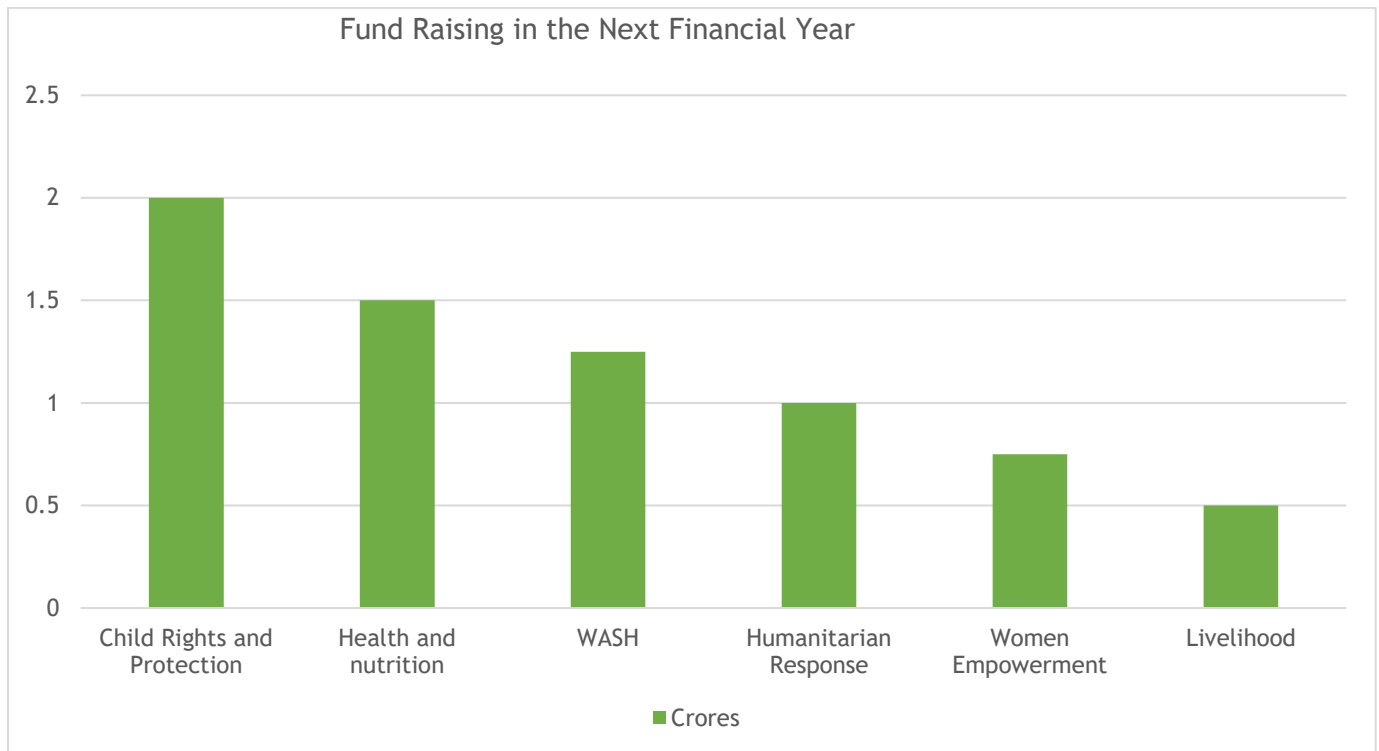
During the COVID 19 relief program supported by Save the Children, partnering with MRYDO, the team surveyed, observed this family and analysed their situation. Team felt its urgency and this family needs more immediate support of relief materials. The team took all required details of Kajal and they planned to help her straight way.

Team discussed Kajal's situation with MRYDO director Mr. Shri Om who is an honourable person and trying to give his best service to these kind of needy family during this world level crisis. After hearing about this situation of Kajal, Mr. Shri Om decided to meet with this family and give her comfort and provide her grocery kits. The MRYDO with support of Save the Children provided all the relief materials to Kajal.

Kajal was so happy and her happiness was showing in her eye by her tears. She blessed to Mr. Shri Om and said that she and her family will spend this grocery approx. one and half months. Our complete team was very happy at this moment because every person in our team felt an honour to stand by her in this crisis. But our work has not stopped, we need to search for more of this kind of vulnerable, unprivileged, neediest family like Kajal who are and helpless.

Plans for the Next year

MRYDO is a non-governmental, non-profit and philanthropic organization working for the most vulnerable over decades. The organization relying on funding from National programmes of this network. The organization has decided to adopt and develop a comprehensive plan so as to be able to step its role and bring positive changes in the life of most neglected and underprivileged.



The graph shows the fund raising in the next financial year, where -

Child Rights and Protection: 2 crores

Health and Nutrition: 1.5 crores

Wash: 1.25 Crores

Humanitarian Response: 1 crore

Women Empowerment: 0.75 crore

Livelihood: 0.5 crore



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Thanks

SHRI OM

Chief Functionary

Glimpses of our work in COVID -19 Pandemic

