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ENSURING SOCIAL JUSTICE: THE LOCAL GOVERNMENT WAY

25TH YEAR OF PEOPLE'S PLAN CAMPAIGN IN KERALA

ENSURING SOCIAL JUSTICE THE LOCAL GOVERNMENT WAY

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25th Year of People's Plan Campaign in Kerala
Ensuring Social Justice: The Local Government Way

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FOREWORD

Ensuring social justice to all is one of the core mandates of local governments with the twenty-five years of People's Plan Campaign (PPC), local governments in Kerala have learned by experiencing the management of social justice based governance at the local level. As a result, their orientation has shifted from welfare to right-based with an empowerment lens. Thanks to the People's Plan Campaign (PPC), local governments in Kerala are endowed with funds, functions, functionaries and freedom to plan and implement social justice-based programmes. How effectively the fund, functions and functionaries work for the social inclusion and empowerment of the sections like children, aged, differently-abled and those in need of palliative care is very important in social justice management. To enhance the quality, there are institutional ways like children's forums, geriatric clubs, CBO networks, volunteer groups etc for interaction and community and engagement.

The capacity development and training carried out by KILA in the area of social justice particularly in childfriendly local governance, aged friendly local governance, disabled-friendly local governance, palliative care management has helped evolve replicable models. Training, mentoring, good practice documentation, organising certificate courses for the elected, official and volunteer functionaries are some of the important activities undertaken by KILA to initiate evolve and sustain these models. This book is also an effort to disseminate the evidence and practices exhibited on the social justice front to a larger audience. The models explained in this book has been tested and proved at the local level and has a greater scope for

wider application. By effectively managing social justice-based programmes, LSGs also contribute to addressing several targets proposed by Sustainable Development Goals (SDGs).

I am grateful to Dr Peter M Raj, the editor of this book and the other team members for making sincere efforts to bring out this book. We are sure that this book titled 'Social Justice and Local Governance: Lessons from Kerala' will enable the local governments and other actors to accelerate their efforts to further empower the living conditions of the neediest ones.

Dr. Joy Elamon
Director General, KILA

ACKNOWLEDGEMENTS

There has been a definite need to build the capacity of local governments to mainstream the social security concerns in local planning. Although several Local Self Governments (LSGs) have made tremendous interventions to address the priorities of sections in need of social protection, experience has shown that LSGs must gain capacity to better manage and implement social sector programmes for the development of children, senior citizens, the differently abled and those in need of palliative care. The present book is an effort towards this objective. The case studies and experiences presented here are an educative tool to aid LSGs and civil society groups to initiate programmes to ensure good governance for weaker sections. As Kerala Institute of Local Administration (KILA) is a reputed nodal agency for training local government functionaries which is often visited by representatives of other states and countries to learn from its success in the field of capacity building for democratic decentralisation processes, the scope of this book is much higher.

We sincerely value the constructive support extended by Dr Joy Elamon, Director General, KILA, for publishingthis book. Sri.M G Kalidasan, Sri. Bhaskaran Pallikkara, Smt.Vineetha Mand Sri.Sajeevu KG have co-auothored this work. It is their continuous and tireless efforts that have helped add a great deal of value to this. We are also grateful to all the resource persons for collating necessary information from the field for these case studies. The document is enriched by the real time governancepractices championed by the seventeen LSGs featured here. KILA partnered with these local governments in evolving these models. We gratefully

acknowledge the contribution of elected representatives; officials; experts; volunteers and children of these local governments who made this possible.

Dr. Peter M Raj

Editor

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ABBREVIATIONS

AC	:	Air conditioner
ADL	:	Adaptation for Daily Living
ADS	:	Area Development Society
AFLG	:	Aged Friendly Local Governance
ASHA	:	Accredited Social Health Activist
AWC	:	AnganawadiCentres
BCCPN	:	Basic Certificate Course in Palliative Care
BPL	:	Below Poverty Line
BRC	:	BUDS Rehabilitation Centre
CBO	:	Community Based Organisation
CBR	:	Community Based Rehabilitation
CCTV	:	Closed Circuit Television
CDPO	:	Child Development Project Officer
CDS	:	Community Development Society
CFLG	:	Child Friendly Local Governance
CHC	:	Community Health Centre
CP	:	Cerebral Palsy
CRC	:	Child Resource Centre
CSR	:	Corporate Social Responsibility
DD	:	Deputy Director
DDRC	:	District Disability Rehabilitation Centre

DFLG	:	Differently abled Friendly Local Governance
DMO	:	District Medical Officer
DPAC	:	District Plan of Action for Child
DPC	:	District Planning Committee
EBF	:	Exclusive Breast Feeding
ECCE	:	Early Childhood Care and Education
FACP	:	Functional Assessment Checklist for Programming
GO	:	Government Order
GP	:	Gram Panchayat
HI	:	Hearing Impaired
HMC	:	Hospital Management Committee
HS	:	High School
IAS	:	Indian Administrative Service
ICDS	:	Integrated Child Development Services
ICU	:	Intensive Care Unit
ID	:	Intellectual Disability
IEC	:	Information Education Communication
IEP	:	Individual Education Plan
IFA	:	Iron and Folic Acid
IMR	:	Infant Mortality Rate
IOC	:	Indian Oil Corporation
IPS	:	Indian Police Service
IQ	:	Intelligence Quotient
ISM	:	Indian System of Medicine

ISRO	:	Indian Space Research Organisation
IT	:	Information Technology
JHI	:	Junior Health Inspector
JPHN	:	Junior Public Health Nurse
KFD	:	Kyasanur Forest Disease
KILA	:	Kerala Institute of Local Administration
KSSM	:	Kerala Social Security Mission
LCD	:	Liquid Crystal Display
LED	:	Light Emitting Diode
LLC	:	Local Level Committee
LSG	:	Local Self Government
MCH	:	Maternal and Child Health
MD	:	Multiple Disability
MLA	:	Member of Legislative Assembly
MMR	:	Mothers Mortality Rate
MNREGS	:	MahatmaGandhi National Rural Employment Guarantee Scheme.
MoPR	:	Ministry of Panchayati Raj
MP	:	Member of Parliament
MPLADS	:	Member of Parliament Local Area Development Scheme
MR	:	Mentally Retarded
MSSRF	:	M S Swaminathan Research Foundation
MWPS Act	:	Maintenance and Welfare of Parents and Senior Citizen Act
NCD	:	Non Communicable Diseases

NGO	:	Non GovernmentalOrganisation
NHG	:	Neighbourhood Group
NIMH	:	National Institute of Mental Health
NIPMR	:	National Institute of Physical Medicine and Rehabilitation
NMR	:	Neonatal Mortality Rate
NNPC	:	Neighbourhood Network of Palliative Care
NPAC	:	National Plan of Action for Child
NRI	:	Non Resident Indian
NSS	:	National Service Scheme
OP	:	Out Patient
PDS	:	Public Distribution System
PHC	:	Primary Health Centre
PIL	:	Palliative Implementation Committee
PM	:	Prime Minister
PMC	:	Palliative Care Management Committee
PMSBY	:	Prime Minister Bhima Suraksha Yojana
PSC	:	Public Service Commission
PTA	:	Parent Teachers Association
PWD	:	Person With Disability
RCH	:	Reproductive and Child Health
SB	:	Savings Bank
SC	:	Scheduled caste
SCERT	:	State Council of Educational Research and Training
SCP	:	Special Component Plan
SNP	:	Supplementary Nutrition Programme

SSA	:	SarvaSikshaAbhyyan
ST	:	Scheduled Tribes
STH	:	Soil Transmitted Helminthes
TV	:	Television
UNCRC	:	United Nations Convention on Rights of Children
UNICEF	:	United Nations International Children's Emergency Fund
VAPS	:	Vocational Assessment Programming Schedule
VHSS	:	Vocational Higher Secondary School
VI	:	Visually Impaired
VTC	:	Vocational Training Center
WCD	:	Women and Child Development
WIFS	:	Weekly Iron and Folic acid Supplementations

LIST OF CASE STUDIES INCLUDED

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		Telephone	email id
CFLG			
1	Kolazhy Gram Panchayat	0487-2200271	kolazhypanchayat@gmail.com
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3	Ramapuram Gram Panchayat	04822-260248	ramapuramgpktm@gmail.com
4	Thrissur District Panchayat	0487-2360251	dpttsr@gmail.com
5	Kottakkal Municipality	0483-2742221	secretarykottakkal@gmail.com
AFLG			
6	Arimbur Gram Panchayat	0487-2311263	arimpurgpt@gmail.com
7	Karimba Gram Panchayat	04924-246236	ddpkarimbapkd@gmail.com
8	Mulanthuruthy Gram Panchayat	0484-2740250	mulanthuruthygp@gmail.com

9	Thunery Block Panchayat	0496-2550297	bdotuneri2017@gmail.com
DFLG			
10	Kodur Gram Panchayat	0483-2868756	koduronline@gmail.com
11	Pallarimangalam Gram Panchayat	0485-2562252	pallarimangalamgp@gmail.com
12	Sreekrishnapuram Gram Panchayat	04662-261222	ddpsreekrishnapurampkd@gmail.com
13	Venganoor Gram Panchayat	0471-2480256	venganoorpanchayat@gmail.com
Palliative Care			
	Ambalavayal Gram Panchayat	04936-260423	ambalavayalgp@gmail.com
14	Mala Gram Panchayat	0480-2890346	malaGrampanchayat@gmail.com
15	Meenangadi Gram Panchayat	04936-247236	meenangadigp@gmail.com
16	Vettikavala Gram Panchayat	0474-2402533	vettikkavala@gmail.com

M B Rajesh
Minister for Local Self Governments,
Rural Development and Excise
Government of Kerala

25 years of People's Planning- A Success story of decentralisation of power in India

The People's Plan Campaign is a unique initiative that has transformed the landscape of developmental politics in Kerala. This great experiment encapsulated the democratic achievements, Kerala made over the decades. It included the land reforms initiated by the first Communist government led by EMS Namputiripad, the government which was the product of larger movement for land in the pre-independent era and also included the innumerable struggles for land- rights and surplus land in the post – land reform period by the tenants across the state.

In 1996, the state launched the People's Plan Campaign, which was designed and implemented as a successful methodology for transferring fund, functions and functionary that constitutional amendments in 1992 envisaged as the necessary condition to make the devolution of power possible. The campaign and the related process empowered the local level leadership and people at large to plan and implement their own development projects, ensuring inclusive development. Potential of our decentralized government system which was nurtured by the People's Planning process got its effective manifestation during the time of 2018 flood and Covid. Along with the Kudumbashree movement,

decentralisation of power through the people's planning has achieved remarkable success in enhancing the quality of life of people of Kerala and expanding the vistas for economic wellbeing and social development.

Today, in yet another transformative moment of Nava Keralam, new responsibilities are placed confidently on the shoulders of local governments in Kerala. Government expects local governments to become the leaders of economic development by fostering the growth and employment on par with that of developed nations, as it has been in the case of human development. In the journey of creating a Nava Keralam, we also pin hope on our local self-government institutions to make Kerala waste free by clearing the waste produced in our own neighbourhoods through the sustainable systems.

The series of 25 books published by KILA is a valuable contribution to the knowledge base on decentralization, documenting the experiences of the People's Plan Campaign and capturing the essence of decentralization and the role of local governments in development. I am confident that these books will serve as a valuable resource for other states and countries that are striving to achieve sustainable development through decentralization.

I congratulate the team at KILA and the local governments of Kerala for their outstanding work and am proud of the achievements of decentralization in Kerala. I am confident that the state will continue to scale new heights in the years to come.

1
SOCIAL JUSTICE BASED LOCAL GOVERNANCE

Good governance, in the context of social justice initiatives, is aimed at improving access to public service delivery and addressing the rights of the most vulnerable categories. Increasing social vulnerability is noted among groups like children, aged persons, differently abled people and those in need of palliative care. This vulnerability is partly related to exclusion of these categories from decision-making processes and partly due to weak public service delivery management. Social justice must be seen as a substitute for the protection of human rights. Poverty reduction and improvement in living conditions are the ultimate goals of all development efforts aimed at marginalised sections.

Democratic decentralisation and people's participation are increasingly becoming the critical need for development and that is why this is a subject of discussion globally. Democracy is more meaningful when governance gets closer to the people. Strengthening local governments, by means of devolving fund, functions and functionaries, is found to be one of the effective ways of decentralisation and such experiments are being made all over the world. LSGs are empowered to respond to issues related to social justice. Thanks to participatory planning, local governments in Kerala are devolved with fund, functions, functionaries and freedom to plan. Accordingly nearly 25 per cent of the plan fund of the state are devolved to local governments. A major part of the service delivery arrangements in

social sector is managed by the LSGs. Decentralised plan guidelines provide wider roles in implementation of development programmes favouring weaker sections. This has ensured a favourable climate for initiating promotional programmes for the empowerment of children, the aged, the differently abled and those in need of palliative care.

Kerala model of self-governance

The key to the success of decentralisation lies in the level of people's participation in local development. Kerala has a unique story of decentralisation in India. It has successfully experimented with democratic decentralisation and people's participation in planning at the local level. The state has 14 district panchayats, 152 block panchayats, 941 Gram panchayats, 87 municipalities and 6 municipal corporations. With the devolution of power (fund, functions and functionaries), Kerala has evolved a participatory planning process which is universally acclaimed as a replicable model. The local government committee, consisting of all the elected members, gives leadership to development initiatives. Standing committees conduct detailed studies on the subjects entrusted to them such as finance; development; welfare; health; education; public works; town planning and tax appeal. There are 13 subject expert forums (working groups) for each LSG. The chairperson of a working group is an elected representative and the convenor is a senior official from the respective sector. Expert volunteers and practitioners are also members of a working group. The working group is tasked with preparing a status report in each sector. Working groups have a pivotal role in preparing the local plan, in consultation with Gram/ward sabhas.

Financial resources for local planning consist of funds provided by the State Government; own resources; finance commission grants; state and centrally sponsored scheme funds; loans; public contributions; donations and others.

The major portion of the outlay for local planning are the funds provided by the State Government. Democratic arms like the Gram sabha, children's Gram sabha, welfare committees, Kudumbashree, balasabha and other community based organisations ensure effective community management in local governance and service delivery.

Social justice based local planning in Kerala - Opportunities

The core mandate of LSGs is to prepare and implement local plans for ensuring local economic development and social justice. Ensuring the fund, functions and functionaries (the 3 Fs) for the mainstreaming and empowerment of the sections like children, aged, differently abled and those in need of palliative care is very important. A friendly approach is adopted by the LSGs to ensure this.

LSGs have several mechanisms for social justice based local planning such as the Gram sabha; children's Gramsabha; working groups on social security; women's development; *jagratasamiti* (surveillance council), adolescents clubs; welfare committees and such others. LSGs can carry out comprehensive

Social Justice based Local Governance

programmes for weaker sections including those related to nutritional support; scholarships and stipendsfor children with special needs; welfare pensions; BUDS; BRC; standardisation of institutions like anganwadis; schools; health centres;daycare centres for the aged; pain and palliative care centres and many others. While devolving functions to LSGs, the institutions and officials that are designated to perform those functions are also transferred to them. For instance, agriculture offices; health institutions; anganwadis; schools; BUDS special schools and special homes for children are all transferred to LSGs as part of this process. Such

institutions and the officers and staff attached to them belong to the LSGs. Similarly core officials related to social justice such as the District Social Welfare Officers; Women and Child Development Officers; Child Development Project Officers; ICDS Supervisors;Anganwadi workers and Village Extension Officers also work under LSGs. All these factors contribute to creating a favourable environment to ensure social justice based local planning in Kerala.

This book: The objective

The purpose of this book is to document the existing evidence and practices of LSGs in selected thematic areas of social justice, namely children, the aged, the differently abled and those who need palliative care.

The UN Convention on the Rights of Child (UNCRC)proclaims the need to create 'a world fit for children.' It is endorsed by the Government of India through the National Plan of Action for the Child aiming at promoting healthy lives for children. It has been recognised that children deserve substantial investments for their survival; good health; development; security and dignity. Even though Kerala stands first among other states in India in child development indices, it is felt that more local level interventions are needed for achieving significant progress in guaranteeing child rights. LSGs have been found to be the most suitable forums to ensure this. Child friendly local governance has been an attempt in this direction.

State and Central Governments have initiated several programmes for the promotion and protection of the dignity of senior citizens. However, due to the absence of local strategies, they have not produced desired results in addressing the specific issues of senior citizens. Aged friendly local governance, as practised in Kerala under the mentorship of KILA, has enabled the LSGs to make significant progress in ensuring dignity of senior

citizens. Social and demographic challenges of ageing in Kerala demands a redefinition in the social; health; economic; care and emotional priorities of the aged. Since the elderly form a more experienced group, many of the challenges they face can be solved through their own combined efforts with the effective interface of LSGs.

Enactment of Persons with Disabilities Act and adoption of the National Policy for Persons with Disabilities are notable initiatives in ensuring an inclusive society. Special schools for the deaf, dumb and blind are commendable initiatives of the State. When physically disabled (locomotors) students were admitted to regular schools, there were no special education efforts in the case of mentally retarded persons upto 1980. The establishment of the National Institute for Mentally Handicapped, Secunderabad (NIMH), in 1984, initiated a teachers' training programme for educating mentally retarded children and developed a curriculum called FACP checklist.

Many NGOs have initiated unaided special schools. The poor and rural households face several contraints in availing of their services. It is under these circumstances that the Kudumbashree Mission came up with the idea of starting community based centres under the name of BUDS for mentally challenged children. The people's plan guideline of Kerala has authorised LSGs to earmark some part of their budget towards running and managing BUDS schools. With the initiative of Kudumbashree, the Government of Kerala issued guidelines in 2009 for the management of BUDS schools by LSGs. LSGs have also expanded the provisions of the BUDS school norms under the *Ashraya* programme. As of January 2021, there were 66 BUDS schools in Kerala. BUDS is managed by the LSGs with the support of a BUDS management committee constituted vide order no. 152/2009 LSGD, dated August 1, 2009, and is registered as an NGO. One of the major

deficiencies in ensuring the rights of the differently abled is that their service is either charity or welfare in orientation and never right-based. The Differently abled Friendly Local Governance (DFLG), proposed by KILA, recommends right based programmes to be designed by the LSGs.

Palliative care is a programme to ensure inclusiveness, an attempt towards right based governance for the most vulnerable group. Pain; immobility; breathlessness; paralysis; fungating ulcers and others make life unbearable not only for the victims but for the family and caregivers as well. The programme aims at improving the quality of life of patients and their families facing problems associated with life-threatening illnesses, through prevention and patient rehabilitation by assisted handling of homecare, pain alleviation and other associated psychological and economic support systems. It is a synthesis of LSGs, health and social welfare departments, including NGOs and volunteers. Several LSGs have exhibited exemplary performance in this area, with public participation.

Social Justice based Local Governance

This book spans over five chapters. The first chapter is an introductory chapter on social justice-based local governance. Chapters two, three, four and five deal with case studies of selected LSGs that have delivered a notable performance in focus segments of social justice like children, the aged, the differently abled and those who need palliative care. They cover the experiences and practices of LSGs towards Child Friendly Local Governance; Aged Friendly Local Governance; Differently abled Friendly Local Governance and Solace Friendly Local Governance. The LSG level experiences help to arrive at the following conclusions.

- Strong local policies can promote social justice.
- Planning for social justice requires local data.

- Social justice requires multidimensional understanding and collaboration.
- Conditions and opportunities need to be created to ensure optimal development of people as individuals and human beings.
- Well-being of citizens requires broad-based and sustainable economic growth, livelihood promotion and employment generation.
- Leadership promotion and empowerment is key to social justice.
- Participation of key stakeholders, including the afflicted, in programme planning and implementation will lead to sustained results.
- Continuous hand holding support to LSGs beyond training will help in the evolution of development models.

2
CHILD FRIENDLY LOCAL GOVERNANCE

Fostering Social Leadership

Kolazhy Gram Panchayat

1.Introduction

Kathirmanikal, a child friendly initiative by the Kolazhy Gram Panchayatas effectively ensured participation of children in local administration and development activities. The objective has been to derive innovative solutions from them for local issues and also give them the right direction in life through social participation

Participation of children in local governance is of great importance. On the threshold of 18, children become active citizens acquiring the right to exercise voting. So they ought to be acquainted with the dynamics of local development. Above all, participation is one of their rights as per UNCRC and UNICEF directives.

To start with, Kolazhy Gram Panchayat committee passeda resolution (No 11 dated January 30, 2017) to become a child friendly panchayat and formulated an action plan. Initially KILA conducted a three-day training programme for the same in which the Panchayat President, Standing Committee Chairman, I.C.D.S. Supervisor, Headmistress of the local Government Lower Primary School participated on November 10, 11 and

12, 2016. Activities began after the joint meeting of the panchayat members and implementing officers.

Profile

Name of Institution	Kolazhy Gram Panchayat
Land Area	16.6 sqkm
District	Thrissur
Legislative Assembly	Vadakkancherry
Block-Revenue Division	Puzhakkal
Number of wards in Kolazhy Gram panchayat	17
Villages under Kolazhy Gram Panchayat	Kolazhy, Pottore, Kuttur

	(Male)	**(Female)**	**(Total)**
Population (as per 2011 census)	15,397	16,170	31,567
Scheduled Castes	1,311	1,384	2,675

Literacy	97.57%
Gender ratio	1000:1073
Number of families	
Own house	8,447
Rented house	568

2. Relevance

Child population of Kerala is about 30 percent. Hence development will not be complete unless the needs and rights of children are taken into account. Children should live like leaders. Involving them in local development,

could yield good results and solutions for local problems. Exclusion could cause them to indulgein unproductive activities. Hence their participation is to be ensured as far as possible. Apart from children's Gramsabha, they are being included in working groups, development seminars and other meetings. Thus they become accustomed to local governance processes and procedures. They actively participate in balasabha programmes.

3. Objectives

The envisaged objectives of child friendly programmes of Kolazhy Gram Panchayat are as follows:

- Have a clear data of children based on life cycles
- Conduct vulnerability mapping so as to identify children at risk and to take up remedial action
- Make school campus green, classrooms smart and education more effective
- Construct own buildings for anganwadis
- Plan and implement special activities for girls
- Ensure 100 percent registration for birth and death
- Facilitate a differently abled friendly Gram panchayat

4. Children's age-wise statistics (as per 2011)

Age wise Details	Boys	Girls	Total
Below 6 years	933	959	1,892
Between 6-10 years	464	496	960
Between 10-18 years	2,062	1,909	3,971
Total	**3,459**	**3,364**	**6,823**
Differently-abled	44	52	96

Children constitute 21.61per cent of the Gram panchayat.

Characteristics

- Integrated projects and combined action by different departments and institutions
- IEC activities and sharing of experiences with visitors and other panchayats in the platforms provided by KILA. This has opened up new avenues.
- Linkage with bala sabha and bala parliament has helped in strengthening women empowerment and *jagrathasamithi* activities.
- Sponsored programmes and voluntarism. BSW students of St Mary's College, Thrissur, undertook vulnerability mapping. The college's NSS unit helped in beautifying anganwadies. BSW students were behind starting a child corner in the panchayat library.
- Training on child friendly governance was conducted for all anganwadi workers and helpers of all panchayats in Puzhakkal Block.

5.Activities

i. Children's Gramsabha

The major activities conducted by the GP in relation to CFLG are as below:

Children's Gramsabhas were conducted in all 14 wards of the GP. Participation was 54 per cent. During 2017-18, the Gram sabhas were conducted three times - in April and October 2017 and May 2018. The main demands listed out by children are as below:

- Library facility for children
- Safe drinking water
- Place forget-together
- Breakfast for school children

- Training for swimming and yoga
- Address difficulties caused by uneven roads for bicycle riders especially at the lower level of the footpath and adjacent to the main traffic road

ii. Vulnerability mapping

The GP, in association with the Department of Social Work, St. Mary's College, Thrissur, conducted a vulnerability mapping. It helped educate the local community about how to report child related issues; the procedures; whether to tackle the problems of a child in society or take legal action on child rights violations; how to prevent child related problems in society and create awareness among the local community. Parents, anganawadi workers, CDS members, members of the *jagratha samithi* and children participated in the programme. Discussions were held in various anganwadis and the report was consolidated and submitted to the District Superintendent of Police and Viyyur police station. As a result, the Police and Excise Departments strengthened surveillance.

iii. Child friendly health interventions

The following health promotion activities were taken up.

- Appointment of staff nurses in school with a student-nurse ratio of 250:1
- Providing breakfast to students in schools including aided schools. In government schools this was done with the plan fund of the GP and in aided schools, this was done by the concerned management and the Parent Teacher Association (PTA).
- Training in growing herbal garden and nutrition garden to reduce malnutrition.
- Health festival (*Aarogya Utsav*), jackfruit, mango camps for children.

iv. Other activities

- Membership to children in working groups and development seminars
- Balasabha activities.
- Balamela (kids fest)for anganwadi children at the panchayat level
- 100 per cent immunisation campaign
- Renovation and beautification of the panchayat library
- Awareness and motivation programmes
- Traffic rules awareness programmes for students including mock drills by SPCs (Student Police Cadets)of Govt High school, Kottekkad
- *Vimukthi*classes by the Excise department to prevent children from alcoholism
- Provision of 1,000 bio-bins for biodegradable waste through video, magazine and newspaper promotions
- Effective adolescent clubs (*Kumari* Clubs) under anganawadis
- Mathematics lab and smart classroom in GovtL P School, Kuttur.
- 12 smart class rooms for Chandra Memorial Govt HSS, Kuttur.
- Daily remedial teaching for academically backward students in Govt High School between 4pm to 6 pm, along with refreshment for students
- Classes on farming and animal husbandry along with distribution of egg layers
- Laptop and study materials for SC students
- Equipment, aids and appliances for differently abled children
- Training in self defense for girls
- Gender Resource Centre (GRC) and *Jagratha samithi*

- Greening the campus of Govt HSS, Kuttur. (Herbal garden, star plants, biodiversity park, farming)
- Awareness classes in all wards on abuse, substance abuse, cyber crimes and others
- Classes named *nadariyuvan nadine ariyuvan* (know your village)imparting lessons on local history of Kolazhy
- Water purification programmes.
- Training in nutrition gardens, medicinal plants to reduce malnutrition

6. Stakeholder participation

KILA

- The Child Resource Centre, under KILA, selected a few panchayats for CFLG programmes on a pilot basis. Kolazhy GP was one among them. KILA has been giving continuous training and handholding support to the GP. Sri.V K Sreedharan was engaged as the faculty mentor during the initial years to ensurea smooth take off.

St Mary's College, Thrissur

- Vulnerability mapping was undertaken by MSW students. They prepared the report and forwarded the same to the GP, Public Health Centre, schools and to the local police station for follow up action.
- An NSS camp was conducted in Kolazhy in which renovation and beautification of anganwadis was undertaken.
- Panchayat library was beautified with drawings, children's books categorised and an exclusive children's corner created.

Other partners

- The Labour Education Wing under Central Ministry of Labour offered a two-day training for mothers in holistic medicine, medicinal plants, entrepreneurship and other topics.
- Social Welfare Department and Puzhakkal Block Panchayat standing committee collaborated on the prevention of child abuse.
- Panchayat Education Committee (PEC), SSA, PTA/SMC and the State Education Department provided support to ensure child friendly schools
- The Police and the Excise Department pitched in to plan follow up programmes on vulnerability mapping
- Kudumbashree played an active role in children's summer camps, balasabha activities, and bala parliament

7. Beneficiaries

The CFLG programme of Kolazhy GP targets all children of 0-18 age. Special attention is given to anganawadi kids; students up to HSS/VHSC; pregnant women; adolescents and differently abled children.

8.Costs involved

As per plan guidelines, a minimum of five percent of the plan fund is to be set apart for children and the differently abled, as part of social security interventions. Other than that, the LSGs could take up child-centric activities in various sectors including education; health; agriculture, SC development and so on. Accordingly, the panchayat allocated nearly 40 percent, along with own funds, as detailed below. Some programmes are either sponsored or done on a voluntary basis.

Year	Total Allocation Rs.	Children's Allocation Rs.	Percentage
2016-17	1,50,68,439	52,70,351	35
2017-18	1,92,65,784	73,20,988	38
2018-19	1,33,76,190	56,18,000	42

In the ensuing years also due allocation and activities were carried out. Motivation and Civil Services training classes were conducted, at no cost, with the help of the then District Sub Collector, Haritha V Kumar and other officials. Land was purchased for an anganawadi in ward No. 14 through public contribution along with panchayat and the local MP's funds. For the construction of anganwadi No: 174, Rs 8.5 lakh was spent by the panchayat out of which Rs 3.5 lakh was collected through donations and Rs 10 lakh through MP's funds. There was mentorship for the initial two years from KILA. The mentor V.K. Sreedharan worked voluntarily for three years, which helped the programme baga national award.

9. Achievements

- Parents and community were able to focus on the problems faced by children
- Infrastructure facilities improved in schools and aganwadis. This resulted in improvement of quality in education
- Children were able to utilise their abilities in the Gram sabha, working group and bala parliament
- Children now participate in the activities of the GP
- Parents are now actively involved in the physical and mental development of the children.
- Surveillance system of the Excise and Police Departments was strengthened.

- Faculty and students from the Department of Social Work, St Mary's College, renovated the panchayat library. Pictures were drawn to spruce up the interiors and a space provided for a children's corner in the panchayat library.
- Various issues of children were brought to light through vulnerability mapping in all sixteen anganawadis.

10. Challenges and opportunities

Transfer of officials and changes in office bearers of the panchayat committee were stumbling blocks. Transfer of the Secretary, Assistant Secretary and ICDS Supervisor,twice, raised some challenges for programme continuity. The President and the Chairperson and the Welfare Standing Committee, changed. Continuous monitoring, training, visits and mentorship by KILA, to a certain extent, helped overcome these challenges and take the programme forward in full spirit. The Director General, KILA, Dr. Joy Elamon, Associate Professor Dr. Peter M Raj and the team consisting of Sri. M G Kalidasan; Sri. Bhaskaran Pallikkara; Sri. KG Sajeevu; KILA faculty mentor Sri.VK Sreedharan and others played a pivotal role. Mrs. Jessy Lonappan, former Welfare Standing Committee Chairperson, who later became Vice President, demonstratedgreat leadership. During the floods of 2018 and 2019, the GP gave special care to children. Cooperation of Puzhakkal Block Panchayat was ensured. The new panchayat committee is also encouraging the movement by setting apart funds for child friendly projects.

11. Sustainability

The Gram panchayat has undertaken a slew of programmes to ensure child rights realisation. This needs to be documented further with updated data for time bound monitoring. The district panchayat, Thrissur, with the

initiative of KILA, has developed a web-based application for data on children, as part of a child friendly programme. The Govt Engineering College, Thrissur, has given technical assistance. This will help the GPs monitor progress on variants such as child population; sex ratio; birth of girl babies; child protection and others. As stated earlier, fund flow during 2019-20 was 46.9 percent as compared to 42 percent in 2018-19. This has to be continued. Money is also allotted for the empowerment of the *jagratha samithi*; swimming classes; books for libraries; sports kits for clubs; poultry club for school children and other necessities. During 2019-20 Rs16,78,900 was spent for physically and mentally challenged children. The panchayat play ground is getting renovated with a sum of Rs25 lakh. The process is now going ahead.

12. Awards and recognition

There are several notable results for the project. Right of the girl child is being established especially with the campaign '*Bettipadavo Bettibachavo*'. Population of girls has been steady. Anganwadis without own buildings were provided with new ones. Three anganwadis were built with the help of block and district panchayats. The panchayat committee and the general public has displayed a pro- active attitude towards child centric participatory planning. The newly elected panchayat committee (2021-22) has set apart Rs 25 lakh exclusively for programmes for children. The panchayat won the first national award for child friendly governance during 2017-18 constituted by the Ministry of Panchayati Raj, Government of India. The GP also received award from Kerala State Government for adolescents' empowerment in 2018-2019.

13. Potential for replication

The GP has been visited by several study teams from india and other countries. KILA has invited the GP for experience sharing at several national and international seminars and webinars. Based on the success of Kolazhy GP, Puzhakkal Block Panchayat has initiated a child friendly initiative. The GP has set a model for the entire state and the country on the what and how of child friendly initiatives.

Empowering Childhood

Ramapuram Gram Panchayat

1.Introduction

Many unique programmes of the Ramapuram Gram Panchayat such as Saphalamee Balyam aim atempowering children and ensuring their holistic development. These initiatives have helped in securing children's rights as well as creating an interface for their active participation in the social, cultural and governance processes of the locality.

Ramapuram is located in Kottayam district of Kerala State. The Gram panchayat has an area of 54.54 sq km and 18 wards with a population of 32,838 people (male 16,138, female 16,700). The panchayat is an ecologically important one surrounded and guarded by hills like Kurinji Koomban, Kottamala and Koozhamala. The panchayat is rich in water resources with many rivulets, streams and springs. Ramapuram Panchayat is famous for its communal harmony, tolerance and has a strong secular fabric.

A child, for its survival, needs nutritional food; safe drinking water;prevention from diseases (vaccinations); an unpolluted clean

environment, besides love and care. A full-fledged and multifaceted intervention of the health sector is vital to ensure these facilities.

To achieve the dream of total development, children should be provided with universal education. They should be protected from exploitation of all sorts -misuse and abuse. Ensuring freedom of speech, organised group activities, ensuring opportunity to take part in democratic activities and planning will promote leadership capabilities among children.

2. Child Friendly Ramapuram Gram Panchayat Context:

In order to achieve a child friendly status, Ramapuram Gram Panchayat has made comprehensive interventions in important areassuch as survival, development, protection and participation of children.

Ramapuram Gram Panchayat initiated its child friendly programme in 2017. The key inspiration for the programme was the three-day orientation programme organised by KILA from January 18 to 20, 2017, for the elected members and core officials of the Gram panchayat. How to create a child friendly environment in the panchayat and the basic steps to be undertaken in this regard were the focus of the training programme.

Immediately after the training, the panchayat committee discussed this as a major agenda and decided to implement the initiative in letter and spirit. Accordingly, the concept of a child friendly Gram panchayat was discussed in all Gramsabhas. A proclamation rally was held on November 14, 2017, which was attended by school children, parents, Kudumbashree members and the general public.

i) Community support

Mobilising community support was the first step towards CFLG. The key thrust of the initiative was to makes use of youth clubs, libraries and reading

rooms and cultural organisations to spread the message on child friendliness. This helped the Gram panchayat spread awareness about this unique initiative and mobilise coordinated action.

Saphalam 55+, a charitable society of retired people having vast and varied experience, has done exemplary work in mentoring and conducting ward level meetings and panchayat level seminars.

ii) Child status study

A child status study was conducted to understand and assess the status of children in Ramapuram Gram Panchayat.

The population of children among 1-18 age group in the panchayat is 5,309. Among them 2,684 are boys and 2,685 are girls. Out of 31 anganwadis, 18 function in own building and 13 function in rented ones. Out of 43 schools in Ramapuram Gram Panchayat, 37 are government/aided and six are unaided. The status study revealed the areas that needed urgent intervention on the part of the panchayat. They were:

1. Healthy, hygienic and eco-friendly anganwadis, schools and hospitals
2. 24-hour access to drinking water
3. Infrastructure for fulfilling the standards prescribed under Right to Education in the constitution
4. Facilities for the entertainment and mental development of children
5. Own building for 13 anganwadis
6. Interventions to promote balanced gender ratio among children

iii. Child friendly projects

Activities were designed after the child rights proposed under UNCRC, 1989, to which India became a signatory in 1992. The core activities planned

by the Ramapuram Gram Panchayat in the four rights envisaged by UNCRC, for the next five years, are as below:

a. Survival rights

The basic activities planned on the survival front are :

- ensuring nutritional food for mothers from pregnancy onwards
- 100 per cent vaccination coverage
- addressing nutritional deficiency and providing breakfast in primary schools
- ensuring clean drinking water

b. Development rights

The basic projects planned on the development front are :

- betterment of infrastructure in anganwadis and schools
- high-tech class rooms
- empowerment of school libraries
- BUDS school
- play ground renovation
- children's park
- training in arts/sports

c. Protection rights

The basic initiatives being planned on the protection front are :

- child labour – exploitation, misuse and measures to contain them
- drugs/narcotics abuse – protection from drug mafia - awareness classes and seminars with special care for differently abled children
- prohibition of child marriages for prevention of child molestation and ensuring security for children

d. Participation rights

The basic road map on the participation front are :

- strengthening of the balasabha
- membership in working groups
- promotion of adolescents club in anganwadis
- workshops and seminars to promote child leadership
- discussions/seminars/workshops to promote free thinking and freedom of expression
- nurturing of scientific temperament and humanity
- encouragement of motivational and inspiring ideas
- creation of opportunities for self enrichment and creative thinking

iv. Development projects

The panchayat committee initiated steps to address these areas in a phased manner on a priority basis. As a part of this schools, and anganwadis were supplied with water purifiers. High-tech classrooms were also introduced in all Govt. L P schools. Also play grounds were standardised to enhance the physical fitness of children. **v. Highlights**

Organising children's Gram sabha was a unique feature of the Ramapuram Gram Panchayat initiative towards child friendliness. Children's Gram sabhas were convened in all wards after giving wide publicity. In this regard training was imparted to ward members, officials and facilitators. One boy and one girl were selected from each ward to the panchayat children's council. Major suggestions that came from children's Gram sabha are given below:

- Facility for children's meetings in anganwadis
- Equipment/toys for children's park

- LCD projectors with peripherals in schools
- Libraries
- Swimming pools
- Play grounds and stadium
- Mini digital theatre
- Arts and sports facility
- Publishing of children's books
- Rehabilitation centre for differently abled children

Children's representatives also attended development seminars and presented their views. Amazing and inspiring suggestions were raised atthe children's Gramsabha. Children's energy and joy and their intimacy with peers were much appreciated. The suggestions of children's Gramsabhas were placed on the table of the panchayat committee for follow up action.

The panchayat convened a meeting of the panchayat education committee, anganwadi teachers, asha workers and health workers to present the views of ward level Gramsabhas. The panchayat deputed an officer to coordinate and ensure follow up on the suggestions of the children's Gram sabha.

vi. Implementation

The following projects were implemented taking into account the suggestions of children in the panchayat**.**

CFLG activities without plan fund(no cost):

1. Child helpline opened in Ramapuram Gram Panchayat – one officer was deputed as child nodal point
2. The service of *Saphalam 55+*, a charity organisation of retired people was sought and awareness classes were held in schools

3. Posters and publicity were done on various occasions with the help of *Saphalam 55+* veterans
4. Rallies were held against drug addition, plastic menace and war
5. Awareness was given in eco friendliness and organic farming
6. Vegetable cultivation was started in schools
7. Good Parenting Centre was established. Good Parenting Centre is a group of retired teachers and social workers working together on a scheduled and scientific module to impart definite guidelines to those people who mingle with parents and children in a world where atrocities against children are unceasing.

Projects with plan fund:

At the initial step, the Gram panchayat decided to undertake a total face lift of the health centres, anganwadis and primary schools in its jurisdiction

1. Smart class rooms were set up in all schools. Furnishing of class rooms and installation of LCD projectors and laptops were done as part of this initiative.
2. Book racks were installed in class libraries to display books.
3. Portraits of social reformers; scientists; writers and freedom fighters were set up in all schools.
4. Dining hall in schools were furnished with adequate furniture.
5. Water purifiers were installed in all schools and anganwadis.
6. Monetary aid was provided for morning breakfast.
7. A BUDS school was started for differently abled children. 25 children are enrolled in the school
8. Gifted a calf as prize for the best student farmer (HS), supplied kids to LP and UP students in all schools

9. *Bala nidhi*a savings scheme for every child born in the panchayat was constituted in association with the local cooperative bank. The scheme entitles each student to a specific amount when he/she attained the age 18.
10. A mini digital theatre for children with a 70-seat capacity; sound system; projector; drinking water and toilet facilities was built.
11. A 3-day workshop named *Saphalamee Baalyam* (fruitful childhood)was organised at the panchayat level.
12. The panchayat office itself was made child friendly with a front office which includeda feeding area; toys; drinking water; television; music system; messages and pictures for children and parents.

vii Infrastructure

The following infrastructure development projects were undertaken for the benefit of children.

1. Constructed student friendly classrooms and created an ambience congenial to serious study
2. Made playgrounds after levelling school compounds and created a sports culture
3. L P schools provided with smart classrooms to equip them for IT based teaching and learning processes
4. Racks provided in class libraries to promote the habit of reading among the students
5. Additional facilities provided to the anganwadis which were selected for the balasabhas
6. Pure drinking water made available in all schools
7. Boards put up in public places conveying the importance of a child friendly panchayat

8. Special seating provided for children in the panchayat library. Children's books were arranged in such a way that children could easily access them

viii Rehabilitation efforts - BUDS

As per the survey conducted by the Ramapuram Gram Panchayat there were 61 physically and mentally challenged children in the panchayat. Majority were from low and medium income families. These families lacked the knowledge, skills and resources to properly take care of their children and to seek modern medical care. As a result these children were mostly confined to the four walls of their homes, totally excluded from mainstream society. The most disturbing fact was that these children are unattended to, while their parents went for work. This alarming situation led to the idea of starting a BUDS Rehabilitation Centre(BRC). Ramapuram Gram Panchayat allocated Rs 5 lakh for this purpose initially. To ensure a fully equipped BUDS school, charity organisations were also roped in.

ix. Funding

High preference was given by the panchayat in fund allocation for undertaking activities for children as detailed below.

Project Year	Amount (in Rs)
2016-17	36,12,000
2017 -18	67,66,000
2018 – 19	59,86,000

x. Challenges faced

- Lack of finance to carry out activities as suggested by the children

- Lack of facilites in the meeting halls to accommodate all children when panchayat level workshopswere conducted.

xi. Sustainability

The concept of a child friendly Ramapuram is already inbuilt in the systems and practices of the Gram panchayat. It has created many child leaders who could be champions of the programme beyond times.

xii. Results

1. **Democratic values in children**: Special Gram sabhas and working groups have given an opportunity for children to participate in the democratic process which, in turn, is expected to inculcate democratic values in them.
2. **Sense of scientific awareness** : A sense of scientific awareness and the ability to identify the dangers of superstitions were instilled in children.
3. **Improved leadership qualities**: To improve children's leadership qualities, personality development programmes were organised. Children expressed and shared their development dreams and ideas. Values of humanity and universal brotherhood beyond religion, cast and creed were also inculcated in them. Fruitful interaction of children with veterans was enabled through various forums, leading to substantial improvement in their leadership qualities and confidence levels.
4. **Standardisation of schools** : Standardisaton of schools has been a major outcome. Child friendly classrooms and playgrounds were created in all schools. Smart classrooms in Government L P schools; libraries in all schools; clean drinking water in all schools;these are some of the standards that were strictly adhered to. A typical biodiversity fantasy park was constructed at Kizhathiri Govt L P

School, complete with an artificial cave; *erumadom* (tree house); hanging bridge;a variety of statues and playing equipment.

5. **Science parks :** Science parks are coming up in all schools in Ramapuram. When schools open post the Covid pandemic, children can have areal time experience in the study of science subjects. Full-fledged science labs have been arranged in all 18 schools. The project is funded by the Ramapuram Gram Panchayat. Science parks will benefit thousands of students in the Govt/aided schools of Ramapuram. Students can experience intrinsic and elusive scientific facts like colour formation and the working model of a human eye. The idea is to make maths and science subjects easy and interesting to learn for students. Teachers also will be more oriented and empowered.
6. **Child health** : Ramapuram Panchayat has ensured that every child born in the panchayat is vaccinated. Health authorities of Ramapuram Panchayat takes special care to ensure timely services for maternal care from pregnancy to birth.
7. **Upgradation of anganwadis** : A model anganwadi was created in Kurinji Ward with hi-tech facilities such as laptop; LCD projector;health club; learning aids and so on.
8. **Holisitic development:** Selected children attended a three-day workshop at the panchayat community hall on May 16, 17, 18, 2018. The workshop named *saphalamee baalyam*, covered topics like organic farming; local history; traffic awareness; green protocol; methods of science; drug abuse; social media; healthy lifestyle; arts and culture; bio-diversity; personality development; well recharging through rainwater harvesting and various others. Debates were also conducted by veterans in the respective fields. Slogan of the workshop was "learn, befriends and dispel darkness". The closing

ceremony was conducted by children themselves which surprised the whole audience. Anchoring; inauguration;presiding over the function; vote of thanks and everything else was conducted by children.

These programmes have helped develop an attitude of togetherness; cooperation; participation; leadership qualities; confidence and humanity and a scientific outlook in children.

Freedom from the mundane
"The idea of *Balasauhrutham* (child friendliness) has been deeplying rained in the children of the panchayat in the last two years. It is a diverse programme that our panchayat has been conducting. The programme has been inspiring, motivating and informative to every child, like me. It also taught us how to mingle with others and share and fulfil our ideas. We also came to know about the importance of our rights. Hitherto we were confined to the four walls of our schools or homes. Our lifestyle was centred on a school-to-home, home-toschool routine. The child friendly project made us aware of our society and how to face life. We thank Ramapuram Gram Panchayat for the help, love and care. *Saphalamee Balyam*, the three-day workshop conducted for us at the panchayat community hall was a novel and interesting programme which increased our knowledge and confidence. The motto of the workshop "learn, be friends and dispel darkness" will remain in our life as a beacon always. (Abhishek N Namboodiri, Standard IX, SreeKrishna Vilasam VHSS, Kurichithanam)

Lessons for Leaders

Inspirational and motivational ideas of KILA on child friendly local governance have changed the mindset of people's representatives and have

dispelled the illusion that development of society is not just about construction of a road, bridge, culvert or buildings. It is the development of children in society.

The Gram Panchayat appointed a special officer as the child focal pointonly to receive and address complaints from children. This has led to an effective interface for children with the Gram panchayat.

Abhishek Namboothiri, the coordinator of the bala sabha, was elected President of the Children's Parliament and read the Government Policy Statement in the old Assembly Hall of the Kerala Legislative Assembly. This is indeed a recognition for the child friendly initiatives of our panchayat.

Comprehensive Interventions for Children

Sreekrishnapuram Block Panchayat

The cornerstone of Sreekrishnapuram Block Panchayat's transformation into a childfriendly one has been integration and collaboration. It created a new benchmark in the state's local administration system by aligning with neighbouring panchayats for a mutually beneficial project methodology of funding, implementation and support

Residents of Sreekrishnapuram Block Panchayat are farmers mainly involved in paddy cultivation. Majority of the households belong to lower and middle income groups and the area belongs to the ancient cultural regionknown in Kerala's history called Valluvanad. Government institutions include hospitals, arts and science colleges, engineering colleges and *kalaGramms* (art and heritage centres).

The block panchayat has six Gram panchayats namely Sreekrishnapuram; Karimpuzha; Kadampazhipuram; Karakurissi; Vellinezhi and Pookottukavu. The total population of the block panchayat is 1,58,134. Male population is 69,531 and the female 88,603.

The child population of Sreekrishnapuram Block as on March 31,2018, was 25,756. This constituted 16.28 per cent of the total population. Population in the 0-6 age group was 15, 757 and those in the 6-18 age group was 9,999.

Context

There has been thrust given for child development globally in recent years. This has contributed significantly to the progress of children in key child development indicators including health; education; sanitation; nutrition and so on. Sreekrishnapuram Block Panchayat administration, since the inception of its term in 2015, has initiated innovative projects in local planning procedures with a focus on women and children.

The former President of Block Panchayat, Sri. Aravindakshan master, was also formerly the Vice President of Sreekrishnapuram Gram Panchayat. He had made pioneering efforts in Child Friendly Local Governance (CFLG). As a result, the concept of CFLG was already in practice in some parts of the block panchayat area.

The training given by KILA on child friendly activities was very much instrumental in realising the scope and responsibilities of a block panchayat in ensuring a governance system working for children. The block panchayat members who attended the training in 2016, was excited and the decision to initiate a child friendly block originated. The training enabled the block panchayat to think of different ways and means of enhancing the status and security of children and decide to take up the child friendly initiative.

Scope

The decision to take up the child friendly initiative, paved the way for preparing a specific action plan for children at the block level. The block panchayat also decided to ensure rights of children in the 0-18 age group, with a focus on child survival, development, protection and participation.

The block panchayat decided to take up a programme with a convergence orientation at two levels :

i. Integrated activities in the areas of health; education; sanitation; nutrition; protection and participatory arrangements.
ii. Integration and joint action with six GPs of the block panchayat and identification of common areas of collaboration and working together.

Objectives of the programme

Following are the objectives of the programme initiated by the block panchayat.

1. To effectively respond to the needs of children of the locality
2. To introduce a comprehensive child development plan in the area and be a leader in the field in the State of Kerala.
3. Capacity development of children living in the rural areas to put them on par with other children of different streams in various walks of life.

Joint workshops

A series of joint workshops of the block panchayats and six Gram panchayats were conducted, to arrive at a common plan of action. The standing committee chairpersons and key officials attended such

workshops. Each Gram panchayat shared itsknowledge and proposals to implement the initiative. For a smooth programme implementation, a steering committees of six GPs consisting of all presidents and secretaries was constituted.

Plan with a new orientation

*Sabhala Balyam*is the name given to the childfriendly block panchayat initiative. The block administration decided to improve the status of children of the locality to place them at par with global standards by utilising the opportunities thrown open by participatory local planning. The plan was prepared on the following vision and it started during the year 2017-2018. Based on a wide range of discussions in the block panchayat committee and with the steering committee, a 20-point programme was arrived at. Most of these are nearing completion.

Name of the programme	Programme Details
Sabhala Balyam	A programme to ensure complete and comprehensive childhood for all children
Bala Mithra (Smart anganwadis)	With the help of Information Technology, the programme aims at physical, mental and emotional development of anganwadistudents. This is being done in 54 anganwadis. *Angana Thymavu*is a digital initiative for children in the anganawadi to adopt the 'learn while playing' method, which has been installed in 54 centres.
Subhadram	Issuance of Identity Cards to differently abled children

Samatha	Providing scholarships to all differently abled children
Orukkam	This is a programme connected with preparation for marriage. The block panchayat conducted premarriage counseling programmes in 10 centres and a total of 30 classes were conducted. This programme received wide acceptance in the area.
Snehitha	Programme for adolescent girls and adolescent boys (an extension of SABALA)
Subhadram II	Directory of differently abled children
Haritham	Vegetable farming at schools
Ayyankali Learning Centre	Educational promotion with a special focus on SC students
Susmitham, Sparsham	Health related projectswith focus on teeth and skin
Vidhyamithram	Support on learning upgradation
Music Band Set	Improvement of art skills
Suchitwa Mithra	Provision of sanitary facilities in nine schools ongoing under the project *Suchithwa Mithra*
School Dairy Club	Supported by the Dairy Development Department
Sunethram – I	Vision test supported by CHC, Health Department
Snehapoorvam	Interaction with various sectors in society. Nearly 3,500 students participated in the 3.5 km-long students' chain organised on January 30, 2020,with the motto of promoting religious harmony and world peace

Build the Leaders	Interaction with prominent leaders
Sunethram – II	Helen Keller Blind School is the only blind school in the district under the aegis of the Kerala Blind Society. The block panchayat supported the centre with ten braille typewriters and a fully furnished room along withcreating various avenues of communication with the students
Raktha Sashyam	Study on Mahatma Gandhi - sticker/poster demonstration 30,000 stickers and posters on Mahatma Gandhi were distributed to homes directly by students in the area

Special focus programmes

The projects of the Department of Agriculture, Education, Health, Social Welfare and SC were very well integrated with the child friendly initiatives. Programmes like *Samatha; Orukkam; Snehitha; Haritham* and *Susmitham* are some of them.

i.Ayyankali Memorial Learning Centres

Ayyankali Memorial Learning Centre at Sreekrishnapuram Block is the first of its kind in Kerala. The centre is named after Ayyankali, the great social reformer of Kerala who worked for the cause of Scheduled Castes.

The block panchayat has given special attention to the welfare of SC students. The programme is named Ayyankali Learning Centres. The programme has the involvement and support of the Department for Scheduled Castes. The purpose is to reach and help children who are backward in studies in certain subjects and provide them additional

support, guidance and handholding for learning in their hamlet itself. The classes are conducted in the evening hoursat scheduled timings with selected teachers.

Objectives of the centre

Improving educational standards and enhancing the confidence of SC students studying between classes 6 to 10 in the six Gram panchayats of Sreekrishnapuram Block Panchayat area has been the key objective. Currently 318 students are enjoying the facilities in 26 centres of the block panchayat area.

Remedial coaching : Scheduled Caste promoters conducted a survey among 40 hamlets to identify students with backwardness in studies and designed a plan to provide 50 hours special tuition on subjects for a month in the evening hours, between August and March. Teachers for this programme wereselected through a professional process.

Other capacity development programmes: In addition to special classes, the block panchayat initiated various programmes attached to this project such as newspaper quiz;debates on current topics; art and culture; sports and games; competitions and so on.

Orientation for parents (*Unarvu*) is a programme relating to parents who are indifferent to their children's studies. Motivation classes were organised in all GPs. Orientation programmes on current affairs also were conducted for parents of the SC students.

Interactive leadership programme: President and other elected members of the block panchayat and six Gram panchayats, parentsand teachers actively participated in the interactive leadership programme.

ii. Leadership campaign for class Ten and Plus two students

This is an innovative programme of the block panchayat, aiming at capability development among children from the age 15 to 18years. Experts attended the meetings in schools and selected 60 students for higher grade training and interaction with leaders. **iii. Digitalisation of anganwadis**

Angana Thymavu is a pioneering project by the block panchayat in the digitalisation of anganwadis. Out of 140 anganwadies, 54 have been digitalised. The digitalisation process is supported by an NGO at Sreekrishnapuram, named *Hrithu*. With the help of information technology,the programme aims at the physical, mental and emotional development of anganwadi students.

In 21 selected anganwadis, 42-inch TVs, laptop computers and accessories were installed. Necessary training was given to anganwadi teachers and workers. Awareness was created among parents of these 21 anganwadis. Continuous monitoring is being done by ICDS officials. Rs 12 lakh was spent on this. Rs7 lakh was availed of from the general fund and Rs 5 lakh from the SC fund.

As a result of this intervention, anganwadis became smart and the all-round development of children was ensured. Enrolment increased in those anganwadis, where the *bala mithra* programme was implemented.

iv. Scholarships

Scholarships to differently abled children is a project initiated for providing financial aid to all eligible children in collaboration with six GPs and the Palakkad district panchayat.

v. Counselling sessions – Pre marital, education, anti-alcohol, tobacco

Counselling on premarital challenges, education and alcohol and tobacco have been well accepted among children. Age-wise classes and counselling sessions for classes 10,11 and 12 have been a big a success. More than 900 students have participated in these. The programme is continuing, though the pandemic has played havoc with social life.

vi. Fitness programmes

Training in martial arts is another initiative by the block panchayat. The aim is to provide physical fitness for boys and self-defense for girls. Out of 400 registered participants, 150 students have completed the course. Similarly, 360 students have been actively participating in the yoga classes initiated under the project.

vii. Sunethram

*Sunethram*is a flagship programme to conduct eye testswhich is supported by CHC, Health Department. All children in the block panchayat area are included in this and consultation is conducted for all children below five years of age. This is also extended to the age group of five to ten years. 26 primary schools in the region have registered in this programme.

viii. Fellowships

Diamond Jubilee Fellowship Programme is the exclusive initiative of the block panchayat to involve students in various literary, cultural and martial activities. This programme is being implemented in all schools of the area.

Stakeholders

- Children of 1–18 years of age from all six GPs in the block limit including children of migrant labourers

- All six Gram panchayats in Sreekrishnapuram Block Panchayat are stakeholders; both as project beneficiaries and project implementers. The district panchayat also has keen interest and participation.
- Sreekrishnapuram Block Panchayat has a major stake as the programme is led by it and all major policy decisions are taken by them.
- The programme is supported by several line departments and civil society groups

Achievements

The programme has produced several direct and indirect benefits. Some of the direct benefits are given below:

i. About 820 children belonging to six GPs have become the direct beneficiaries of this programme. They have acquired leadership skills and opportunities for advancement in education.

ii. Materials and accessories were provided to several stakeholders. These include 10 Braille typewriters for special schools, band sets for 11 schools, and pen bin boxes for all schools.

iii. Parents of children in all GPs who attended *Unarvu* classes under the SC Department scheme became motivated in giving special educational care to their children.

iv. The Ayyankali Memorial Learning Centre facilitated the First Bell programme (online education during Covid) in a big way. All the 26 centres have functioned effectively as online education centres at the community level, as the centre was live during Covid times also.

v. The project has gained huge visibility in the locality as well as in the entire state due to its high scope and engagement with several stakeholders.

Sustainability

Sustainability of a project is measured depending upon fund allocation, implementation status, stakeholders' participation and overall results.

The child friendly project of the block panchayat is designed as one-year, two-year and three-year projects. *Subhadram*-I, *Subhadram* – II and *Susmitham* were the projects included in the first year. These were completed in 2018-2019. *Sabhala Balyam*, *Sparsham*, *Sunethram* were the second year projects included in 2019-2020 and have been completed. The projects included for the third year (2020-21) are still going on, albeit delayed due to the Covid pandemic.

Recognition and awards

The Child Friendly Block initiatives have won special place for Sreekrishnapuram Block at the panchayat, state, national and international platforms. This has influenced all other activities of the block panchayat. Some of the important awards and recognitions are given below:

1. *Sunethram* – Implemented with the support of CHC, Health Department, this was an innovative project, a first in the state. A special commendation and mention was passed in the Legislative Assembly appreciating this project during the Question and Answer Hour in 2018-2019.
2. CHC was awarded the third place in the state in 2018-2019 for its successful implementation of *Sunethram* programme.

3. Certificate of appreciation was issued for *Balamithra* programme by the Social Justice Department.
4. The block panchayat has won the DeenDayal Upadhyay Panchayat Sashaktikaran Award for its performance in 2018-2019 and 2019-2020. The performance in child development programmes conducted by the block panchayat was one of the benchmark criteria considered for the award. The block panchayat also received the Swaraj Trophy for the best block in Kerala State.
5. Several national delegations visitedthe block to understand and study its child friendly measure under the auspices of KILA.
6. Sreekrishanapuram Block Panchayat was invited by the Government of Kerala and KILA to present its case study at many national and international forums.

Project funding

The block panchayat earmarked huge funds for 2018-2019 and 2019-2020 as shown below. The block panchayat achieved this through a well-planned integration and convergence programme with six GPs, Palakkad District Panchayat, sectoral departments and other civil society groups.

Year	Programme	Beneficiaries	Amount
2018-2019	*Balamithra*	13 anganwadis	12,00,000
2019-2020		21 anganwadis	21,00,000
2020-2021		18 anganwadis	18,00,000
TOTAL			**51,00,000**
Year	Programme	Beneficiaries	Amount
2018-2019	*Snehitha*	860 children	75,000
2019-2020	Martial arts	506 children	2,00,000

2019-2020	Yoga	360 children	15,500
2019-2020	*Sabhala balyam*	60 children	50,000
2018-2019	*Orukkam*	1,000 children	70,000
2019-2020		900 children	50,000
TOTAL			**4,60,500**

Scholarships for differently abled children

Year	Amount	No. of beneficiaries
2017-2018	4,00,000	120
2018-2019	10,00,000	216
2019-2020	10,00,000	216
2020-2021	12,00,000	216

Sparsham programme

Year	Amount (in lakhs)	No. of beneficiaries	Schools
2019-2020	1,00,000	621 Children	26

Susmitham programme

Year	Amount (in lakhs)	No of beneficiary children	Schools
2019-2020	1,00,000	1,066	26

Sunethram programme

Year	Amount (in lakh)	No. of beneficiary children	Schools
2019-2020	1,00,000	5,145	54

Scope and value

The project initiated by the block Panchayatas become a benchmark for other local governments, more specifically to other block panchayats. This programme has shown how a block panchayat can evolve a culture of working together with other GPs of the locality and with sectoral departments. The 20 programmes in the project initiated by the block Panchayatave seta model for the three-tier system of Panchayati Raj administration in Kerala. Other block panchayats have shown interest in understanding the planning and implementation of the project. The project has gained huge visibility in the locality as well as in the entire state. The acceptance for this project among children and their parents shows great potential for its longevity and sustainability.

Leading from the front

Thrissur District Panchayat

Through its comprehensive efforts to become child friendly, the Thrissur District Panchayat has set a new model of working together with other tiers of localadministrationand all internal and external stakeholdersto achieve integrated local development. It is also a great lesson in how empowering local bodies can help bring more power to the people and better efficiency in policy implementation at the micro level.

The UN General Assembly proclaimed the need to create 'a world fit for children' to meet the universal standards set as part of the Convention on Rights of Child. It is endorsed by the Government of India through the National Plan of Action for Child, which aims at promoting healthy lives of

children through positive interventions. Children deserve substantial investment for their survival; good health; development opportunities; security and dignity.

Even though Kerala stands first among other states in India in child development indices, it was felt that more interventions were needed for achieving significant progress in guaranteeing child rights. Only through specific local interventions, status of children can be improved. To understand the status of children, local-specific data is needed and local governments are found to be the most suitable to generate reality-based live data.

Children are not confined to the boundaries of a local body, so child rights realisation is impossible, if we limit the activities within a panchayat or a municipal area. There is a need to evolve a greater governance initiative for children and therefore the Child friendly Districtproject at Thrissur was proposed. The district panchayat took up the leadership with the support of the district planning committee and concurrence of all other LSGs. This was the combined initiative of all the 120 LSGs of the district. At present the district comprises one municipal corporation and seven municipalities at the urban level and Thrissur District Panchayat, 14 block panchayats and86 Gram panchayats at the rural level.

Key data

In order to develop a detailed status study of children for evolving a District Plan of Action for Child, a comprehensive data collection on children was done by 120 local governments of Thrissur district. District panchayat, Thrissur and KILA gave leadership for this. Available secondary data was generated and compiled by each LSG. Precaution was taken to collect the data only from reliable and responsible sources such as government officials

under the LSG or allied institutions. This included data from ICDS; Departments of Health; Education; LSG offices; Kudumbashree; Police and so on.

The preliminary compilation of collected data was done by KILA. The district panchayat sanctioned a project by the name District Action Plan for Child, to develop a programme for continuous annual data updation and automatic compilation. Thrissur District Panchayat earmarked Rs10 lakh for the year 2019-20. As shown in the table below, the data indicates variation in achievements from place to place.

Profile of Thrissur from DPAC

1	**General sex ratio**	**Child sex ratio**	**Remarks**
	2011 census • Male 14,80,677 • Female 16,40,350 • Sex ratio 1,108/1,000 male	2011 census • 0 to 6 years Boys 1,55,855 • 0 to 6 years Girls • 1,48,081 • Sex ratio 950/1,000 boys	Lowest in the state
2	**Child mortality**	**Mother mortality**	**Remarks**
	• Reported births in the district 35,136 • 0 to 28 days death 109 • 0 to 1 year death 201 • **NMR (0 to 28 days)3/1,000** • **IMR (0 to 1 year) 6/1,000**	• Total institutional delivery reported 35,136 • Pre time delivery 420 • Mother mortality 18 • **MMR 51/1,00,000** • caesarians delivery 48%	Focused attention is needed
3	**Immunisation and preventable diseases**		
	1. 100% immunisation to children in the age group 0 to 1 year – 42,790 (97.5%) **2.** Vitamin A supplement to children – 1,03,219 (69%) **3.** Anemic Children (0 to 18) – 7,192 (35%). **4.** Worms-affected disease (0 to 5) – 5,092		

4	Early Childhood care and Education(ECCE)		
	• Children(6 months to 3 years) 66,011 • Children (3 to 5 years) 78,817 • Children enrolled in • Anganwadi33,534 • (45%) • Children enrolled in other preschools 40,869 (50%).	• Children not enrolled 4,414 (5%) • Children receiving • SNP (3 to 5 years) • 32,930(42%) • Children receiving SNP(6 months to 3) • 38,210(58%) • EBF by mothers24,161(46.7%)	

Children with disability in Thrissur District

Total differently abled children (0 to 18)- 40 % differently abled	Male 3,807	Female 2,606	Total 6,413
Physical disability	798	505	1,303
Visual disability	344	318	662
Hearing disability	487	358	845
Mental disability	1,002	733	1,735
Autism	214	117	331
Cerebral palsy	174	140	314
Multiple disability	247	211	458
Mental disorder	423	292	715
Others	73	39	112

Context

Several LSGs in Kerala have emerged as good models in CFLG. Many GPs in Thrissur have also emerged as champions. Kolazhy GP received the best

CFLG GP award of the Ministry of Panchayati Raj, Govt.of India. These good practices were shared in the DPC meetings of Thrissur. Child Resource Centre of KILA provided handholding support to all these initiatives from the very start. Accordingly, Thrissur District Panchayat took the decision to become a Child Friendly District. DPAC Thrissur created an enabling environment for the LSGs of Thrissur to come together and come out with a joint plan of action.

Measures

Steps that helped Thrissur become a ChildFriendly District are manifold. The important ones are given below.

i. Training to DPC and district panchayat functionaires

KILA organised a two-day special training to the elected and official functionaries of the district panchayat as well as to the DPC members of the ChildFriendly District. In addition to this, special discussions were also held at DPC sessions as well as atDistrict Panchayat meetings.

ii. Plan of Action

District Plan of Action for Child(DPAC)was prepared in Thrissur District under the leadership of District Panchayat, Thrissur and district planning committee, Thrissur, with the technical guidance of KILA.DPAC Thrissur was a prelude to becoming a Child Friendly Thrissur District. Thiswas the first DPAC in India prepared by a district, based on the NationalPlan of Action for Child(NPAC). The plan of action spelt out specific objectives, strategies and action points under the four key priority areas namely survival, development, protection and participation. The district action plan was developed based on the data collected at each LSG level and so the goal as well as actions were local-specific and achievable. This had short-term, mid-terms and long-term goals.

iii. Stakeholder consultations

With the aim of ensuring thefour fundamental rights of children, the Thrissur District Panchayat convened a series of stakeholder consultations to structure the Child Friendly District Programmes at the state and district level. This included KILA; the Health University; 110 LSGs of Thrissur district; other sectoral departments including WCD;Departments of Social Justice; Health; Education; Agriculture; Animal Husbandry, Public works; organisations like the Kudumbashree and others. This helped in preparing a joint action plan and in resource pooling. The role of DPC was also outstanding in integrating the project with linedepartments and LSGs in the district.

iv. Special Working Group

Thrissur District Panchayat constituted a special working group for children at the district level. The Chairperson of the welfare standing committee was the Chairperson of the working group, Dr Peter M Raj, Associate Professor, KILA,was designated as the Vice Chairperson and officers of key government departments, along with all standing committee members of the district panchayat were the members. This working group was vested with the responsibility of the overall management of the Child friendly District agenda.

v. Webportal

The district panchayat allocated three lakh rupees for developing a webportal with the technical guidance of Thrissur Government Engineering College. The webportal captured all the baseline data on children as entered by each LSG of the district. As part of this, the data on 86 Gram panchayats of Thrissur District, 16 block panchayats, 7 municipalities and the Thrissur Corporation were combined and details provided. This is available at: http://childfriendlythrissur.org

Different projects

Based on the above set of preparatory activities, a ten-point agenda was evolved that could enable the way towards a Child friendly District. Each item in the action plan had a context and was designed as a solution for the issues identified in the DPAC. It was expected that all the LSGs of the district would include these items in the annual plans and District Panchayat,Thrissur would take a lead role.

i. Information Education and Communication (IEC) activities

The child gender ratio of 2011(950) marked a decadal decline compared to 2001(958). Thrissur clocked the lowest child sex ratio in Kerala and is one among the 200 districts identified under the Beti Bachao Beti Padhao campaign in India. This has been a problem of great concern. The Government of India has also viewed this problem seriously. Similarly, the percentage of child population (0 to 6 age group) in 2011 was 9.30 per cent as against 11.18 per cent in 2001.

In this context, inorder to create awareness among people on the low child sex ratio, the district panchayatinitiated a project for displaying IEC boards in different parts of the district. The information and message to be written on the board was prepared in consultative meetings with the respective line departments. Rs.10 lakh was the amount expended for this project for the year 2019-20.

Similarly, immunisation coverage was 97.5 per cent. Vitamin A coverage was 69 per cent. Incidence of anaemia was 35 per cent. This indicated the urgent need to intensify the Weekly Iron Folic Acid Supplementation(WIFS). The percentage of Soil Transmitted Helminths (STH) stood at 35 per cent that indicated a high need for deworming among

young children. The IEC boards installed in selected locations displayed messages highlighting the dignity of girl children as well as child health.

IEC Board

Awareness creation through line departments

Even when institutional deliveries reported was 100 per cent, the reported caesarean cases were 48 per cent. Percentage of pretern deliveries was about 0.05 per cent and twin deliveries 0.06 per cent. This showed that there was a great need for neo-natal ICU services in the district. The district panchayat under the leadership of DMO initiated awareness programmes as well as a monitoring mechanism through line departments to solve the issue.

ii. Cent per cent pre-school enrolment

The data showed that 95 per cent of pre-school children were attending ECCE. Of these, 45 percent were AWCs and 50 percent in other pre-schools. 4,414 children werenot enrolled for ECCC. This constituted five per cent of the total children of the district. The district panchayat decided to address this issue. The responsibility was given to the Programme Officer, ICDS. A series of combined meetings of ICDS functionaries, along with intensive house visits,increased the percentage of pre school enrolment without any cost.

iii. Promotion of intake of IFA tablets

As per data, 24 per cent of children were born with low birth weight, 26 per cent of children below 3years were underweight and 27 per cent of children in the 3-5 age group were underweight. Proper implementation of supplementary nutrition programme and promotion of IFA tablet distribution were the major solutions suggested. The district panchayat, with the help of ICDS Programme Officer, Deputy Director, Education, and the RCH officer intervened in the problem. Necessary action was taken to promote distribution and management of IFA tablets and upgrade the supplementary nutrition programme with the help of civil society. Special attention was given to the anganwadi centres which had more such children.

iv. Zero school dropouts

The data showed that the school dropout rate was 0.43 per cent. This was a concern for the district panchayat as it was above the state average. Chronic absenteeism was reported to be 0.02 per cent. The dropout rate of SC/ST was 0.036 per cent which was less than the general dropout rate. The education standing committee of the district panchayat intervened in the matter and reviewed it in its monthly meetings. Special meetings were convened with those LSGs facing the issue of school dropouts. House visits; interaction with parents; strengthening of PTAs; providing for morning meals; remedial education programmes; provision of study rooms to SC/ST students and promotion of inclusive education were some of the activities undertaken by the concerned LSGs to reduce school dropouts.

v. Anganwadi standardisation

With the objective of total development of children at an early stage, the district panchayat initiated to improve the standards of all anganwadis of the district. The mapping of the needs of anganwadis was done with the

help of ICDS functionaries. The district panchayat was able to provide all facilities in anganwadis to meet this goal. Rs3.20 crore was spent for this. Based on the assessment it was decided to standardise 200 anganwadis in Thrissur District within the next five years. The following activities were undertaken as part of this.

i In collaboration with the Gram panchayats, block panchayats, Social Justice Department and MGNREGS, the district panchayat decided to make 200 anganwadissmart and child friendly. Financial assistance for AWC construction was extended to Gram panchayats that owned land.

ii The district panchayat ensured clean waterin 200 AWCs by providing water purifiers at a costofRs 11 lakh.In order to solve the issues of high temperatureduring summer, the district panchayat ensured proper ventilation in 200 AWCs. Toys and sports equipment were also supplied on a priority basis. Similarly, air conditioners were provided for,at a cost of Rs 9 lakh. With the help of the Agriculture Officer, vegetable gardens were set up for providing nutritional food at anganwadis.

vi. Standardisaton of schools

The data showed that seven per cent of the schools functioned in semipermanent buildings. The district panchayat decided to make the schools safe by modernising all schools. Safe drinking water facilities were ensured by providing water purifiers in six per cent of the schools that did not have these facilities. 17 per cent of schools did not have adequate toilet facilities. This is being addressed in a phased manner. 30 per cent of the schools have green initiatives in place. In remaining schools, green initiatives are being implemented with the help of the Agriculture Department in a phased manner.

vii. Schemes for differently abled children

As per DPAC Thrissur, 2019, the population of children with disabilities above 40 per cent having medical board certification was 6,413. This constituted 0.73 per cent of children in the 0-18 age group. The percentage of children with mental retardation (ID) was 27 per centin the total tally of children with disability. The percentage of autism was five per cent, CP five per cent and MD seven per cent. Total number of children with mental challenges constituted 44 per cent ofthe entire population of children with disability. Comprehensive interventions were planned for extending comprehensive services to the differently abled children and to mainstream them in society. This was one of the focus areas of creating a Child Friendly Thrissur District.

a. Disability detection and intervention

Early disability detection and intervention camps were conducted under the leadership of the district panchayat at block and Gram panchayat levels. This enabled mobilisation ofa wide range of public participation, including parents, CBOs and other voluntary experts. These camps facilitated early identification of disabilities and evolved social inclusion programmes based on the nature of disability. As a result, many childrenrecovered from disabilities, phase by phase and returned to normalcy. NIPPR gave the technical support for this programme.

b. Disability Resource Centre

Realising the gaps in services for children with special needs, the district panchayat decided to launch a District Disability Resource Centre for Children named DDRC- *Subhapthi*in Thrissur District.

This centre aimed at detecting mental and physical disabilities in children at an early age and making preventive, curative and rehabilitative

programmes including family support programmes. The district panchayat identified a suitable site in Ramavarmapuram, near Thrissur, and building construction is nearing completion. The fund for construction was contributed by all the LSGs of the district as per the decision of the district planning committee. Accordingly Thrissur Corporation contributed Rs 25 lakh,four municipalities contributed Rs 5 lakh each, block panchayats Rs 2 lakh each while each Gram panchayat's share was Rs 50,000 for the year 2019-20. Rs 2 crore has already been mobilised.

c. Disability scholarship assistance

The number of differently abled children receiving disability scholarship currently is 4,474. This is 95 per cent of those eligible. Data shows that 46 per cent of such children have been attending regular schools and 54 per centhave been attending special schools.The percentage of children who were provided with aids and appliances, however, was only 7.6 per cent. This seems to have been due to the fact that children were receiving aids and appliances from multiple sources like SSA, KSSM, handicapped persons'corporation and other international agencies and clubs.Scholarships were not disbursed at the beginning of the school year,therefore the amount was often not used for educational purposes. Similarly, the full scholarship amount was not disbursed.

Considering this, the district panchayat, in association with the district planning committee, took a decision to ensure full allocation of the amount and timely disbursement of scholarships for obtaining the DPC approval of annual plans. To ensure this, Thrissur District Panchayat allocatedRs 1.72 crore for the scholarship scheme.

viii. *Snehita@* school

Under the initiative of the Thrissur District Panchayat, several school-based interventions were made.

a. Substance-free school zone(zero zone)

Protecting children from substance abuse has been one of the major goals of the district panchayat. Children faced several mental problems and trauma due to the side effects of narcotics and alcohol. For solving this issue, the district panchayat initiated *Snehitha@* School programme. Children facing such issues were given professional counselling and follow up arrangements were made, to bring them back to normal life. Rs 4 lakh was allocated for this programme by the ThrissurDistrict Panchayatduring the year 2019-20.

b. Awareness programmes

Alongside, in each LSG, awareness programmeswere organised through bala sabhas. Programmes were organised to educate children on their rights and responsibilities.

c. Scholarships

Separate schemes were set up to provide equipment including aids and appliances and music instruments to differently abled children. All these activities have helped in mainstreaming these children in society.

ix. Science Park

For promoting scientific aptitude in students, the Thrissur District Panchayat, with the technical support of the Indian Space Research Organisation (ISRO),initiated a long term project of a science park namely *Vigyansagar* at Ramavarmapuram, Thrissur, in 2018. This has been much appreciated by students and the scientific community alike.

The Science Park at Ramavarmapuram

Vigyan sagar is open to the public and students. This has become a turning point in the efforts towards developing and disseminating science and technology. This has been helpful in creating a science curious community of children. The park has various exhibits, experiment labs and facilities for conducting seminars. Nearly 200 children visit the centre daily and comprehend the different aspects of science and technology and make scientific observations. Considering the curiosity,the centre has generated among children, efforts are being initiated to set up science parks in other schools coming under the district panchayat.

Front view of the Science Park

The total project cost of *Vigyansagar* wasfour crore rupees. This was met from panchayat, MLA and MP funds.

x. School sanitation

Improving the environmental conditions in schools; ensuring good toilets; providing clean, hygienic napkins to teenage girls; initiatives to reduce mental trauma in children were some of the major activities initiatedunder the school sanitation programme.

She Pad programme has been one of the notable school-based programmes. The district Panchayatas set up three sanitary production units. These units give skill training and employment to 32 women. The required number of sanitary napkins are manufactured and distributed to all the High Schools and Higher Secondary Schools managed by the district panchayat. Vending machines and incinerators have also been set up. Without depending on other shops, students can get sanitary napkins in the schools itself whenever needed. Through these activities, the district panchayat was able to ensure child friendly and comfortable spaces for the education of teenage girls. Rs19.71 lakh was allocated and spent for setting up this programme in the years 2018-19 and 2019-20 by the district panchayat. **Summary of projects**

Sl.no	Programme	Department fund	District Panchayat/ LSG fund (in Rs)	Other sources
1	1000 golden days of the child		1,00,000	
2	Vitamin A campaign		9,40,000	
	She pad project		19,70,860	
3	Green initiatives at schools	19,50,000	6,50,000	

4	Poultry units for school students	32,50,000	32,50,000	
5	Study room for SC students	10,00,00,000	4,44,00,000	
6	Blue Army Dist. Pt 6,25,000 GPs 6,25,000 Muncipality 3,50,000 Corporation 25,000		16,25,000	
7	Basic Facilities to AWCs (50* 12 lakh)	1,00,00,000	2,00,00,000	MP,MLA & MNREGS
8	Water Filter to AWCs		11,00,000	
9	AC to AWCs		9,00,000	
10	Toys to AWCS	90,48,000		
11	Children's Gram sabha		5,64,000	
12	Disability scholarship		172,00,000	
13	Counselling to adolescents		37,50,000	
14	Snehitha @ school		4,00,000	
15	CCTV cyber security @ school		52,20,000	
16	Anti-drug campaign		1,00,000	
17	Financial assistance to GPs for the conduct of children's Gram sabha		1,88,00,000	
18	Child protection committee		2,35,000	
	Total	12,33,48,000	12,12,04,860	3,00,000

Considering the comprehensive approach followed by the Thrissur District Panchayat to become a Child Friendly District,The Ministry of Panchayati Raj awarded the Deen Dayal Upadhyay Panchayat Sashaktikaran Puraskar for the best district panchayat for the year 2019.

Conclusion

The district panchayat has made great efforts to convey the message of child friendliness in every corner of the district and has ensured its visibility. This was made possible due to the clearly defined integration of projects with all LSGs and departments of the district. This has been an outstanding contribution and achievement of the district panchayat. The welfare standing committee of the district panchayat fully utilised the expertise of the special working group for children. The expertise of stakeholders such as KILA, Health University and the Government Engineering College, Thrissur, were fully utilised. Thrissur District Panchayat has set a model on how a district panchayat can work together with other tiers to achieve integrated local development.

Giving Children Their Due

Kottakkal Municipality

The child friendly initiatives of the Kottakkal Municipality focuses on not just improving the living standards of children who are its residents. They are also designed to empower them by ensuring their four rights as envisaged in the UN Convention for Children. In its implementation, the municipality alsodemonstrated the collective will of leadership and people inovercoming all hurdles along the way.

Kottakkal was a panchayat situated in Tirur Taluk,Malappuram District until 2010.From Nov 1, 2010,it converted into a municipality with 32 wards and a population of 48,342. The municipality is spread over an area of 2,043 sq km.The decision to initiate activities related to becoming a Child friendly Municipality came into being after the elected representatives and officials

of the municipalityreceived training from KILA. The municipal committee decided to design and start the programmes stage by stage, with the guidance of KILA.

Initial steps

Some of the initial steps taken by the municipality in this connection are given below.

i. Public campaign

Public campaign and mass awareness programmes were organised with a view to mobilising public support for the programme.

ii. Status study

In order to understand the situation of children, a status study was conducted. This was largely based on collection and collation of data on children available with ICDS; the Health department;the Education Department; LSG office; Kudumbashree and other reliable sources. This also gave an understanding of the activities that had to be taken to ensure the rights of children on a priority basis.

iii. Children's ward sabha

Children's ward sabhas were conducted in all 32 wards of the municipality. This enabled to mobilise children and make them part of development activities.

BOX STORY

"We are conducting variety of child friendly activities in Kottakkal Municipality with the cooperation of public. We are also participating in ward sabhas, working group meetings and development seminars. We, children, are getting great consideration from the municipal council.

Children also undertakea lot of development activities along with the municipal council".

Nirajana KK, leader of Child-Friendly Local Governance programme in Kottakkal Municipality

Child status study

As per data collected from the status study, the total population of the municipality was 48,342. Out of this male population stood at 24,562 and female populationat 23,780. The total schedule caste population stood at1,256. (Males 609 and females 647).

Total number of families was 8,320. The population of children of 0-18 age group was18,960. This constituted 39.22 per cent of the total population of the municipality. The children of 0-1 age group were 1,097. (585 girls and 512 boys) and those of 2 to 5 years were 2,191(2,069 girls and 4,260 boys).78 children of the municipality were classified as differently abled. Among them 47 were males and 31 females. The details of child population are given below.

Children	Male	Female	Total
0 to 5 years	966	929	1,895
5 to 10 years	966	892	3,858
10 to 18 years	7,264	5,943	13,207
Total	**10,196**	**8,764**	**18,960**

Status of child friendly institutions

As part of the CFLG programme, the municipality assessed the status of the following child friendly institutions.

Anganwady

Out of 38 anganwadis, 23 functioned in owned and permanent buildings and 15 functioned in temporary buildings. 32 had adequate sanitation facilities and 26 had permanent water connection.

Schools

The municipality had 21 schools and all of them functioned in owned property.

Special focus areas

Some of the special focus areas for CFLG interventions as understood from the status analysis are given below:

- Ratio between male and female was very poor compared to state average (1000 M /972 F)
- Sex ratio among 0-6 age group was 1000 M /973 F
- Special care areas for differently abled children
- Improvement of amenities for anganwadis

Ward sabhas for children

Conducting ward sabhas for children regularly (twice a year) has been a regular feature of Kottakkal Municipality. Ward sabhas were conducted in all 32 wards. Systematic propaganda and door-to-door campaigns by children wereconducted.

Suggestions from children's sabhas

The suggestions given by children were categorised based on the four child rights

Survival

- Provide necessary vaccines to the children at health centers
- Build a large pond in the municipality to solve the shortage of water
- Prohibit plastic carry bags
- Provide essential nutrition for breast feeding mothers

Development

- Create hi-tech anganwadis
- Provide facilities for the development of differently abled children
- Reduce the weight of school bags
- Install TV in anganwadis
- Ensure continuance in the education of girls after completion of 10th standard

Protection

- Prevent the secret sale of substances such as pan, panparag and tobacco
- Prevent mobile phone abuse among children
- Prevent child labour
- Install CCTVs in suspicious areas that wereamenable to child abuse

Participation

- Distribute football and cricket kits to children
- Build playgrounds for students
- Build and establish libraries and restrooms and arrange counselling sessions for reducing stress in children

- Provide training in organic farming for children
- Provide training in swimming for children
- Take necessary action to maintain religious harmony among children
- Give training for dance, drawing and music during holidays.

It was understood that children's demands went beyond the interests of the larger society. Most of the demands came under the realm of child participation.

Activities undertaken for children

I. Children in all working groups

Membership and participation of children in all working groups were ensured. Accordingly, two children each were nominated to each of the 13 working groups. Out of the 26 child working group members, 13 were females.

ii. Comprehensive health programme

A comprehensive health programme was initiated in each and every ward to attain 100 per cent immunisation. As a result, while the Malapuram District level vaccination rate is currently 80 per cent, the municipality has achieved 93.30 per cent immunisation coverage. Altogether 1,768 children were immunised; only 6.7 per cent remain. Immunisation drive to make it 100 per cent is ongoing. For this, district level health seminars are being conducted and plans are being prepared for controlling communicable diseases. Meeting of different religious leaders were also organised to create awareness on immunisation. A remarkable feature is that a bonus of 10 marks is being given to fully immunised children while selecting individual beneficiaries.

Student health identity cards have been issued to 4,000 children with the

help of the Kottakal Municipal Hospital.

iii. Child friendly hospital

Development work to the tune of Rs 3.5 crorehas been undertaken at the Kottakkal Community Health Centre to make it a child friendly hospital. Previously, a government dispensary had been made a CHC complex with a Rs 3.5 crore fund from the MP LAD scheme and nearlyRs 50 lakh from the MLA and municipal funds. The hospital has all facilities for immunisation;a breast-feeding corner; MCH services; children's library; entertainment facilities for children and so on. Gymnasium facilities for adolescents and youth have been included in the complex. As a result of this, the CHC received the Kaya Kalpam award from the Government of Kerala for its meritorious services.

iv. Improvement in quality of education

The municipality has provided bicycles and learning materials to students. With a view to improving English education, 3,500 English - Malayalam dictionaries were distributed. Rs10 lakh wasspent for this.

v. Upliftment of Scheduled Caste students

Special efforts were made towards the educational upliftment of Scheduled Caste students by way of distributing learning materials and bicycles to them, along with study roomsand laptops.

vi. Anganwadi upgradation

This programme was meant to ensure all basic amenities for all the 38anganwadis of the municipality. The construction of high-tech anganwadis is in progress in all the wards. Fifteen anganwadis were functioning in temporary buildings. Now the Palathara anganwadi has been reconstructed with all modern facilities spending rupees five lakh,

entirely with public participation. Four anganwadis (Kozhayur, Villoor, Kuttippuram and East villoor)are also being upgraded based on the Palathara model. All amenities for the children like gatesfor the anganwadis; attractive wall pictures on the interiors and exteriors of the building; baby friendly toilets; television; air conditioners and other amenities have been provided with public participation.

vii. School standardisation

Infrastructure development and buildings for schools were envisaged as part of this programme. The municipality spent Rs 2.42 crore for the improvement of infrastructural facilities in the education sector. This includes facility upgradation in schools and school buildings.

viii. Carepackage for differently abled students

78 differently abled children have been identified as eligible for scholarhsips. This has been fully ensured .

ix. Adolescent mental health

The following adolescent mental health programmes are undertaken;

- Counselling for adolescent children
- Strengthening of the awareness committee
- Development of a gender resource center
- Self defense training for girls

x. Child friendly public places

The municipalityhas made adequate public space provision for children. The municipality has set up a public library; a children's corner in 38 libraries; a public playground;a children's park and functional *jagrata samitis*(surveillance councils) in all 33 wards. Activities to strengthen balasabhas are taking place. Libraries were set up in all 28 anganwadis.

School-based clubs are very active in all schools functioning under the municipality .

Model project implementation with public participation Universal school education project (standard of education improvement program)

This programme covers the study of languages; science and technology; mathematics; physical education; distribution of study tools; development of basic infrastructural facilities and so on. This integrated pilot project is being implemented in ward 27 (Palathara) in Kottakal Municipality. It includes various educationprogrammes such as off campus activities that include study on nature; agriculture; environmental education;sessions on religious harmony; literary activities; training in public speaking; story and poetry writing; various artand cultural activities and training for PSC, civil services examinations. An intensive coaching programme has also beenenvisaged for the students of standards 7, 8, and 9 once a week. The highlight of this project is that the entire expense to implement this project is being met by public sponsorship. The municipality intends to extend this project to all the 23 municipal wards.

Funding for CFLG interventions

The municipality has given high priority for CFLG activities in the last few years starting from the year 2016 -17. This has reached the maximum (54 per cent) during 2019-20. This has enabled the municipality to come out with comprehensive interventions for children.

Year	No of projects	Amount	Percentage
2016- 17	24	1,27,22,457	18
2017-18	32	2,28,32,408	30
2018-19	41	4,43,80,180	52
2019-20	47	4,52,67,783	54

Results

CFLG interventions have had direct and indirect results in the municipal area. The important direct benefits are given below.

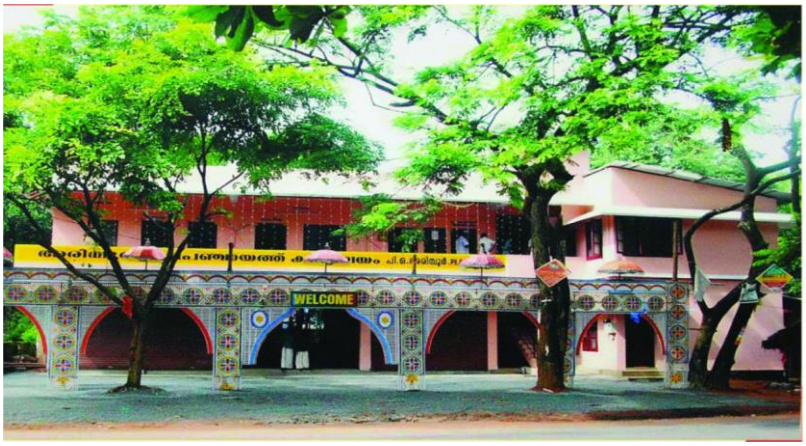
- While the district level vaccination rate was 80 per cent, the municipality achieved 94 per cent immunisation coverage.
- Sufficient funds were allotted for child development activities. It was above 50 per cent of the total budget during the years 2018-19 and 2019-1920.
- Through community participation, a considerable amount was raised for development activities.
- Problems faced by children have been considered as the problems of the society. As a result, responding to such problems have been taken as a priority concern.
- By ensuring child participation in working groups, they got a chance in the plan formulation process.
- Children's involvement in the administration of the municipality could be ensured through active children's ward sabhas.
- Childfriendly institutions such as parks; anganwadis; schools and hospitals anda stadium were all built to enhance the sports and recreational avenues for students
- High-tech anganwadis
- Regular support from KILA

3
AGED FRIENDLY LOCAL GOVERNANCE

Haven For The Elderly

Arimbur Gram Panchayat

A very comprehensive, committed and sustainable programme backed by public and stakeholder support is what helpedArimbur Panchayat create a unique model for AgedFriendly Local Governance.It is a programme that has received much recognition nationally and has been a trendsetter in the concept of public-private partnership in social justice programmes



Arimbur Gram Panchayat office

Arimbur is a Gram panchayat, situated eight kilometers away from Thrissur city. The name of the panchayat is derived from the word *Ari* meaning rice

and *ooru* meaning village. It is a place surrounded by water and paddy fields. Rice is the major crop and so there is greenery everywhere. There is a small island called Vilakkumadam in the panchayat. The agrarian culture on the one side and proximity to city on the other, have brought about a cultural lag in intergenerational relations. This has affected the elderly, due to lack of coping skills.

District	Thrissur
Block	Anthikkad
Area	22.65 sq km
wards	17
Population	23,289
Male	11,375
Female	11,914
Density of population	1,028
Literacy	93.01%
Male	95.57%
Female	90.61%

The aged friendly drive

A group of very socially committed people from the senior citizens forum, on witnessing some of the problems of senior citizens, decided to find solutions. They found that the lives of some of the elderly people in *Asraya*(destitute) families and those of some of the aged agriculture labourers were dismal. Changes in the work pattern of young people and migration for jobs created an environment of deficit in care as well as communication among elders. The lives of even the well-to-do senior

citizens above the age of 70, were not different. The plight of the elderly with disability, dementia and serious non communicable diseases were also found to be miserable.

A senior citizen's charitable forum was started by the pensioners and ex-merchants in the locality. The panchayat in the development report (*Janakeeyasoothranam – Vikasana Rekha*) published a status report of the aged, based on a compilation of the secondary data, for assessment of the situation.

Status study of the aged

The Gram panchayat conducted a survey of senior citizens through anganwadi workers to find out their current status. The details compiled through this survey aregiven below.

Age wise, gender wise classification of senior citizens

S. N	Age group	Male	female	Total
1	60 to 69	1,336	1,441	2,777
2	70 to 79	747	859	1,608
3	80 +	159	259	418
	Total	**2,242**	**2,559**	**4,803**

Data on widows and widowers

S. N	Age group	Male	female	Total
1	60 to 69	45	527	572
2	70 to 79	33	451	484
3	80 +	34	187	221
	Total	**112**	**1,165**	**1,277**

Status analysis

- About 15 per cent of the population belonged to the aged category
- Among the aged, 27 per centbelonged to the widow/widower category leading toa high incidence of loneliness
- 80 per cent of the women above the age of 80 were widows

As the data did not cover socio economic indicators, a family based survey was conducted. The data available revealed that the aged were exposed to lack of physiological, emotional and psychological stress and were facing several social security challenges.

Identification of challenges

There are several ways of identifying the needs of the elders and the challenges faced by them. Arimbur Gram Panchayat resorted to conducting special Gram sabhas for the aged.

Special Gram sabha for the aged

The panchayat organised special Gramsabhasfor the aged in all the wards under the leadership of elected representatives. The meeting was given sufficient publicity through the anganawadis, Kudumbashree unitsand senior citizen forums. The agenda of the meeting included collating the needs of the aged fortheir social and physical well being as well asother requirements. The summary of the major demands are as follows:

- Timely sanction and payment of social security pensions for all eligible persons
- Setting up of facilities for daytimeengagement
- Supply of life support aids and appliances including walking sticks; wheel chairs; walkers; water beds;urine tray and such others
- Income generating programmes

- Regular medical checkup and medicines
- Legal support
- A forum for establishing contact and airing grievances

Development seminar

A special development seminar for senior citizens was convened at the panchayat level onNovember 29, 2018. The representatives of the special Gram sabhasparticipated in the seminar. Dr Peter M Raj, Associate Professor, KILA,gave keynote address at the one-day seminar which was presided over by the Gram panchayat President. This isconsidered as a first seminar of the sort in Kerala. A consolidated report onthe special Gramsabhas was also released. Problems of the aged, expected solutions, realisation of their rights and suggested programmes were presented and discussed along with the proposal from the panchayat committee. 278 persons attended the seminar. The proposals were discussed at the ward forums and a meeting of the ward representatives was held at KILA onMarch 18, 2019. An agedfriendly model project proposal was presented at the meeting. The project included those activities directly implemented by the Gram panchayat and those implemented by the senior citizen's forum.

Dr Peter M Raj addressing the development seminar for the aged

Aged friendly Arimbur

On the basis of the data onthe requirements of the seniorcitizens the panchayat decided to formulate a comprehensive project for them with the participation of senior citizen's forum, an NGO named Sumithra in Arimbur and the Department of Social Justice. KILA arranged a training for the members of the senior citizen's forum in awareness building, aged friendly local governance and survey of the elderly. Panchayat members also participated in the training.

Objectives

The main objectives of the projectwere to uphold the rights of older people and to improve their qualityof life through senior citizen focused programmes.

- Build a community sensitive to the rights of older persons so as to ensure an inclusive environment
- Ensure rest, recreation and relaxation, space for the aged to assemble, structure their time and get support and guidance.
- Encourage productive ageing though special NHGs, micro enterprises and by upgrading their artisanship
- Initiate comprehensive action for entitlement of pensions and other assistance along with palliative care options under people's planning, and health assistance.
- Enable them to express their opinions, artistic and cultural talent, traditional knowledge and be active support systems themselves

Anganwadis as hubs

In a village setting it is difficult to find adequate space to organise forums of the elderly. So the panchayat decided to form senior citizen groups at the anganwadi level. A committee of senior citizens was constituted with an anganwadi worker as convener. The group meets every week and conducts

meetings of all members. They conduct cultural activities and share their problems and at the same time receive information on various services. The panchayat provided additional facilities including seating arrangements.

Daycare for the aged

Building for *pakal veedu* or a rest and recreation centre for the aged during daytime has been completed and has started functioning. Five cents of land was donated by the SevaGramm Charitable Society for this purpose. A 925 sq ft building was constructed with Gram panchayat fundsas well aspublic contributions. It functions as a multiservice centre. Central unit of the ward level citizen's forum provides guidance for senior citizensregarding pension; petitions; legal support in family disputes; details of beneficiaries;alerts on various programmes and others. Yoga classes under Ayush are also being conducted.The centre is open from 9 am to 6 pm. Allelderly people are entitledto these facilities. Some senior citizens are brought in private vehicles by their dear ones. Health and nutrition education, video streaming; games and birthday celebrations are all part of facilities provided to them. The centre serves as a focal point of the aged friendly programmes of the panchayat.

Daycare centre for the aged

Activities of *pakal veedu* - 2020- 21

Activity	No. of Beneficiaries
Enrolment of anganawadi units	28 units
To access routine services like newspaper reading, recreation etc.	100
Medical checkup	180
Awareness classes	100
Yoga/ exercise	40
Guidance and information	180
Palliative assistance	10

Key features

1. **Seniors' forum at anganawadi centre** : The centre functions as office of the anganawadi level seniors'forum. Weekly meetings and telephonic information sharing are arranged at all the 28 centres.
2. Panchayat level senior citizen's forum manages the day-to-day affairs of the *pakal veedu* – maintenance;cleanliness; discipline; organising of programmes;interactions with the GP, PHC and ICDS. The office of the forum also functions at the *pakal veedu*.
3. Daily services include rest, recreation and space for personal contact among the formal members and informal members. Services are open to all,free of cost.
4. Medical camps are held at the centre and weekly medical assessments including lab tests and medicines are arranged at the PHC.
5. The local ayurveda dispensary makes arrangements for yoga classes periodically. Some special camps like laughing groups, walking

groups are also arranged with the support of the forum, to ensure physical fitness of senior citizens.

6. Awareness seminars are conducted by the Gram panchayat in connection with the international day of the aged. School-based programmes are also conducted on ageing and the importance of the aged, at the Higher Secondary Schools for intergenerational support.
7. Doubt clearance on social security pensions, life certificates and financial assistance;other aids and medical equipments are also available to senior citizens as part of the guidance and information sharing programme.
8. A well organised home-based service unit for palliative care is conducted by the GP at the local PHC. Medical aid and equipment required by bedridden patients are made available by the unit. The centre gives guidance on palliative care services.
9. As part of dispute resolution assistance, cases related to maintenance and welfare of parents,as per the Senior Citizens Act 2007, are either negotiated or reported to higher authorities for remedial actionas the case may be.

Other initiatives

The health centre environment at the local health centre has been made aged, child and differently abled friendly. Seating arrangements for elders; special advice on palliative care; special check-up days for non communicable diseases and free medicines are the major attractions offered to senior citizens.

Jagrata samiti for the aged

A special committee has been constituted to look into the complaints of elder persons, including abuse, violence and neglect. A complaint box is made available at the *pakalveedu* and panchayat office.

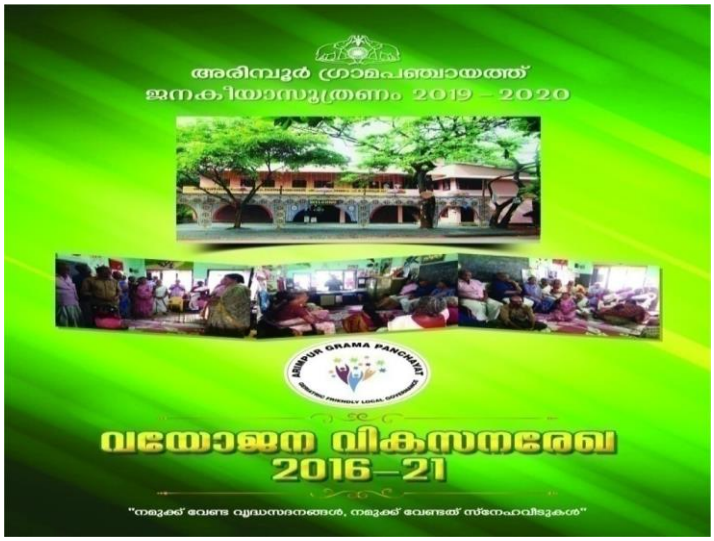
Primary Health Centre facilities

Intergenerational relationship building programme

Awareness classes on ageing is conducted for students at higher secondary schools and students are included in the anganwadi level senior citizens group activities.

Development report 2016 – 2021

The aims, goals and statistics of programmes relating to the aged are published as a booklet named Development Report onSenior Citizens. The details of senior citizens forums are also published. This may be the first of such initiatives in any panchayat in Kerala.



Book titled Development Report on Senior Citizens

Highlights of the programme

Most of the projects aimed at the welfare of the aged in general are either institutional arrangements or charitable assistance made available without their legitimate participation. The highlight of this project is that it is an initiative of the panchayat that provides space for inclusion of all sectors of the community and organisations. Through a participatory model, optimum utilisation of available public services such as anganwadis, health centres, Ayushand daycare centre for the aged have all been ensured with the help of community support.

Unique features

The Age-Friendly Local Governance of Arimbur is a comprehensive intervention programme for the aged with public-private participation • The land for the daycare centrewas acquired through public donations

- The building was constructed through joint efforts
- Senior citizens forum has been given prime importance at all levels
- It is an initiave of the Gram panchayat and functions under its strict guidance and monitoring

Participation of stakeholders and related institutions

Along with the GP, the following agencies are participants in the project either by contribution of funds or by direct service delivery.

District Panchayat Thrissur	Assistance for construction of daycare building
Block Panchayat Anthikkad	Medical check-up
Public	Purchase of land
SevaGramm Charitable society	Construction of building, contribution of furniture
Senior citizen Forum	Arimbur - Organisingof camps

Projects costs 2019 - 20

S. No	Source of Fund	Amount
1	Plan Fund	10,00,000
2	Own Fund	2,50,000
3	Public contribution (land)	10,00,000
	Total	**22,50,000**

Other aged friendly facilities

S. No	Year	Project name	Amount
1	2017- 18	Pakalveedu	2,34,101
2	,,	SCP - Mattress	92,339
3	2018- 19	PakalVeedu	6,22,667
4	,,	PakalVeedu	91,360
5	,,	General - Mattress	1,00,038
6	,,	SCP – Mattress	1,00,038
7	,,	Aged devices projects	46,834
8		For District Panchayat project (Aged)	50,000
9	2019–20	Pakalveedu	2,99,075
10	,,	Furniture for Pakalveedu	1,99,948
11	,,	Aged health and welfare projects	74,900
12	,,	Medical clinic and Medicine for the aged	45,275
		Total	**19,55,575**

Positive outcomes

A programme for the aged isusually meant for distribution of pensions, and so a comprehensive project had to be prepared. A need-based strategy had to be adopted in this case.

- Creating awareness among public and service functionaries about the issues of older persons was deemed to be an enduring process.
- Many philanthropic organisations and persons were ready to do meaningful public services, but often they did not have avenues.The Gram panchayat initiative for the aged gave them a chance to intervene in the sector.
- Senior citizens who had become dejected with life began to come up and act together and it paved the way for a joyful future for them.
- The concept of productive ageing gave older citizens enthusiasm to do something to earn, learn new skills and find self respecteven in old age. ***Beneficial features***
- The daycare centre or *pakalveedu* is open from 9am.
- Panchayat does the overall control; but a managing committee is constituted by the Gram panchayat.
- Public participation and contributionssupport birthday celebrations and other festival seasons.
- Doubts from anganwadi level forums and othersare addressed by a responsible member at the *pakalveedu.*

Reality Bytes

The experience of an 81-year oldwith two sons is evidence of the meaningful intervention by the panchayat. The land awarded to her by the governmentwas divided into three and two thirds of the share was given to her sons. She was living a lonely life in her small house as her

sons lived separately.The neighbourhood group members visited her and gave her all assistancein procuringrationsthroughthe Public Distribution System (PDS) and so on.As she was alone and helpless, a discussion was held with her sons, butin vain. Subsequently she was transferred to the government poor home for the aged, Thrissur. With the continuous persuasion of the seniors forum, her sons have now started visiting her at the home for the aged. She says,"It was not poverty that painedme, rather the neglect from my beloved ones."

The story of a 73-year old man is very different. He was an artisan earning wages till two years ago. He had reached a stage when hecould not work and earn. All his earnings were spenton the marriage of daughter, construction of house and so on. His wife and daughter who were staying with him started to continuously illtreat him, not allowing him to go out, visit friends or relatives. The mental trauma made him depressed. A visit by the forum members helped change his life. They talked to the wife and arranged counselling for them. The mental health community workers also visited them. They provided medicaladvice and medicines for him.His wife was convinced to change her attitude. As a result, the man's family life has become better.

Challenges

While it was understood that every ward needed daycarecum recreation facilities for its aged, finding land and resources to construct one was the real challenge.

- Multifacility centre exclusively for older women and widows – infrastructure and fund management
- Vocational unit for the aged - skill upgradation, income generation

- Daycare facility for older persons with dementia - counselling and guidance services
- Lack of suitable infrastructure at ward level for *pakalveedu* and forum meetings
- Health problems, family issues, transportation and personalised diets were problems and so there was lack of regularity in attendance among older persons
- Lack of a specific state-sponsored departmental programme for the aged

Solution

The creative involvement of the three-tier panchayat system and public contribution were effectively tapped to solve the challenges.

Recognition

Arimbur Gram Panchayat's success storyhas been widely recognised. It has been visited by many national delegations;officials from other panchayats; college students;interns and researchers as a case study for programmes for the elderly.

Sustainability

The programmes initiated in 2016 havehad a smoothprogress and the range of activities has increased over the period, which is a sure pointer to its sustainabilityas amodel. Any Gram panchayat in Kerala can replicate and carry forward this project.

Development seminar of the aged citizens

A 360-degree Vision

Karimba Gram Panchayat

Hitherto, measures aimed to help the aged hinged mainly on ensuring pensions and other welfare benefits. Karimba Gram Panchayatasset a sustainable model for other panchayats in designing aged friendly interventions. Its success lies in its dedication and vision to create a complete eco system for senior citizens that addresses every aspect of their well-being: health; economic status; lifestyle; physiological and psychological needs and above all their dignity

Karimba Gram Panchayat is a serene area lying at the foot of the Kalladikkode mountains and forms part of Palakkad District, under the operational territory of Mannarkkad Block and Taluk. The population is mainly engaged in agriculture namely paddy; rubber; coconut; plantain and other crops like pepper.

Salient features

Formation of the panchayat :	1964
Total area :	69.22 sq km
Population – (2001Census) :	25,448
Literacy :	92.68 per cent
Number of wards :	17
Forest area :	8 sq km
Neighbouring Gram panchayats	Kongad, Mundur, Thachampara

The background

Over the years, youngsters in the Panchayatave been migrating to different parts of the world seeking job opportunities. Naturally this has reflectedin

family life, with aged parents becoming isolated and left alone in their homes. This situation demanded special attention to be given to the old age people of the panchayat. Karimba Gram Panchayat administration took this as a priority issue. After many rounds of discussions and suggestions, they decided the formulation of an Aged Friendly Panchayat. A new era in this direction began in 2016.

Primary steps

Anganawadi workers were entrusted with conducting a survey among the elderly people in the Gram panchayat area. This data was used to enlighten the peopleof the panchayt about the health issues; economic status; life patterns; physiological and psychological issues of the aged. Based on the survey report, the panchayat designed a status report to cater to the needs of the senior citizens.

To provide more services to the needy among the aged, the panchayat organised a special Gram sabha for the elders at 10 schools and anganawadis in all the 17 wards. This was the entry point to access and understand the lives of the aged and their needs and provide necessary services.

Special Gram sabha of the aged

Hoardingsto spread awareness about geriatric services were displayed at all government institutions in the panchayat and public places.

Project initiation

Karimba Panchayat held meetings with Dr P K B Nair, Chairman, Centre for Gerontological Study, Thiruvananthapuram, for initiating this project. The centre conducts studies and lifelong learning programmes for people across their life spans. They also are engaged in partnership building with public and private institutions for extension services. Integrated medicine is the approach adopted by the centre. It is from this inspiration that an ayurvedic geriatric clinic was initiated in the panchayat. KILA also provided academic support on the subject through training programmesduring the year 2018-2019.

Survey reportsreceived from anganawadi workers; field reports from health workers; from SC colonies and other relevant ones concerned with senior citizens revealed that they were ailing from differentage-related diseases. So the panchayat decided to provide treatment solutionsto them. An ayurvedic geriatric clinic was thus started.

Implementation

1. Ayurvedic geriatric clinic

This project for senior citizens was started in 2016-17. The purpose was to give protection to the aged from various diseases like rheumatic arthritis; cold and fever, diabetes mellitus; depression and other psychological disorders. Initially ayurvedic medicines were given on all Tuesdays to the needy in the panchayat. Then, based on demand, it was increased to two days a week. Approximately 300 to 400 senior citizens in need of care enjoy this facility currently.

Ayurvedic geriatric clinic

Aakasaparava (sky birds) was an initiative by the Gram panchayat to provide accommodation and medical treatment to the elderly with mental disorders.

The panchayat instructed its utility centres to provide seating, and easy access to all public spaces in the area for the hassle-free movement of aged people.All five ayurvedic sub centres are open for the aged every Thursday, for consultation and for medicine distribution. Venues to conduct art and cultural programmesby the elders were organised in the hospital and anganwadisorroundings. Such programmes are being managed with sponsored funds.

1. Neighbourhood units for the aged

Aged women were organised and they would assemble once a week and engage in activities for mental relaxation and interactions with members of the young generation. Orientation classes were conducted by ayurvedic doctors in geriatric care and medicinal plant cultivation.

The neighbourhood units of the Kudumbashree Mission in the panchayat have initiated *snehitha* calling programmethat communicates with all the 118 aged women in the panchayat periodically to ensure their welfare and address their concerns. Issues raised would then be followed up by ADS, CDS and panchayat for further action.

The benefactors

Ahalya Foundation Palakkad, Assumption Hospital Kanjirapuzha and Lions Club, Palakkad, are some of the supporters and sponsors in providing eye care for the aged. They have also supported in offering cataract operations to those who need it. The Rotary Club has been providing food under the scheme *padheyam* to senior citizens in hospitals and during medical camps.

Special focus programmes

The Gram panchayat has put in efforts to collatepublic opinion to improvethe project. Based on the feedback,the following areashave been given focus.

- Economic status of the aged
- Health aspects of the aged with a special focus on those living alone
- Doorstep medicine delivery
- Palliative care
- Entertainment for senior citizens
- Old age counselling
- Friendly neighbourhoodscalled *vayosabhas*

Plan of action

The project implementation wasvisualised in stages.

Initial stage: As per the panchayat committee decision taken in 2016, the first stage consisted of a field survey; project planning;equipping the ayurveda hospital to respond to aged care, education and counselling programmes for the aged; special Gram sabha of senior citizens and daycare homes for the aged.

Daycare centre : The Gram panchayat initiated programmes for daily gatherings of the aged. Accordingly a daycare home was started for the aged with a view to helping them spend their time in a healthy and productive way. An average of 25 senior citizens attend the centre everyday. The centre works from 10 am to 5 pm. Community kitchen services of Kudumbashree Mission are beingutilised to providelunch to participants. The expensesare being met through sponsorships.

Palliative care

The attention of the Gram panchayat then turned to palliative care. Being a rural area, people were reluctant to accept palliative care services with an open mind at the initial stage. Out of 236 patients registered for palliative care, 93 were aged. Students and sponsors from various walks of society showed keen interest in the programme and they have provided support in different ways.

Pension coverage

The Gram panchayat listed out all eligible persons for pension and ensured timely distribution of pensions.As a result, the number of people getting old age pension increased from 198 in 2016-17 to 342 in 2020-2021.

Legal advisory committee

Realising the fact that the aged people faced loneliness and family abuse, Gram panchayat initiated a scheme to offer legal support to the needy. A

legal advisory committee was formed in 2016-17 with a view to giving legal support, protecting them from abuse by family members and property encroachers and conducting legal literacy classess.

Funding

2016-17	2017-18	2018-19	2019-20	2020-21
Rs 1,00,000	Rs 4,50,000	Rs 1,50,000	Rs 1,50,000	Rs 2,00,000

A majority of the programmes were carried out with public contribution.

Outcomes

Senior citizens of Karimbanow enjoy the love and care provided by the panchayat. The aged are also active in project planning and implementation. The leadership of senior citizens is very visible in the running of the ayurvedic geriatric clinic, palliative care and anganwadibased programmes.

Sustainability

The project has introduced a new dimension in development and has set a sustainable model for other panchayats in designing aged friendly interventions. The entire team of elected members of the Gram panchayat and general public have accepted its significance.

Memorable moment

In 2018, the Gram panchayat decided to go on a tour to Malampuzha Dam with the *vayosabha* club members comprising people aged between 60 to 85, having different health conditions. There were people who had not gone anywhere for more than 20 years and also people who could not move as they were bedridden and couldn't move withoutassistance.

They were very happy enjoying the beauty of nature, flowers and the other facilities at the site. While going to the top of the dam site, Kurumbiyamma aged 80 years, said that she was not going to the top, despite all the beauty that beckoned her.

She sat down on the pillar seat and told the Panchayat President, "My husband Unniyakkan,who is 85 years old, is alone at home. I am feeling guilty. He has not moved out of the house for 20 years. I cannot enjoy this without him, while he is sick and alone there." She kept weeping for nearly half an hour.

The GP President remembers, "I saluted her for her love for her husband. I hugged her and whispered that I would bring her husband too one day to this spot, so that they could both enjoy the dam site. Finally she agreed to come to the top. While walking along with Kurmbiyamma, the beauty of Malampuzhabecame clouded in my eyes and I realised that I too was weeping."

President, Karimba Gram Panchayat

Sunshine In Sunset Years

Mulanthuruthy Gram Panchayat

Reviving the laughter and restoring the dignity of senior citizens in their sunset years has been the foundation of the aged friendly campaign of Mulanthuruthy Gram Panchayat. In the process itgave a whole new direction to the concept of caring, sharing, bonding and engaging with the aged. It helped bring a new meaning, a bright, enduring ray of sunshine and happiness in their jaded lives.

Caring and sharing are the two key factors of old age. Today this has cccbecome a core area of social welfare and governance. Increasing life span is a byproduct of modern development especially in the sphere of science and technology. This challenge is to be addressed seriously by society and governments. Here lies the importance of agedfriendly activities. In the state of Kerala, Mulanthuruthy Gram Panchayat, having 16 wards in Ernakulam District, has played a leading a role in modelling itself as an aged friendly institution.

The factors which compelled the panchayat to study the problems of the aged and solve them in a phased manner were:

- Declining birth rate
- Declining death rate
- Higher life span
- Rise in the aged population
- Acceleration in the number of nuclear families
- Easy proneness to illness
- Possibility of abuse and violence
- Dependence rather than independence and interdependence

Preparatory work

The panchayat did the followingpreparatory arrangements as part of this initiative.

Survey

As a first step in this major initiative, the panchayat conducted a survey in the year 2015-16, in order to prepare a status report. The survey attempted to explore the real concernss of elders and their family backgrounds. The survey formats were designed by the Kudumbashree Mission.In the process of collecting information the contribution of the following segments of community was noteworthy.

- Elected members of the Gram panchayat
- Students
- Teachers
- Pensioners
- Members of CDS (Community Development Society)
- ASHA (Accredited Social Health Activist) workers

Out of the total population of 25,852 (female 13,143 and male 12,709), aged population constituted 6,400. This was 24.75 per cent of the total population, which wasmuch higher than the state average. The category-wise findings from the survey are listed below.

Category	Age	Female	Male	Total
	60-69	2,134	1,164	3,298
	70-79	940	1,023	1,963
	80-89	465	603	1,068
	90+	42	29	71
Total		**3,581**	**2,819**	**6,400**
Widow/widower		412	390	802
Differently abled		11	7	18
The aged living alone		285	189	474

Problems identified Physical

- Various illnesses including hypertension, diabetes, fatigue and others **Psychological**
- Fear
- Sadness
- Negligence
- Anxiety**Financial**
- Lack of income or low income **Social**
- Loneliness
- Lack of recreation and entertainment

Activities

A. Gram sabha of the aged

Special Gramsabha meetings were convened exclusively for the aged at the panchayat level, twicea year. Almost all the senior citizens participated. They discussed issues raised by the participants. The officers who participated in the meeting (especially ICDS) paid attention to the concerns that were raised. All discussions of the meetings were documented in the minutes of the event. The development seminar, standing committee and the panchayat committee gave sufficient focus to these issues and implemented them.Their attempts to solve some issues immediately enhanced the confidence of the aged.

B. Neighbourhood committees

For the smooth functioning of the programme, the following committees were formed at the ward and panchayat levels.

a 118 neighbourhood committees were formed exclusively for the aged.

b Ward-level committees were formed based on the Area Development Society(ADS) model of the Kudumbashree Mission.

c Panchayat-level committees were formed based on the CDS model.

Formation of 118 NHGs exclusively for the aged in various wards of the panchayat was an effective step in the direction of agedfriendliness. The decisions of the NHGs were forwarded to the ward-level committee of the aged, and then to the panchayat-level committee of the aged. This systematic channelisation was a successful activity in translating the proposals into reality.

C. Camps, classes and workshops

Counselling camps and awareness classes were held on the rights and responsibilities of the aged. Workshops on legal aid and protection against various assaults on the aged were also held to raise awareness.Awareness camps focused on the following.

- National Old Age Policy Of India (1999)
- National policy on older persons (1999 &2011)
- Sustainable development goals and action plan for the aged by the WHO (2016)
- The Indian Constitution (Especially article 41)
- Declaration of rights and 18 principles approved by WHO (1991)
- State policy on the aged issued vide GO(ms) 37/2013/SJD/06.05.2013
- Maintenance and Welfare of Parents and Senior Citizens of India Act (2007)
- International network for the prevention of abuse of the aged(2006)

Awareness campaigns

The following centrally sponsored schemes for senior citizens were also introduced:

- Oldage home (integrated programme for elder people) - grant for registered voluntary organisations to conduct old age home for 25 inmates
- Daycare for the alzheimers-affected senior citizens – grant for recognised voluntary organisations to conduct a centre for alzheimers patients.
- Prime Ministers Bhima Suraksha Yojana (PMSBY) – Accident death insurance up to Rs 2 lakh, with annual premium Rs. 12/- through SB accounts

- National Programme for Health and Care of Elders – special medical attention for elders and geriatric wards in district hospitals
- Deaddiction centres – grant to recognised voluntary organisations for conducting such centres
- P M Kisan Yojana – A pension scheme implemented through LIC for the welfare of farmers. A fixed amount is invested by farmers at the age of 1840 up to the age of 60. After 60 months, a monthly pension of Rs 3,000 is admissible, upto death.

Special medical camps

Special medical camps were conducted led by senior doctors in all systems of medicine. Special eye treatment,free surgery for cataract, free supply of spectacles wereall provided. Special detection camps were conducted for the treatment of cancer and other lifestyle diseases.

Top priority

- Senior citizens were included in the planning process as working group members.
- Elder persons were given priority in all the services of health centresand other institutions of the panchayat.
- Separate queue system was arranged for senior citizens in all institutions of the panchayat.
- Senior citizens were given special consideration (service without queue) in government institutions, as instructed vide circular number C2/155/2019/ SJD/06.06.2019.
- Ramps were provided in all offices and institutions for easy access of senior citizens and differently abled persons.

Innovative programmes

i) *Hrudyarogyam* (Healthy heart)

Medical care at home for senior citizens was ensured.1,628 persons were identified as victims of lifestyle diseases and they were referred to the medical officer.

ii) *Alivu*(Kindness)

Free dialysis for kidney patients was offered.

iii) *Snehasanjeevani*

All senior citizens were provided glucometres, free of cost.

iv. Calling bell

It is a one-button hotline for urgent help for elders living alone.

v. Safetyalarm

It is a one-button hotline for police and ambulance for elders in a dangerous crisis.

vi. Joint meetings of bala sabha and elders

Meetings between children and the elders in the panchayat created excellent opportunities for bonding, affection and respect. It played a dominant role in filling the generation gap. It helped entrench the message in children that parents were not disposable like disposable pens.

vii) 3G welfare centre

It is a comfortable abode that has been visualised and implemented in three cents of land owned by the panchayat. A two-storey building with an area of 7500 sq ft was constructed as an intergenerational meeting place. One portion on the ground floorknown as *santhwanabhavanam*(home of solace)

was allotted to senior citizens. The remaining portion of the ground floor was allotted for children uptothree years. The first floor wasallotedto teenagers.

This building was constructed utilising one crorerupees from the local MLA fund of Sri. Anoop Jacob and was inaugurated by the MLA in May 2020. It is a daycare home for senior citizens. Nursing care; doctor on call; food and accommodation;entertainment (newspaper, journals, television, board games) are included in the services provided.

3G welfare centre

Other programmes

i. Health and fitness

- Homoeo medical camps
- Ayurveda medical camps
- Eye care clinics
- Palliative care,including home care for bedridden senior citizens
- Physiotherapy unit with modern equipments
- Services of two therapists

- Medical attention every day of the week
- Pakalveedu : Daycare centre with all facilities for the elder persons in ward no 6.

ii. Income generation

Several micro enterprise units were formed as joint liability groups. Members were assured labour and income in the sectors of agriculture, fisheries,animal husbandry and aqua pets. Some units undertook production and distribution of LED bulbs; candles; soap; chips; pickles and curry powder. A lottery ticket outlet, tea shop and tailoring unit were the other units that were started as part of ensuring income and dignity for senior citizens .

iii. Cultural programmes

a *Vayojana* Day : It is observed as a special day,with entertainment and competitions,for honoring the senior citizens.

b *Vayojana Varshikam* : It is celebrated in panchayat level as the annual day of the aged.

c World Elder Abuse Awareness Day:It is observed every year on June, 15. The various occasions for celebration have created memorable moments of jubilation in the life of elders. Apart from the New Year get-together, religious festivals also became venues forjoy and rejoicing for elders. These celebrations helped bonding between people to sow the seeds of communal harmony.

d Picnics:One-day trips to tourist centres are being conducted occasionally which have included visits to the Mattancherry Palace and Thrissur Museum, boating in the backwaters of Kochi, a trip in the Kochi Metro Rail, a visit to the beaches of Fort Kochi and Munambam

Sources of funds (Rs)

Own fund	1,00,000
Development fund	14,16,700 (5 per cent of budget)
Voluntary contributions	2,00,000
NRLP - Pilot	1,50,00,000 (Total outlay for Edakakttuvayal, Mulanthuruthy, Chavara, Needakkara and Thekkumbagam Gram panchayats)
MLA fund	1,00,00,000

Appreciation

Delegates fromUSA,Delhi, East Godavari and Karnataka have visited the Gram panchayat to learn from the aged friendly initiatives of the panchayat and implement it in their territories. Many study teams have heaped praise on the activities of the senior citizens neighbourhood groups.

Mulanthuruthy Gram Panchayat was chosen as the second best Gram panchayat in the state for the Swaraj Trophy instituted by the government. This was the third consecutive time that the panchayat had had the honour of winning the second place. It is the first panchayat in the state to achieve this feat.

The award was given to the panchayat for activities conducted during the financial year 2018-19, for leading development activities in the areas of aged friendly initiatives and palliative care. Sri. Renji Kurian Kollinal, President, Mulanthuruthy Gram Panchayat, was selected for the Prathibha Award. (year)

The budget document of the Government of Kerala for 2019-20 which was published,carried on its cover a photo featuring the aged friendly activities

of Mulanthuruthy Gram Panchayat. This was indeed a great recognition and honourfor the Gram panchayat.

Results

These initiatives by the panchayat yielded many beneficial results which are summarised as follows:

- Ensured pleasure and peace in the family life of senior citizens
- Found solutions to small disputes, through consensus
- Arranged for micro-loans without surety, through NHGs for income generation
- Created common platforms for get-togethers and recreation
- Inculcated respect and responsibility in youth towards parents and elders
- Helped lower the number of abandoned parents
- Started 42 micro enterprises for the aged
- Reduced dependency on hospitals for 108 aged diabetic patients who were provided glucometers to measure the level of glucose themselves
- Provided free dialysis for nine elder kidney patients
- Utilised the experience and wisdom of elders by roping in18 retired officers to share their knowledge and experience for local development
- Built the *pakalveedu* where 32 senior citizens spend their day time meaningfully
- Helped decrease medical expenditure
- Ensured old age pension for 5,811 beneficiaries
- Also ensured2,281widow pensions, 844 disability pensions, 1,783 agricultural workers pension, 209 pensions for unmarried women above 50.

Leadership of the aged

Several factors played a pivotal role in achieving the above results. Among them the involvement and leadership of the aged is remarkable. Some factors that contributed to the success of the programme are shown below.

- Active participation in the survey and accurate analysis of problems
- Involvement in awareness camps
- Sincere intervention in planning and monitoring activities

Miles to go

While the panchayat has made great headway in its aged friendly campaign, a lot more needs to be done to achieve the goal it has set out for itself. There are many challenges that need to be addressed.

- Panchayat level old age policy is yet to be designed and declared.
- Some more details relating to the senior citizens and their families are to be gathered in order to accelerate comprehensive welfare measures.
- In the translation of dreams into reality Covid-19 played a detrimental role.
- Lack of an activity calendar and the absence of an effective monitoring system havedelayed the completion of the project.
- The resolution of the Gram panchayat to declare Mulanthuruthy as agedfriendly panchayat is yet to be approved by the Government of Kerala

Touching experiences

i.A senior NHG of ward no4 of Mulanthuruthy Gram Panchayat shared his experience, "It is the story of commendable endeavors for four years by the 15 members. All members worked together as a family. Majority

of the members are ordinary people, BPL family members and SC family members. This group saved me from solitude and stress. My sorrows disappearedafter the caring and sharing I experienced with my peers in the panchayat". ii.Income generating enterprises run with small loans released several elders from total financial dependency.NHG members could work as help desks. They helped many people in writing applications. They could solve many disputes among the people, by way of consensus. iii.Sharing of local knowledge was an interesting experience . NHG members forgot the feeling of loneliness. They cooked and ate jointly and shared the taste of unity. Together theycelebrated special occasions like onam; christmas; bakrid; birth and marriage anniversaries of members and the New Year. These gatherings of bonhomie regained for them, love lost in their families. In factthe association with peers made the second childhood of these elder NHGs more colourful and fulfilling.

Home of solace and sustenance

Thuneri Block Panchayat

The changing demographics of ageing in Kerala has posed stiff challenges in administration and governance. The interventions under the national policy for the aged were hardly visible at the local level, which made a compelling case for a local administration like Thuneri Block Panchayat to seize the initiative. What followed was a systematic and scientific rehabilitation process to transform into an aged friendly place, a true home of solace for senior citizensleft alone in the evening of their lives

The State Government has initiated several programmes under the Department of Social Justice such as *Sayamprabha* and *Vayomithram*but they

have not been sufficient to address the local issues of senior citizens. The Panchayati Raj institutions are empowered to deal with issues related to social justice including those of the aged through decentralised planning. To enable the LSGs, KILA initiated a significant programme called AgedFriendly Local Governance, along with standards and procedures. However, this was generally confined to Gram panchayats and there were suggestions to extend it to higher levels at block and district panchayat levels for better coordination and convergence.

The social and demographic challenges of ageing in Kerala are almost the same as everywhere such as health; economic challenges; care and emotional issues including loneliness. Since the aged are a better informed group, many of the challenges they facedcould be solved through their own joint efforts with the effective interface of local governments.

Block panchayats: aged centric governance

Under the Kerala Panchayat Raj Act, a block panchayat is the middle layer of the three-tier system, with defined roles and responsibilities. The middle level offices such as CHC, ST and SC development office, ICDS project office and others are transferred to the administration of the block panchayat, along with their functions and functionaries. So it is easy for the block panchayats to coordinate and integrate various activities for the development of the aged due to the following structural features.

- The anganwadis - local point of social services which are supervised through ICDS functionaries under block panchayats
- CHCs where palliative care services and NCD clinics operate, are under the supervision of block panchayats
- SC/ST development activities which are focused in the block panchayats

- Extension services that are mostly vested with the block panchayats
- Effective project convergence. This is ensured by making it mandatory for the presidents of Gram panchayats to attend the Gram sabhas of the block panchayats as well as development seminars organised bythem in order to ensure effective interface between the Gram panchayats and block panchayats.

Understanding these opportunites, Thunery Block Panchayat charted out its programmes to become an Aged Friendly Block Panchayat.

Profile of the panchayat

Thuneri Block Panchayat is located in Vadakara Taluk, Kozhikode District, in the State of Kerala, with an area of 164.41 sq km. The total population as per the 2011 census is 1,86,114 (males-86,797, females-99,317). The block panchayat was established in 1959. On April 1, 1961, the office was shifted to its own building. With the enactment of the Panchayati Raj Act in1994, Thuneri Block Panchayat became a constitutional body. The block consists of Nadapuram; Thuneri; Purameri; Edachery; Valayam;Vanimel and ChekyadGram Panchayats.There are 116 Gram panchayat wards and 13 block panchayat divisions and 4 district panchayat divisions. Valayam,Vanimel and Chekkad Gram Panchayats are in hilly areas. Tribals, farmers and labourers constitute a significant segment of the population. The block is rurban in complexion.

GP-wise data of the aged

Panchayats under Thuneri Block	Population			SC			ST		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Vanimel	12,300	13,112	25,412	76	59	135	616	579	1,195

Valayam	4,136	9,575	18,374	113	113	226	111	115	115
Purameri	8,798	14,869	27,612	250	280	530	23	20	43
Chekyad	12,743	13,052	24256	163	140	303	112	108	220
Thuneri	11,194	12,728	23,421	179	173	352	13	18	31
Edacheri	10,693	14,451	26,819	267	274	541	21	21	55
Nadapuram	12,368	21,530	40,230	278	278	294	39	34	74
Total	86,797	99,317	1,86,114	1,326	1,333	2,659	935	908	1,843

First phase

The ageing policy was announced in the world and India followed suit as the abuse and neglect faced by the elderly had been on the rise. However, the benefits of such policies were not visible at the local level. Due to social changes in several families, aged parents were left alone at home and were unable to even meet their basic needs in the absence of their children who migrated to work in distant places. The block panchayat tried to intervene but the local government was unable to offer any direct service and so, many aged people had to be admitted to old age homes conducted by NGOs. ThusThunery Block Panchayat took a decision to formulate an ageing policy at the block level in 2011. As part of this, decision was taken to conduct the first phase of a geriatric status study.

Survey of the aged

Prior to the policy announcement, a survey was conducted in all the seven Gram panchayats in the block panchayat area and detailed information was collected from all the households of the elderly. For this, 232 enumerators, 116 observers and 7 panchayat coordinators were selected from 116 wards. Block level coordinators and a 21-member block level resource group were selected and trained under the guidance of the KILA resource team.

Status of the aged in Thunery

Sl. No	Gram panchayat	Ward	Population	Elderly people	Percentage
1	Edachery	17	25,412	3,607	14.4
2	Purameri	17	18,374	3,534	13.5
3	Thuneri	15	27,612	2,789	12.8
4	Nadapuram	22	24,246	4,332	11.4
5	Valayam	14	23,421	2,322	10.2
6	Vanimel	16	26,819	2,617	11.2
7	Chekyad	15	40,230	2,402	11.0
	Total	**116**	**1,86,114**	**21,603**	**11.6**

Based on this, evaluation meetings and clinics were organised. On October 1, 2012, Thuneri Block Panchayat announced its ageing policy.Following the release of the revised 2013 policy, the block panchayat has been working till date with an emphasis on making the block aged-friendly.11.6%(21,603) of the population of Thuneri Block Panchayat is elderly (males -9,838, females-11,775).

Age 60 to 70	14,814
Age 71 to 80	5,044
Age 81 to 90	1,552
90+	193
Males who live alone	70
Females who live alone	367
Widowers	570
Widows	7,185

Action plan

1. Special Gram sabhas

The basis for the success of aged friendly activities in Thuneri Block Panchayat is the comprehensive and scientific planning process that was undertaken. Elder friendly projects were planned by collecting the views of seniors at various levels. Special Gram **Reality Bytes** sabhas of the elderly were convened at the ward level in each panchayat for this purpose.Elderly neighbourhood councils carried out preparations for this. Awareness training in the Gram sabha was conducted by the trainer of the *vayojanasabha*. KILA provided training and support to the trainers of the elders council and organised a special development seminar based on suggestions from the Gram sabha and collected suggestions for the project. The project proposals were discussed by categorising the needs of the elderly into four thematic groups and the resource person deputed by KILA led the discussions. These proposals

Special Gram sabha of the aged

were codified and considered for the formulation of the block panchayat plans. Apart from this, the organising committees of the various levels of

the elders council also discussed and submitted proposals through the block level committee of the council.These proposals were discussed by the block panchayat steering committee and the block level committee of the elderly council and handed over for the block panchayat planning process.The block level special working group converted the project proposals into action on a priority basis.

2. Special working group

The block panchayat set up a special working group for the elderly. This was the first time in Kerala that a special working group for the elderly was setup. This working group was effective in all the activities of the aged people. It was responsible for all the planning and execution of the project. In this way, effective planning and implementation of the aged-centric schemes was possible through the coordination of various systems. In addition to the Department of Health, the support and assistance of KILA and several voluntary organisations and individuals were ensured. The advances madeby the agedfriendly project was thus the result of extensive participation and scientific planning.

Forums for the aged

Following forums were organised in connection with the Aged Friendly Block initiative.

Neighbourhood elderly council	384
Ward level elderly council	116
Gram panchayat level elderly council	7

To coordinate all these units, a 36-member block level elders council was formed.

Grassroots level NHGs were formed in all seven Gram panchayats at the anganwadi level. At ward level these NHGs were coordinated by the ward level elderly council. At the Gram panchayat level an apex council was formed. A 21- member resource team was formed under the auspices of the social welfare standing committee. Prior to the formation of the senior citizens club, a co-coordinating committee of the elderly and a block level executive committee were formed. On October 1, 2012, the block panchayat adopted and announced the aged policy for Thunery.

The general body of seven *vayojanasabha*s(senior citizens councils) at GP level was held under the leadership of the Thunery Block Panchayat and resolved to form a society named *sayoojyam vayojanasabha* for the coordination, management and resource mobilisation for the activities in connection with the welfare of the aged. This was registered under the Charitable Societies Act. All donations and contributions were deposited ina bank account maintained in the name of the chairman, secretary and treasurer.

Members of *Sayoojyam vayojanasabha*

- All the GP presidents and standing committee chairpersons
- All the elected representatives of the block panchayat
- Local MP and MLA
- District panchayat members representing the block panchayat areas
- Secretary, block panchayat
- Medical Officer, CHC
- CDPO
- SC Development Officer
- Tribal Extension Officer
- Two senior citizens each nominated from all the GP level *vayojanasabhas*

- Station Head of the local police station
- The caretaker of the *Sayoojyam Bhavan* geriatric centre **Executive committee**
- Block Panchayat President - Chairperson
- Welfare standing committee Chairperson of the block panchayat - Vice chairperson
- Block Panchayat Secretary – Secretary
- Presidents of all GPs – seven members
- Welfare standing committe chairpersons of all GPs -seven members
- A non official elected by the general body as treasurer
- Medical Officer and CDPO - ex officio members
- One senior citizen representing each GP level sabha - seven members
- Caretaker of *Sayoojyam Bhavan* – member

Objectives of *Sayoojyam*

1. To realise the rights of the aged through local initiatives
2. Ensure smooth working of the senior citizens forums in all GPs and support their activities
3. Manage *Sayoojyam Bhavan*;offer legal assistance; take care of library and convention hall facilities and coordinate palliative care services
4. Conduct classes for upholding the rights and dignity of the aged

Implementation of the scheme was done with special consideration for the financially backward and isolated. The sabha has 12,483 members. The various activities of the sabha are coordinated by the block level, GP level, ward level, and neighbourhood level organisational setups. Assistance was also received from voluntary organisations.

Geriatric Service Centre

Permanent retirement centres were established to address the inadequacy of communications and other services required by the elders in the block area. The daily management of the *VayojanaSevaKendram* (Geriatric centre) was entrusted to the *Sayoojyamvayojanasabha*.

A geriatric leisure centre was set up in the block panchayat compound itself. A library with 3,000 books; TV; a carrom board; drinking water and snacks was set up. A staff was hired for this on a contract basis.

Anganwadis having land facilities were selected for setting up five elder cum-child friendly centres in four panchayats. The construction of two centres has been completed and three centres are under construction.

Diagnostic camps

Lack of timely health checkup is a common problem faced by the elderly. To this end, four major diagnostic camps were conducted at all the panchayats in the block. A comprehensive kidney disease diagnosis camp, a comprehensive cancer diagnosis camp, a diabetic retinopathy detection camp and homoeo medical camps were conducted to ensure comprehensive diagnostic services for the aged.

Yoga training camps and free medicine distribution programmes were organised for 1,500 elderly people diagnosed with acute illnesses. A legal aid committee was formed to provide legal assistance to the elderly.

Sayoojyamvayojanasabha

Steps were taken to make all hospitals and government offices within the block geriatric friendly and volunteers were mobilised for geriatric services at the ward level. Geriatric centresincreasingly became entertainment venues for the elders. Elderly people were ready to open up and share their problems.A yoga training programme which was introduced, became a huge success. *Sayoojyamvayojanasabha*organises art competitions, distribution of aids and medical devices.

The services of Asha workers, Kudumbashree workers and pensioners were made available for geriatric care permanently. Kozhikode Medical College;the District Hospital;Nadapuram Taluk Hospital; various PHCs and the Malabar Cancer Society provided support to the medical camps by providing services of doctors, health workers and Asha workers.

KILA was the key partner in enabling the success of the agedfriendly activities at this level. These apart,450 NSS volunteers were also trained in 2019 with the support of KILA.

One crore rupees was spent for the construction of various buildings. The district panchayat provided Rs 15 lakh. Five panchayats set apart Rs15 lakh each for the geriatric centres. Funds for diabetic retinopathy were sponsored by various volunteer organisations. The block panchayat set apart Rs25 lakh for medical camps and yoga training and for distribution of medicines.

A geriatric clinic

Yoga class for the aged

Fund allocation Amount (Rs)

Ageing policy initiation activities	3,26,000
Construction of geriatric service cum recreation centre(including a recreation centre)	45,44,500
Geriatric services (including geriatric ward, clinical equipment)	36,10,264
Cancer diagnosis camps and follow up	11,50,000
Kidney ailment diagnosis camp	1,70,000
Distribution of beds for the elderly	7,50,000
Construction of geriatric and child centres	25,00,000
Distribution of medicines	13,50,000
Wages of temporary employees	84,000 (1year)
Total	**144,84,764**

In addition to Rs 1,44,84,764, several lakhsof rupees have been mobilised as donations for various agedfriendly activities including the setting up of the geriatric service centre.

Stakeholders

The Kozhikode District Panchaya; seven Gram panchayats; the pensioners forum; *Sayoojyam* Elderly Council; Kozhikode Medical College; Malabar Cancer Society; various health institutions; educational institutions; NSS units; KILA and others have been the major stakeholders in the programme.

An exemplary model

To sustain the achievements of Thuneri Block Panchayat in aged friendly activities, the following suggestions have been given.

- Coordination should be strengthened at the Gram panchayat level.
- Increased public participation at the ward and neighbourhood levels is needed.
- Guidelines should include more favourable suggestions for elder-centric programmes.
- Plan allocation and mobilisation of public resources should be increased.
- There should be a special working group for planning, implementing and monitoring geriatric services and related activities.

Awards and recognitions

It was an honor for the block panchayat to be given many forums to present its aged-friendly programmes at the state seminars held at Thiruvananthapuram and Thrissur with the support of KILA. This model has been included in the training modules of KILA.

Reality check

In a discussion at the meeting of the sayoojyamseniors forum of the Thunery Block, some of the members shared very different issues faced by the aged in families. A silent looking senior citizen, well respected in the community, stood up to express his grievance. He had two sons and a daughter, married and well settled. He was a widower who was living with his daughter and was always seemingly happy. When he stood up to speak, all the participants were eager to hear him but he just couldn't say what he wanted to. Something seemed to hold him back. The chairman of the panchayat forum felt that something was bothering him. After the meeting the chairman and some senior members talked to him in private. He then revealed his problem.

He was 75 and his sons were working and residing in the middle east. His daughter was married and had a son. Under the circumstances he transferred his property in her name. Everything was smooth until she fell in love with another man and thenmarried him. After the marriage, because of pressure from her husband she began to neglect him and even denied him food. His sons also refused to take care of him as he had given the entire property to his daughter. He had been suffering the abuse silently.

The forum tried to help by approaching the village officer and other officials, but in vain. So theymet his daughter and husbandand toldthem that they were taking up the case with the District Collector under MWPS Act and thereby the house and whole land would have to betransferred back to him. Understanding the gravity of the problem they agreed to look after him with due care. The old man had never wished to abandon his daughter and was very happy withthe settlement.

4
DIFFERENTLY ABLED FRIENDLY LOCAL GOVERNANCE

Transforming Lives

Kodur Gram Panchyat

Kodur Gram Panchayat, with many firsts to its credit in people's planning initiatives, set yet another benchmark through its differently abled friendly project. The far-reaching impact of therehabilitation programme,which incorporated many new components,disrupted existing norms and helped transform the lives of those with mental disabilities and their families

Kodur is one of the best performing Gram panchayats of Kerala in Malappuram District. It is located five kilometres away from the Malapuram Collectorate. The panchayat office is situated at Thannickal, adjacent to the Kulathur-Malapuram road. The Kadalundi river makes this land fertile and so agriculture is a part of life.

The panchayat was a pioneer inthe literacy campaign and has 10 schools. However the mentally challenged children stayed out of school, and, being justa meagre 0.05 per cent of the child population,never became anyone's concern. The BUDS initiative started in the year 2010 paved the way for the panchayat committee to enthusiastically evolve a programmefor the mentally challenged.

Area	18.42km.
No. of wards	19
No. of schools	13
No. of AWC	30
Population Male	21,627
Female	23,832
Child sex ratio	967 girls (for 1000 boys)
Literacy	93.36%
Differently abled males	247
Differently abled females	166

The people's plan under decentralised planning in Kerala acknowledged this initiative and gave permission for willing LSGs to initiate local specific, data-based plan and programmes for differently abled, specifically for providing medical aid and appliances, scholarships and stipends, starting of BUDS schools for mentally challenged and so on. In addition to this, the Gram panchayat made its efforts to further widen the scope by bringing in new components to explore the means and ways for comprehensive differently abled friendly initiatives.

Data of differentlly abled

Age group Category	**0-14**		**15-45**		**46 +**	
	M	**F**	**M**	**F**	**M**	**F**
OH	9	8	36	28	30	25
VI	6	2	12	8	12	10
HI	15	6	23	8	18	12
MR	6	4	15	9	-	-

CP	4	6	12	6	3	2
MD	2	2	24	20	30	10
Others	42	28	122	79	83	59

BUDS School

A meeting of parents, children and relevant stakeholders were called for by the panchayat in an old school building near the panchayat. Most of the panchayat members attended. Some of the stakeholders were seeing special children for the first time. The mothers were exhausted trying tomanage the children in front of the respected guests gathered. Some motherscame forward and requested that a centreshould be established for those children. Some wanted a school, one parentwanted a vocational unit, one wanted a therapy centre and another medical assistance. The panchayat did not have enough resources to meet their requests. Shortage of built up space was the major impediment and the vice president requested a local private school management to consider the cause sympathetically and provide a hall in the school to initiate a centre. They obliged and it was decided to start a BUDS school under the control of the Gram panchayat in Kodur in the school premises. This meeting paved the way for a great beginning.

The school was opened on September 17,2011, with 20 differently abled children. Only children from nearby houses were able to get to school on their own. The panchayat collected some furniture through public contributions. Two staff were posted initially and later two qualified teachers were appointed.

Within six months, the number of beneficiaries increased to 40 out of which 15 were girls. In the beginning a separate girls' toilet was not provided and that became a problem. The panchayat initiated immediate work on

construction of a bathroom and toilet. Separate pathways with railings had to be provided. As the landed property belonged to a private party,construction could bebe done only with public contributionswhich turned out be a hard task for the managing committee under the president.

In 2012, the BUDS school got recognition from the Education Department (PWD Act) and the Kudumbashree Mission donated a mini bus to the school. The panchayat budgeted for Rs 12 lakh during 2013-14 for the running of the school, Kudumbashree sanctioned Rs 9 lakh for starting a vocational unit for purchasing equipment, furniture and so on. The school allotted one more room for this. As transportation became available and the vocational programme got under way, the number of studentsalso grew. A new building for the school is currently under construction. 40 cents of land was acquired for the building at Koottamala in the panchayat.At the same time, the demand for a school for the adult mentally challenged remained an unresolved problem. The mothers were constantly requesting the panchayat to take care of them during school time.

Programme objectives

The programme has a comprehensive vision as stated below:

- Helping families with mentally challenged persons
- Sensitising people, along with prevention and early identification of disability and adequate guidance
- Special education and care for the mentally challenged
- Training for mothers in craft and other work to make themearning members
- Training the mentally challenged
- Construction of building for acentre for the mentally challenged
- Support general education and employment of mentally challenged

- Establish a daycare for mentally challenged adults with severe disabilities

Syllabus and lesson plan

Functional assessment check list for (FACP of NIMH) with modified curriculum by SCERT is followed.

- Adaptation for daily living
- Motor skills training through games and therapy
- Language skills – communication
- Numerical skills - arithmetic
- Environmental science
- Vocational attitude
- Home making skills
- Quartely performance assessment

Details of beneficiaries with classification

S. No	Category	2017 -18			2018-19			2019-20		
		M	F	T	M	F	T	M	F	T
1	Intellectual disability	29	22	51	29	22	51	29	25	54
2	CP	5	4	9	5	4	9	4	2	6
3	Autism	-	-	-	-	-	-	-	-	-
4	MD	-	1	1	-	1	1	3	2	5
5	Others	5	4	9	5	4	9	4	1	5
	Total	39	31	70	39	31	70	40	30	70

Level of differential ability of students in BUDS School

S. No	Level	2018 -19			Grouping
		M	F	T	
1	Mild	2	3	5	Special academic level
2	Moderate	6	17	23	Pre vocational level
3	Profound	4	3	7	Care group
4	Secure	24	11	35	
5	Total	36	34	70	

Services for differently abled in 2019 -20

S. No	Types of services	No. of beneficiaries		
		M	F	T
1	Care group	4	1	5
2	Pre primary	7	6	13
3	Primary	5	6	11
4	Secondary	8	7	15
5	Prevocational	5	5	10

BUDS school is a centre of activities of differently abled friendly Kodur. The schedule of activities of BUDS School is given below.

Events	Time
School opening	9 am
First bell	9.45 am
School assembly	10 am
Breakfast	10.15
Class time	10.30 to 1 pm

Interval time	30 m
Noon meal	1 to 2 pm
Activities	2 to 3 pm
Preparation for back-to-home	3 to 3.30 pm
School bus time	3.30 to 5 pm
School records and activities of staff	1.30 to 4 pm

The School bus starts at 8.30 am in the morning and returns at 3.30 pm in the evening. One staff member accompanies students on a rotation basis as staff in charge of the vehicle. One bus and an Omini van are available in the school.

Project components

1.Breakfast : All children who are attending the school in the morning session are given tea and snacks or biscuits. Staff and mothers accompanying students in the school are also served tea and snacks. On most of the occasions,snacks are the contribution of local merchants who supply this on a rotation basis.

Training-cum-production unit

The number of income generation activities are provided based on the proficiency of children, availability of trainers and feasibility of marketing.

i. **Umbrella making :** Umbrella manufacture is conducted during April-May. Umbrellasare branded and marketed through school stores, shopping centres and directly to homes. 10 students are engaged in this activity. Some could stitch, others could fix the handles and so on. Mothers also have also been participating in this process.

ii. **Cotton doormats** :Doormats are being manufactured based on the availability of artisans for training. The machinery for sewing is arranged in the unit. The expertise of trainers are used in design creation. Profit is shared between the working trainees.

iii. **iii. Craft projects** : Paper pens; fancy ornaments; greeting cards; paper cups and soap manufacturing are also arranged as supplementary activities of the unit.

iv. **Catering unit**: Chapati and *pathiri* making machines and accessory equipment have been made available at the centre. Some trainees have proved to be very good at this work. The school cook and technical experts were hired to impart training.

Mothers of two special neighborhood groups were working as part of BUDS school. Micro finance and micro credit were utilised by them. Some mothers have been engaged in micro enterprises including manufacturing and marketing of household goods and garments.

Multiservice centre

BUDS School has been functioning as a multiservice centre.

Physiotherapy unit: The unit of the school provides services to other differenlty abled children studying in public schools and young children with disabilities.

Guidance and information: All parents are entitled to utilise the guidance, information and assistance of the centre on disability-related issues. Thus the BUDS School functions as a resource centre for the differently abled.

Sports :The school participates in all the district level events for differently abled people organised by government departments and NGOs. Students are trained for the purpose.

Early detection services

The Primary Health Centre,Thannickal, and anganawadi centres jointly conduct early detection of developmental delays of children below two years, annually. The Asha workers conduct surveys periodically while the primary health centre conducts detection tests for disability in children.

Various developmental activities

A gathering

Developmental significance

The BUDS School in Kodur Gram Panchayat has become the hubfor comprehensive disability development programmes in the panchayat. The GP has made use of the school as a service delivery centre for both differenlty abled persons and families.This was the result of the realisation thatwithout addressing the problems faced by the families affected by disability the wellbeing of those differently abled cannot be improved. In the discussions with family and mothers their needs were identified by the Gram panchayat.

- Medical and therapy support
- Income generation and financial support
- Income generation both for poor mothers and the people with disability
- Knowledge dissemination and intellectual support
- Information and guidance services on a continuous basis
- Attractive physical infrastructure at BUDS School
- Self support groups to ensure a dignified life

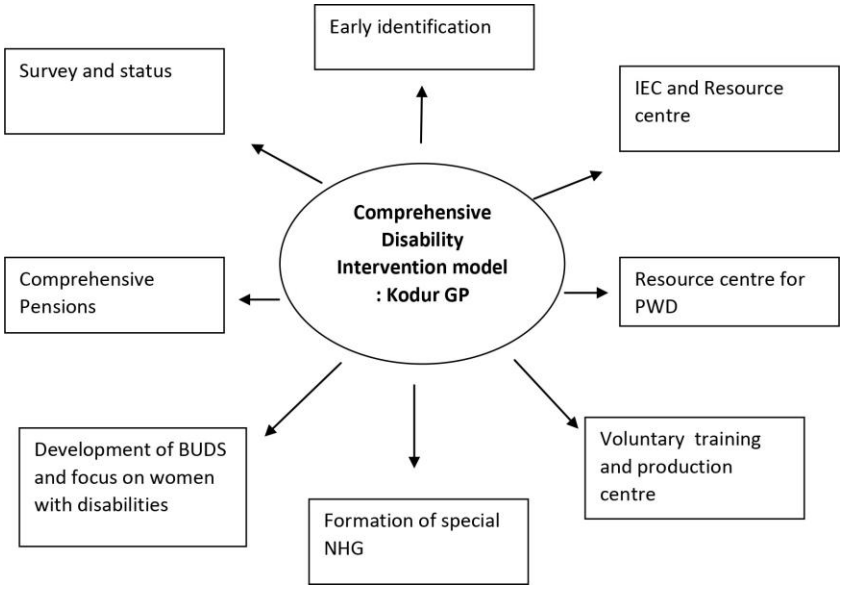
Stakeholder participation

Even though the Gram panchayat spends about Rs 20 lakh for the BUDS School per year, this alone has not been not sufficient to meet the project objectives. Hence the support of the following partners has been very siginificant in this mission.

- Department of General Education – curriculum, training, noon meal and grant in aid
- Kudumbashree – occasional non recurring assistance for vehicles; VTC; building and NHG and branding of products
- District panchayat – building construction (part funding)

- Block panchayat – assistance for scholarships, medical checkups and aids and appliances
- Merchants' association for food assistance and marketing of products without commission
- Public donations for infrastructure development and financial assistance

Disability Intervention model : Kodur GP



Costs involved

Salaries	Rs
Special teacher	3,68,100
Physiotherapist	2,64,000
Caretakers	6,23,700
Cook	1,21,000
Drivers	3,43,200
Vocational trainer	2,77,200

Rent for premises	50,400
Total	**20,47,600**
Conveyance 10% of the Honorarium	1,34,328
Scholarships of the students trainees Rs. 12000 per students	8,40,000
Contingencies LS	50,000
Excursion	15,000
Total	**10,39,328**
Non recurring	**Rs**
Seminar and camps	80,000
Books for students and library	40,000
Vocational training	40,000
Kitchen accessories	35,000
Furniture and fitness equipment	90,000
Total	**2,85,000**
Grand Total	**33,71,928**

Challenges

Funds for recurring expenses as well as for infrastructure development, including acquiring land, were a major challenge. The integrated fund share admissible under people's planning wasthe main source of funding, along with funding available under convergence with departments including the Kudumbashree Mission. Unanimous decisions of the Gram panchayat committee and involvement of the BUDS management committee as well as the PTA played a big role in mobilising community participation for the project.

Stories of positive change

Aysha, a mother, came to the school in the morning carrying her seven-year old son on her shoulders. He was permanently in a crouching position. When seated in a chair, he was not able to stretch his legs. The mother had travelled six kilometres to the school after hearing about it. In the chair he sat in a cradle position. His body weight was very low and he looked emaciated. The mother was desperate to get her son admission in the school. On hearing about the child the president and a lady member came and told the teachers and staff to apply all their skills to make the child normal.

After two days,the boy began to respond slightly to the voices of other children and teachers. The mother was told to assist the VTC. After studying his case history and observing him for 15 days. the teacher, with the help of physiotherapists and the visiting JPHN, developed a systematic programme for his training. The mother was also asked to follow the routine at home. Slowly he began to stretch out his hands for biscuits and catch balls and rattles. This motivated the mother and staff of the school to continue with their efforts. After one month he began to get down from the chair and this helped him to stretch his legs. The skin fold was damaged and he was taken to the PHC for a medical exam. By the end of the year 2015 he began to walk slowly and sit in a squatting position. By 2019 he was able to join a nearby government school and is currently studying and living a normal life.

There have been many such successful stories. People from nieghbouring panchayats also have started to turn to Kodur Panchayat for solutions relating to people with disabilities. Indeed the model developed by Kodur Gram Panchayat has been very resourceful and inspiring.

Breaking Barriers

Pallarimangalam Gram Panchayat

Pallarimangalam Gram Panchayat gave a new dimension to BUDS School in the state, by expanding its scope and services to a level that caused a paradigm shift in programmes aimed at mainstreaming the mentally challenged. The project facilitated the social inclusion of the psychologically marginalised, by breaking attitudinal barriers. The model adopted by Pallarimangalam BUDS School thus became a precursor to a policy change in this regard and has been hailed a new model of value addition in the area

Differential ability, widely known as disability, is a long term physical, mental, intellectual or sensory impairment, which in interaction with various barriers, renders the victim's full effective participation in society on an equal to basis with others. Persons having difficulties in understanding routine instructions or those who cannot carry on normal activities like others of similar background and age or those exhibiting odd behaviours with sub average intelligence are known to be mentally challenged. In general they are a category of people who lag behind in almost all routineactivities. This has led to their isolation and neglect by society. The families of such marginalised persons are also impacted negatively. The education and development of differently abled persons still remains an unresolved issue even in this age of technical and social advancement.

Many charitable NGOs with religious background have since long initiated unaided special schools for them,especially in urban areas. That still left the poor and the rural people with no access to such services. It was under these circumstances that the Kudumbashree Mission came up with the idea of starting community based centres for mentally challenged children by the

name of BUDS. The people's plan guideline of Kerala authorised the panchayats to fund some part of the expenditure. Under the initiative of Kudumbashree, the Government of Kerala issued a guideline for BUDS schools to be managed by local governments in the year 2009.

It was also made mandatory to recognise these institutions under the Persons with Disabilities Act 1995. The people's plan expanded the provisions for expenditure by LSG and the Kudumbasree Mission tried to find additional funds under the *Ashraya* programme (destitute rehabilitation scheme) to supplement a part of the recurring expenditure of the LSGs such as providing bus for transportation, starting VTC and expansion of building (matching grant) and others. As of January 2021, there were 66 BUDS schools in Kerala. BUDS is managed by the LSGs with the support of a BUDS management committee constituted under Government Order no. 152/2009 LSGD dated August 1, 2009, and is registered as an NGO. The committee is delegated with powers for development and to mobilise public contributions to enhance community participation. Minimum prescribed standards for BUDS schools are given below:

- A minimum beneficiary strength of 25 students
- Land area of15 cents
- A building with a minimum area of 1,000 sq ft (40 sq ft for each)
- Safe compound wall and gate
- Two class rooms; hygienic kitchen; dining area; store room; activity room; room for medical checkup and physiotherapy unit
- Bus/transportation for students
- Safe drinking water, sanitary facilities and waste disposal arrangement

- One teacher for 10 students and one helper for 15 students, part time therapist, special teacher and driver on daily wages
- Workshed for vocational training
- Free noon meal and supplementary nutrition programme. Government Order (M S) no. 148/2009 LSGD dated July 29, 2009

The inclusive development initiatives of Pallarimangalam Gram Panchayat under the ageis of BUDS School should be understood in this context.

Profile of the Gram panchayat

Pallarimangalam lies in the north eastern side of Ernakulam District, far away from the district headquarters. The region is hilly, with laterite soil. People in general are marginal farmers and agricultural labourers.

Area	15.82 sq km
District	Ernakulam
Block	Kothamangalam
No. of wards	13
Population	14,848
Male	7,363
Female	7,485
Gender ratio	1,016 (F)/1,000 (M)

Background

There were differently abled people in the panchayat but the mentally challenged ones were conspicuously absent as they were confined to their homes. The plight of these people and their families was so pathetic in the absence of any rehabilitation programme, including education. Sreelatha, a young social worker, realising the problems of the mothers, convened a meeting at her residence. The belief among the community was that intellectual disability happens due to black magic or a curse and they were not optimistic that training and therapeutic intervention could make any

difference to the life of these children. The doctor who was present at the meeting tried to convince them that it was mainly genetic in nature and most of the comorbidities could be treated. He assured them that training and care were most important for them. The demand of most of the mothers present was to have a centre to look after their children during daytime. In December,2002,the Community Based Rehabilitation (CBR) Centre started in an abandoned class room with four students. After deliberations it was decided to start a community based centre for daycare with community contributions. The panchayat committee decided to give high priority to the initiative and decided to conduct an initial survey of differently abled children in the Gram panchayat with the help of Community Based Rehabilitation (CBR)teacher and anganwadi workers.

Backed by the decentralised plan guideline, a community-based survey of persons who were differently abled was conducted in the year 2002. 160 persons were identified initially in the family survey.

Establishment of BUDS School

The CBR centre initiated by the community in a rented room was transferred to a small room at the Mahila Samajam building, rent free. The meagre annual honorarium of Rs 3,900 for the teacher was met by contributions from the community. Number of beneficiaries gradually increased and so the panchayat decided to construct a room in the library and shifted the centre there in 2004. The panchayat also sanctioned a project in 2005 for payment of the honorarium under the plan fund. Thus the centre became part of the Gram panchayat initiative. In 2008 Kerala State Kudumbashree Mission took an initiative to formalise about 10 BUDS centres in the state. This paved the way for formal recognition of the BUDS Schools under the PWD Act. Government of Kerala issued orders regarding the minimum standards to be followed. The Gram panchayat took

initiatives to provide basic facilities at the centre, posted additional staff and received recognition for a BUDS School (544/10). A students' bus was provided with the help of Kudumbashree and by then, the students strength of the school had increased to 40.

Building construction

In order to mitigate the major deficiency of BUDS, the Gram panchayat acquired 40 cents of land for the construction of building for BUDS. Panchayat budgeted for two lakh rupees in the beginning and the district panchayat sanctioned Rs 12 lakh. The building was completed in 2017. The block panchayat sanctioned another two lakh rupees for a compound wall and the Suchitwa Mission provided two lakh rupees for differently abled friendly toilets. The Cochin Shipyard sanctioned Rs10 lakh for a sensory integration room and equipments for therapies.

The staff in the BUDSs School comprised three trained special education teachers with RCI approval, two helpers, one driver(casual basis), one part time physiotherapist and one medical assistant from the PHC.

BUDS School complex,Pallarimangalam Gram Panchayat **Relevance**

The table below shows the number of persons with disability in the Gram panchayat. It can be compared with the general population as well. The high incidence of mental challenges shows the utility of the project. It functions as a daycare centre even for those with severe disability. The safety of girl children at home in the absence of mothers was a big challenge and the BUDS focused on providing them safety during daytime. The ADL hygiene and menstrual hygiene of girl children improved with training and related support. There was decrease in hyper activity and odd behavior among children with mutual association and training at the centre.

Status of differently abled in the Gram panchayat

Sl. no	Category of differently abled	Age classification				Remarks
		0-6	7-18	19 +	Total	
1	Loco motor differently abled	0	13	60	73	
2	Hearing impaired	1	10	25	36	
3	Visually impaired	-	4	36	40	
4	Mentally challenged	8	39	40	87	MR, Autism, CP and MD
5	Others	-	33	26	59	
	Total	9	99	187	295	

(Source :KSSM survey and ICDS annual report, 2018 -19)

Category-wise details of the beneficiaries at BUDS

S. N	Category of Beneficiary	2017 - 18			2018 - 19			2019 - 20		
		M	F	T	M	F	T	M	F	T
1	Intellectual disability	15	17	32	05	29	34	10	16	30

2	Cerebral palsy	7	1	8	7	5	12	6	5	11
3	Autism	12	1	13	13	1	14	16	2	18
4	Multiple disability	0	3	3	-	2	2	0	3	3
5	Others	-	-	-	-	-	-	-	-	-
	Total	34	22	56	25	37	62	32	26	62

(Source : Annual report, grant-in-aid application)

Differential ability status of beneficiaries in BUDS

S.N	Level	2018 - 19			Grouping
		M	F	T	
1	Mild	19	12	31	Special academics level
2	Moderate	7	2	9	Vocational
3	Severe	13	9	22	Care group
4	Profound	-	-	-	
	Total	39	23	62	

(Source : 2018 - 19 school records)

Developmental significance

The BUDS School under the Gram panchayatwas a great relief for the affected families. The training and care facility helped mainstream them in the community and uphold their rights. The community began to accept these children, the mothers who had hitherto remained at home to care for the child could get time off during the day for other work and some could even pursue a career.

The centre for mentally challenged under the Gram panchayatis the only institution directly serving the differently abled in the panchayat. This enabled the officials and elected representatives to understand disability

better and created a change in their attitude and service orientation. The centre began to serve as a resource centre for information and support and the special NHG considered it as their platform of action.

As all the staff members except the driver were women, girl students and mothers found it easy and comfortable to use the centre. So the project has become a solace for the beneficiaries as well for their mothers. **Objectives**

- To undertake proper assessment and diagnosis of each special child
- To identify the need for and to provide for appropriate therapeutic service
- To assess the learning capabilities of each child and provide them with training in academics and foster behaviour modifications
- To manage their educational and vocational needs
- To enablea better quality of life through parent education and community participation

Services and their beneficiaries

S. N	Types of services	No. of beneficiaries			Remarks
		M	F	T	
A	**Education andtraining**				
1	Preprimary	4	8	12	38 under school age completed training
2	Primary	4	10	14	
3	Secondary	6	6	12	
4	Prevocational	5	5	10	
5	Vocational	4	4	8	
6	Production sector	3	3	6	

	Total	26	36	62	
B	**Other services**				
1	Noon meal	26	36	62	Mothers too attend
2	Therapies	14	24	38	
3	Equalising/schooling	9	9	18	
4	Awareness on production and parent education	12	50	62	
	Total	61	119	180	

An overview

i. Education and training

The centre follows the checklist method of training developed by NIMH. In the pattern, the students are grouped into pre-primary, primary 1 and 2, secondary and pre-vocational according to the age, IQ level and academic achievements. It follows group teaching as well as individualised education programme (IEP). The first step is functional assessment and evaluation. The subjects for training up to primary level is development of a) motor skills, b) self-help skills and social skills. In the next stage, functional academics such as reading, writing and memorising are added. Domestic and safety skills also are imparted. Now the Department of Education has introduced a curriculum to enable general education for these children. Under this, pre-vocational training is provided to develop a vocational attitude and vocational skills.

Every child is given the opportunity to appear for equivalency exam and open schooling certificate exam conducted by the Saksharatha Mission (Literacy Mission). The role of parents is very critical in this.

ii. Vocational training

Special vocational training is given. Craft model training in candle making, soap making and book making are given to all. After the vocational assessment using (NIMH - VAPS) those children who show promise are given training in open employment areas such as painting, fabrication and workshop skills in an apprentice model in and in external campus.

iii. Production unit

Vocational training under a production unit is a new intervention in which the mothers of trainees also work along with them in the unit. The unit was established with the financial assistance of the Kudumbashree Mission amounting to Rs 2.43lakh. Five students and five mothers are engaged in footwear and matmaking units. The collaborative working of adult students and their mothers has brought about modification in the behaviour of children and mothers. Five per cent of the total earnings is set apart for the school and the rest is divided among the students and mothers. This is a self sustaining programme.

iv. Censoring integration therapy

The censoring integration and physiotherapy unit is an important part of the school. The unit was installed with a donation of Rs 10 lakh from Cochin Shipyard under their Corporate Social Responsibility (CSR) scheme. The problems of autistic children and children with mobility impairments as well as sensory deficit has been a big problem which hindered the development of young children. This unit is assisted by an occupational therapist who makes periodic visits and a physiotherapist who provides weekly service for training.

A different school

The BUDS School of Pallarimangalam Gram Panchayat remains a model in several respects.

i. The BUDS School has a spacious compound and so students are exposed to farming and horticulture therapies
ii. Open employment training, through workshops and others in apprenticeship model outside the campus,has enabled some of them to get gainful employment.
iii. The school gives a lot of value addition to the existing practices of a BUDS School. An intellectually differently abled person with physical capabilities and functional academics can gain profitable employment.
iv. The model adopted by Pallarimangalam BUDS School may be a precursor to a policy change in this regard. This is a new model of value addition that can be adopted as a new approach and policy.

Class session in the BUDS School

Features and value addition

- Special education and vocational training – soap powder and candle making and glass painting
- Self employment and job opportunities for students who complete training
- Sports and games training to enhance physical ability
- BUDS development management committee under GP
- Organic farming with assistance from Agriculture Department for more exposure
- Rain harvesting system
- Equivalency exam training and SSLC open schooling

Stakeholder participation

The school is very student-centric. The BUDS managing committee is a legally constituted developmental CBO organised by the Gram panchayat with elected representatives; officials; parents; public and other well-wishers. They play a big good role in mobilising contributions, in job placements, in ensuring social acceptance for students and organising sports and cultural activities. Without them the extra curricular and outdoor activities would not have been possible.

A non-departmental, out-of-scheme project is very difficult to sustain without partners. Even while the BUDS management is under the Gram panchayat, the following agencies came forward with assistance.

Year	Agency	Role	Amount (Rs)
2017 -18	District panchayat	Development of infrastructure for BUDS, payment of scholarship	12 lakh

2019 -20	Block panchayat	To assist GP for development of BUDS/ scholarships	2 lakh
,,	The Education Department	Matching grant to GP for special education	2 lakh
,,	Sanitation Mission	Toilet facilities	2 lakh
,,	Cochin Shipyard	CSR fund for differently abled	10 lakh
,,	Kudumbashree	Production unit for trainees and mothers	2.45 lakh

Funding

S. No	Source of fund	2019 – 20 (in Rs)
1	Plan fund	1,34,360
2	Own fund	10,000
3	Grant in aid from General Education Dept.	2,00,000
4	Kudumbashree Fund	2,00,000
5	Public contributions	1,00,000
6	Central Finance Commission grant	8,25,000
	Total	14,69,360

Classification of expenditure on BUDS School

S. No	Items of expenditure	2019 – 20 (in Rs)
1	Honorarium/salaries	74,220
2	Food	1,32,000
3	Contingency	1,00,000
4	Vehicle	2,55,000
5	Repair, maintenance	16,29,200
6	Furniture	10,00,000
7	Construction	4,00,000
	Total	30,29,200

Positive results

The BUDS School has several observable results as given below:

i. Families with mentally challenged children who were alienated from society gained acceptance and the confidence to mingle with the community. ii. A healthy interdependence began to emerge through the neighborhood groups.
ii. The Gram panchayat committee altered their views on local development based on their experience with the project.
iii. Social inclusion of the mentally challenged began to help the psychologically marginalised, through the breaking of attitudinal barriers.
iv. BUDS has given an opportunity to the special children in the management of problem behaviour, ensuring open schooling and special care.
v. The school has made way for several children to get admission in normal schools, and thereby lead a normal life.
vi. It has ensured sustainability through the intensive involvement of parents; special NHGs; PTA; home visits and parent education. Community awareness was created on the need and importance of this school. So the sustained support of the entire community, corporates and political leaders has been very well guaranteed.
vii. Self-help grouping of parents was ensured. Involvement and partnership of parents is very essential for community-based rehabilitation. The parents network has been very involved in training and mobilisation of public awareness and community support.

Challenges

The Gram panchayat has faced several challanges such as the lack of a secure building and safe campus, paucity of funds, lack of qualified teachers with RCI recognition willing to work at low wages. The strict procedures of PWD registration and grant application designed for private institutions also remain a challenge for Gram panchayats.

However these challenges are being overcome with the pro-active provisions of people's plan guideline; strong support of the panchayat committee; support of Kudumbashree; public as well as corporates. The support extended by the officials of the Department of Education the Kudumbashree Mission has been invaluable.

Awards and recognition

Students of Pallarimangalam BUDS School became champions in the special Olympics of 2017. The school became the district level runner up in BUDS Schools' Kalolsavam in 2018.

Innovation Is The Key

Sreekrishnapuram Gram Panchayat

The differently abled friendly programme put in place by Sreekrishnapuram Gram Panchayat is distinguished by its innovativeness and dynamism. It has been a constantly evolving process, that has kept reinventing strategies to create a wholesome, sustainable environment for differently abled children to become physically healthy, mentally alert, emotionally secure and socially competent.

Hardly surprising then that the panchayat has been honoured thirteen times as the best panchayat in the state,for these efforts

The Sreekrishnapuram Gram Panchayatad a keen interest in innovative ideas in projectisation, for which they have used the intellectual support of all individuals through different platforms. The State Government adopted the Kerala State Plan of Action for Children in 2004. The action plan was based on a status survey,problem identification, goal setting and activity plan. The Kerala Institute of Local Administration (KILA)developed a comprehensive child development programme for Local Governments in collaboration with UNICEF in 2011. Training sessions were conducted for the Gram panchayats. Sreekrishnapuram Gram Panchayatwas one among the six LSGs selected for the development of a model. Collection of data on children including those with disability was given focus in it. Later, a child friendly local governance initiative was also initiated.

One of the achievements of the Gram panchayat was development of a database of children including those with disability. The panchayat also published the status of children as a public poster and gave it wide publicity. Many of the hitherto hidden and unknown cases of children with disability began to be revealed after this. The panchayat did not have any special programme for persons with disability, other than supply of aids and appliances and scholarships. Rehabilitation of the differently abledsoon became the demand of the people through the Gram sabha. So the panchayat began the process for a comprehensive rehabilitation programme for differently abled persons.

Profile of the Gram panchayat

Sreekrishnapuram Gram Panchayat, in Palakkad District, is considered to be one of the most richly endowed panchayats in the state. The Gram

panchayat came into existence on January, 1, 1961. Abundance of nature;demographics;standard of living; education and culture were a few of the components that elevated the status of the panchayat. Sreekrishnapuram Gram Panchayat administration has had many outstanding achievements in the period from 2005 to 2020.

Taluk	Ottappalam
Total area	29.6 sqkm
No of GP wards	14
Block panchayat	Sreekrishnapuram
District	Palakkad
Population	23,550
Density of population	795.6 sq km
Males	11,654
Females	11,896
S C population	3,673
Literacy	90.58%

Innovative ideas

Taking inspiration from KILA training and based on the outcome of the discussions among the members of the panchayat administration, the Gram panchayat embarked on the innovative idea of preparing a data bank of children in the panchayat. In 2015 they created a data bank with baseline infomation and consolidated a report on children. As on March 31,2015, the child population was 5,205 in different age categories. **Objectives**

- To create a safe environment for differently abled children to become physically healthy, mentally alert, emotionally secure and socially competent.
- To ensure a sustainable and comprehensive package of services for persons with differential ability

Further to this, for the next two years, the panchayat developed a slew of innovative projects with a focus on differently abled children as shown below:

Swastham– crime mapping	To understand and resist brutality, atrocities, sexual abuse, ill treatment faced by differently abled children
Directory of differently abled	Total number of differently abled children with their comprehensive details
Immunisation	100% immunisation coverage for all children
Karunyasparsam (touch of mercy)	A special project for differently abled
Adwaitha	A helping hand for the children of migrant workers
Children's Gram sabha	To ensure child-centric local planning by getting the views of children
Kanmani	A novel project for promotion of birth of girl child
BUDS Rehabilitation Centre	To promote rehabilitation of differently abled people above 18 years of age

Home care	A team of children active in palliative care to provide home care for the differently abled
Punchiri (smile)	A well-appointed roomat the Family Health Centre aiming at easy and happy vaccination arrangement and treatment
Subhadram(ultimate safety)	Medical camp for adolescent girls and lactating women
Chirakullachangathimar(Friends with wings)	Family meetings of differently abled children
Mukthi (Freedom)	Freedom from substance abuse and narcotics

Exclusive initiatives for differently abled Status report

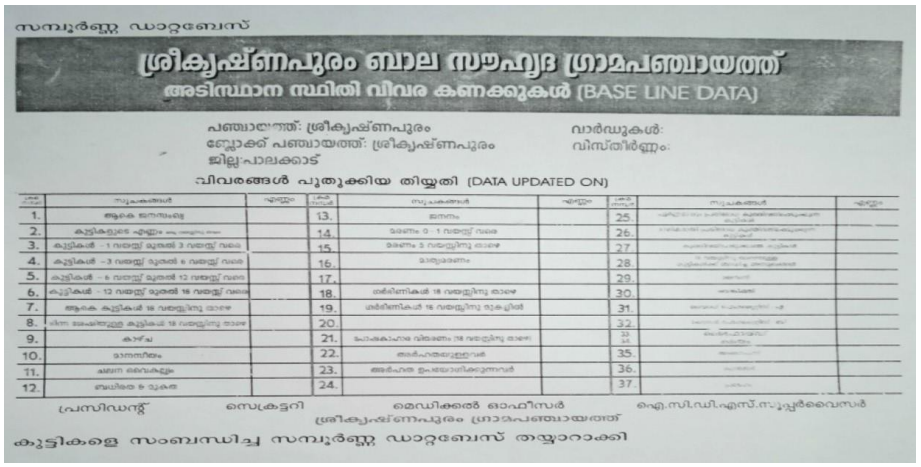
One of the challenges before the Gram panchayat was not having a comprehensive database of persons with differential ability. This was a major hurdle in inclusive developement planning. The concept of a directory on differently abledoriginated, with a view to developing a comprehensive rehabilitation package.

Action taken

Comprehensive action was taken by the Gram panchayat as summarised below.

- The panchayat resolved to initiate a differently abled friendly local governance.
- It was decided to collect database of the differently abled in a family-centric data format.

- The Gram panchayat organised an officer level meeting and introduced the novel project. The implementing officers functioning in the areas of agriculture; veterinary; child development; SC development; education and those in the Kerala Water Authority were present.The meeting decided to take steps fornecessary projects towards the well-being of the differently abled.
- Anganwadi workers were entrusted with conducting a survey on each child with disabilities and its type; status; personal details; family details and other relevant information.
- The data bank on the differently abled was ready and approved by the administration. Analysis of data revealed many factors on differently abled children and their living conditions.



സമ്പൂർണ്ണ ഡാറ്റബേസ്

ശ്രീകൃഷ്ണപുരം ബാല സൗഹൃദ ഗ്രാമപഞ്ചായത്ത്

അടിസ്ഥാന സ്ഥിതി വിവര കണക്കുകൾ (BASE LINE DATA)

പഞ്ചായത്ത്: ശ്രീകൃഷ്ണപുരം
ബ്ലോക്ക് പഞ്ചായത്ത്: ശ്രീകൃഷ്ണപുരം
ജില്ല:പാലക്കാട്

വാർഡുകൾ:
വിസ്തീർണ്ണം:

വിവരങ്ങൾ പുതുക്കിയ തിയ്യതി (DATA UPDATED ON)

1.	ആകെ ജനസംഖ്യ		13.	ജനനം		25.		
2.	കുട്ടികളുടെ എണ്ണം		14.	മരണം 0 - 1 വയസ്സ് വരെ		26.		
3.	കുട്ടികൾ - 1 വയസ്സ് മുതൽ 3 വയസ്സ് വരെ		15.	മരണം 5 വയസ്സിനു താഴെ		27.		
4.	കുട്ടികൾ - 3 വയസ്സ് മുതൽ 6 വയസ്സ് വരെ		16.	മാതൃമരണം		28.		
5.	കുട്ടികൾ - 6 വയസ്സ് മുതൽ 12 വയസ്സ് വരെ		17.			29.		
6.	കുട്ടികൾ - 12 വയസ്സ് മുതൽ 18 വയസ്സ് വരെ		18.	പെൺകുട്ടികൾ 18 വയസ്സിനു താഴെ		30.		
7.	ആകെ കുട്ടികൾ 18 വയസ്സിനു താഴെ		19.	പെൺകുട്ടികൾ 18 വയസ്സിനു മുകളിൽ		31.		
8.	[illegible] കുട്ടികൾ 18 വയസ്സിനു താഴെ		20.			32.		
9.	കാഴ്ച		21.	പോഷകാഹാര വിതരണം (18 വയസ്സിനു താഴെ)		33. 34.		
10.	മാനസികം		22.	അർഹതയുള്ളവർ		35.		
11.	ചലന വൈകല്യം		23.	അർഹത ഉപയോഗിക്കുന്നവർ		36.		
12.	മറ്റിതര 6 മുകൾ		24.			37.		

പ്രസിഡന്റ് സെക്രട്ടറി മെഡിക്കൽ ഓഫീസർ ഐ.സി.ഡി.എസ്.സൂപ്പർവൈസർ
ശ്രീകൃഷ്ണപുരം ഗ്രാമപഞ്ചായത്ത്

കുട്ടികളെ സംബന്ധിച്ച സമ്പൂർണ്ണ ഡാറ്റബേസ് തയ്യാറാക്കി

Status report on children

The Gram panchayat then organised a meeting of implementing officers to have their ideas on the comprehensive development of differently abled children. Annual projects originated on the basis of this discussion.

Special Gram sabha

A children's Gram sabha was organised by the GP. Children prepared a list of needs and necessities related to their life and priorities and submitted the same to the standing committee and concerned working groups. On similar lines, a Gram sabha of differently abled children was conducted at the panchayat level. In addition to thedifferenlty abled children, the special Gram sabha was attended by the parents, caretakers and NGOs and CBOs working in the areas of disability. The needs and priorities proposed in the special Gram sabha were discussed at the panchayat committee.

Directory of differently abled children

With the help of health and social welfare departments, the Gram panchayat could survey and identify differently abled children and present them for a medical check-up before the medical board. The four categories of deformities – those with auto immune diseases, blind and hearing impairment and those mentally and physicallychallenged were identified and medical certificates were issued to them, along with a beneficiary identity card. The first attempt of the panchayat was to identify the children in the differently abled category and pool them based on the psychological and physiological needs by using the survey and benchmarking method.

- Differently abled children were enrolled and supported
- Facilities from all departments were ensured to the children through annual projects.
- Work cycle of health issues was streamlined and ensured
- Support was ensured from all departments by the panchayat standing committee
- BUDS/ Rehabilitation centre was designed

There were 76 child beneficiaries in the directory. The directory was updated every year and contents improved. Based on this, identity cards were issued.

Types of services

In the monthly meeting of the standing committee, the databank of the differently abled was discussed among the committee members and implementing officers to reach a conclusion on what kind of services could be provided. Each officer prepared projects for the differently abled based on the existing plan guidelines. For example, the Agriculture Department provided seeds and fertilisers, free of cost; the Veterinary Department provided hen and eggs,free of cost,under the rural backyard poultry development project through schools to enhance children's skills and involvement; the Health Department provided health check-upsat regular intervals; the Social Welfare Department initiated distributionof government schemes, and the Social SecurityMission supported with their schemes under government instructions. Every year since 2016, the Gram panchayat has found a place for sectoral projects under ICDS or the Social Justice Department. The verification of beneficiaries was done prior to planning and a clear database was created.

The next step was to modernisethe databank into digital form based on the *Ashraya* (destitute rehabilitation) model. The Gram panchayat printed a book of beneficiaries including all details just like in the *Ashraya* model. This was updated every year. A few would be eliminated from the list due to the age factor but they automatically would be included in the BUDS list or in the Rehabilitation Centre register. This way differently abled children gotstrong support from the panchayat.All assistance and schemes announced by the government from time to time were provided to the beneficiaries.

Scholarships

A total of Rs 27,500 was paid annually for each child. This consisted of scholarship (Rs 12,000), dress allowance (Rs 1,500) and travelling allowance (Rs 2,000). In addition to this, a grant of Rs 1,000 was provided for excursions for each child, accompaniedby a parent. This wasin addition to the scholarships available under SSA.

BUDS Rehabilitation Centre (BRC)

Parents expressed the wish that their wards with intellectual disabilities such autism and CP should also be included in the initiative. The Gram panchayat was also in favour of inclusive education and ensured scholarships for all mentally challenged children, admissible under the people's plan guideline. Some children with severe mental retardation and multiple disabilities were not able to attend normal school. Further, training and care of the mentally challenged after schooling (above 18) was a big problem in the family. So there was a demand to start a BUDS Rehabilitation Centre as per the norms of G.O (MS) no. 144/2013 LSGD dated April 6, 2013. The Gram panchayat realised the need for and initiated a BUDS Rehabilitation Centre under the project named *Snehalayam*. The centre is now a great relief for the 33 inmates out of which six are children and four around 19 to 23 years of age. The unit includes a physiotherapy unit;a multicensoring unit;a behavioural therapy unit; music and dance therapy unit; art and agro therapy units. The project has been expanding its profile by adding more services to support differently abled children as well as other beneficiaries.

The BRC has a trained special teacher, a helper-cum cook, an ayah-cum

cook and a physiotherapist.

Objectives of BRC

The BRC operates with the following objectives.

- To give training on daycare activities and rehabilitation processes for mentally challenged above the age of 18
- To provide training and education for those who are unable to go to school
- To provide appropriate vocational training
- To ensure the service of a therapist
- To create appropriate production units
- To evolve a special NHG for mothers
- To create research centres for PWD and to ensure community participation

Details of beneficiaries in BRC

Category	Male	Females	Total
Intellectual disability	9	7	16
Cerebral palsy	4	2	6
Multiple disability	7	2	9
Others	0	2	2
Total	20	13	33

Services provided

Category	No
Special education - equal to normal education	10
Vocational training	20
Care service	03

Physiotherapy	30
Multisensory training	20
Music education	30
Behavioural therapy	33
Art therapy	20
Agrotherapy	30

Stakeholders

The differently abled friendly initiatives in Sreekrishnapuram Gram Panchayat is the result of collaboration between different stakeholders including the following.

1. The Gram panchayatwhich heads the project with appropriate levels of interventions, including allocation of plan and own funds and public fund mobilisation
2. The block panchayat which has extended funding support on different departmental programmes and has ensured effective convergence
3. Departments such as Agriculture; Education; Social Justice; SC Development and Health which have been allocating projects for the differently abled continuously
4. Sponsors including the merchants' wing; shop owners; school PTA; Lions and Rotary Clubs and otherswho have offered support for a variety of purposes including the standardisation of BUDS and BRC.
5. Anelaborate network of anganwadi workers, health officials, SC promoters and school teachers who have pitched into help with every project

Results

The programme has had many direct and indirect benefits as shown below:

1. The children got immediate attention for their problems.
2. Parents have been equipped to promote happiness and peacein the life of their children through orientation classes.
3. With precise data, prompt monitoring and need-based special care have been effective in rehabilitating the differently abled.
4. Public participationin the initiative
5. Creation of a differently abled friendly environment in the locality.

Programme costs The projects for the year 2016-2017

An overview of the project cost for 2016-17 is given below. There has been 10 to 15 per cent increase every year since 2016-17.

1. *Karunyasparsam* is a project that focused on creating a Gram sabha of differently abled children;a directory of differently abled children; a personal support system; a website; distribution of supportive equipment and accessories. Rs 4.25 lakhwas the project cost.
2. *Snehalayam* was a project for BRC for mentally challenged and differently abled children. As a part of this programme, a chain of social activities were streamlined and included at the panchayat and district levels. Rs 2 lakh was the project cost.
3. A physiotherapy centre and multicensoring unit were attached to the BUDS Rehabilitation Centre for differently abled children. Rs 3.5 lakh was the project cost.
4. A programme called *Be with Society* is a sponsored project for differently abled children who are ailing from mental challenges and Down Syndrome.

5 Scholarships, travel grants, uniform aid and appliances have been ensured to all children with differential ability. Fund to a tune of Rs 27,500 has been allotted to every child annually as prescribed in the government guidelines. In addition to this, health programmes are also being conducted as per need.

Sustainability

The programme has faced several challenges like financial hurdles in the planning process, lack of proper knowhow for panchayat functionaries in project preparation in the disability sector, lack of flexibility in plan guidelines and lack of specialised hospital facilities in the locality.

Since the inception of the project, people working in different sectors of Sreekrishnapuram have shown great confidence that the Gram panchayat administration would continuously support all efforts to ensure a bright future for the differently abled sections. Naturally any local administration which would come to power in the coming years would have to follow the precedence set in favour of differently abled children by its predecessors.

Recognition

The Gram panchayat was awarded the Swaraj Trophy for the best Gram Panchayat in the State of Kerala 13 times. This was based on the assessment of the activities done by the Gram panchayat in the areas of child and differently abled friendliness. The team behind these efforts is moving ahead together towards achieving the goal of securing a safe place for differently abled children in letter and spirit. The teacher of the BUDS School, Smt. Remya has rich experience in this sector and she was awarded as the Best Teacher (Prathibha award)for the year 2019.

Success story

Nimi, aged 15 years, is an inmate of the BUDS Rehabilitation Centre of Gram panchayat. She was suffering from a very acute behaviouraldisability which manifested itself in very alarming behaviour such as removing clothes;screaming; food intake deficiency; manhandling of parents; uncontrolled urination and other distress symptoms.

Her parents were extremely distressed; her mother even suffered injuries due to her daughter's tantrums.

After a year of admission in the BUDS Rehabilitation Centre, she has improved. Now she wears colourful clothes, with fewer tendencies to remove. She has started practisingself hygiene. She has started moving with other children without much muscle clipping. This was enabled with the help of the BUDS Rehabilitation Centre and its timely involvement.

Venganoor Gram Panchayat

From Buds To Bloom

BUDS - the name encompasses the very essence of the revolutionary concept that gave birth to a new Kerala model in the area of social justice. Venganoor Gram Panchayatbecame a trail blazerin projects for the the differently abled, by starting the first BUDS School in Kerala.It was a milestone thatled the way to a new era in empowering the mentally challenge, through academic and vocational education,helping them bloom to their true potential and stand their own in society

A household survey conducted by the neighborhood group of Kudumbashree as a part of local economic development plan found that several persons with mental retardation were confined to their homes. It was more in the coastal areas as poverty was a part of their life. It was

inferred that poverty restrictedchoices and opportunities for people due to multiple deprivations. Mental challenges further narrowed the range of choices available to a person due to functional limitations and social discrimination. When the disability significantly restricts the activities that would otherwise have been available, it would, all other things being equal, constitute reductions in the person's quality of life. These findings gave way to a specific programme for the mentally challenged under the panchayat for which Kudumbashree took the initiative.

KudumbashreeMission District Coordinator, Thiruvananthapuram, held a meeting with the panchayat and arranged a meeting of all members and identified the parents of mentally challenged children. They brought these children along with them for the meeting as there was nobody to take care of them in their absence. It was for the first time the local leaders observed the problems of these children. They enlisted the support of Kudumbashree to start a daycare centre for them for which they offered 12 cents of land. The DMC approached the Executive Director, Kudumbashree, and he reported the fact to the government. The government accorded sanction to spend five lakh rupees to build a small building to house the Community Based Rehabilitation centre and it was named BUDS Special School. The building was inaugurated in 2004. The ministers who attended the meeting found it essential to support the Gram panchayat and so sanction was granted to pay a part of the honorarium to the voluntary workers serving at the centre out of plan fund of the Gram panchayat. This was the very firstinitiative for BUDS School in the state.

BUDS offered a systematic combination of the following programmes.

- Early intervention and pre-primary education
- Primary level education for 7-10 year group

- Secondary level education for students between11-14 years according to their level of achievement
- Pre-vocational training for students between15-18 years who had relatively lower mental ability
- Vocational training for those above 18 years with engagement in productive activities

Profile of Venganoor Gram Panchayat

District	Thiruvananthapuram
Block	Athiyannur
Area	13.8 sq km
wards	20
Population	35,963
Male	17,728
Female	18,235
Literacy	89.91%
SC population	6,356

Data on differently abled population in Venganoor

Category	0-14		14-45		45+		Total	
	M	F	M	F	M	F	M	F
OH	10	8	36	38	60	33	105	79
VI	4	4	18	18	12	15	34	38
HI	4	2	20	10	8	14	32	26
MR	18	6	20	11	7	5	45	22
CP	2	2	6	4	1	5	9	11
MD	3	1	5	5	-	1	8	7
Others	9	6	15	7	23	9	47	22
Total							280	205

Venganoor Gram Panchayatis an agricultural village located on the banks of the Vellayani fresh water lake, around 15 km from the state capital of Thiruvananthapuram. VenganoorGram Panchayat, known all over the world as the birth place of Ayyankali, the great social revolutionary and champion of the cause of the oppressed, hadfor long remained an underdeveloped village.

The introduction of democratic decentralisation made a real difference to the profile of the village. Realising the potential of people-centric development,the panchayat gave priority to poverty reduction projects in the 10th Five Year Plan. Shocking were some of the findings of the socio economic survey conducted by the panchayat and revealed the fact that there were as many as 72 children in the panchayat area suffering from physical and mental challenges. Neglected by everybody they led a life of isolation and despair. A discussion with Kudumbashree led to the chalking out of a plan for addressing this issue in a sustainable manner and planning for setting up a rehabilitation centre by the panchayat. This gave birth to an innovative programme, the first of its kind in India. The school provided opportunity for differently abled children for interaction with other children and bring a smile to their faces.

The BUDSSpecial School was launched on August, 16, 2004, and inaugurated by Sri. A K Antony, the then Chief Minister of Kerala. BUDS started functioning with 41 children with different disabilities in the age group of 2 to 10. At present there are 54 children. These children had disabilities such as autism; cerebral palsy;intellectual disabilities; H I and other neuro disorders.

Objectives

As part of the holistic approach to rehabilitate these children, the following objectives were laid out.

- To impart education and training to the mentally challenged
- To impart vocational training leading to independent learning
- To enable rehabilitation and temporary living arrangements for special children
- To work as a centre of activities for the differently abled in the GP

The school is administered by a managing committee consisting of :

1 Local MP/MP's nominee
2 Local MLA
3 Panchayat President (chairman)
4 Health and education standing committee chairman (vice chairman)
5 Standing committee chairpersons (3)
6 Ward members of three-tier panchayats
7 Two Gram panchayat members (one lady member)
8 Four representatives of parents (2 lady representatives)
9 Two social workers

10 Chairperson, CDS
11 ADSchairperson
12 CHC/PHC doctor, ICDS, CDPO, health inspector
13 School Principal and staff representatives
14 A S (secretary and treasurer)
15 Secretary (school manager)

Beneficiaries

Sl. No	Items	M	F	No
1	Intellectually differently abled	17	13	30
2	Cerebral palsy	4	6	10
3	Autism	7	3	10
4	V D	1	-	1
5	H I	2	-	2
	Total	31	22	53

Level of disabilities 2019 - 20

S. No	Items	M	F	Nos
1	Mild	5	5	10
2	Moderate	12	8	20
3	Severe	10	9	19
4	Profound	4	-	4
	Total	31	22	53

BUDS facilitation

To ensure the objectives of the differently abled friendly drive of the panachayat, the BUDS School in Venganoor Gram Panchayat provides multiple facilities

1 Medical attention to ensure corrective measures to all children with disability
2 Individual therapy – physical; social; vocational; mobility orientation; speech therapy and physiotherapy
3 Curriculum based activities (academic and non academic activities)
4 Nutrition – meal, milk and snacks
5 Mobility devices such as hearing aids wherever appropriate
6 Vocational training for children and mothers

The school day begins with prayer, yoga, exercise and physiotherapy. Children are grouped according to their IQ level. Play way method has been adopted. Special school curriculum developed by SCERT is being followed. Enjoying musical games, listening to stories, learning to read and write are all practised in groups. The care and support system provided has boosted the development of capabilities in these children.

a) Education and training

S. No	Service /Activity	M	F	Total beneficiaries
1	Pre-primary	2	2	4
2	Primary 1	2	4	6
3	Secondary	3	3	6
4	Pre-vocational	8	7	15
5	Vocational	6	4	10
6	Care group	10	2	12
	Total	**31**	**22**	**53**

The teaching and training of students who are mentally challenged is carried out basically in the individualised programme plan (IPP) method. Teaching is focused on training new skills and also on the management of inappropriate behaviours. Under IPP the functional assessment checklist for programme plan identified by NIMH is used.

b) Other services

S. No	Activity	M	F	Total beneficiaries
1	Breakfast	25	20	45
2	Noon meal	31	22	53
3	Special nutrition	5	3	8
4	Physiotherapy	31	22	53
5	Speech therapy	15	10	25
6	Occupational therapy	4	6	10
7	VAPS assessment	11	10	21
8	Production training	6	4	10
9	Equivalency training	2	4	6
10	Open school coaching	3	3	6
11	Parental therapy	28	22	50

Assembly of children

Meals for children

Breakfast of bread and jam or butter, banana, milk or tea is served to all except a few who cannot consume them. Special foods like oats is served to some children having digestion issues. Noon meals are supplied by the Department of Education and meals are served as per their menu.

Therapy services

Most of the equipment required for physiotherapy have been made available at the school. Parallel bars;weighing scales; static cycles; horizontal and vertical standing units;different peg boards; hand function kits; yoga mats; wooden boards; lacing kits; therapy balls; balance boards and such equipment for physiotherapy are being used. A part-time physiotherapist conducts training programmes two days a week.

Parental education (Mothers)

To promote self reliance,training is imparted on personal skillssuch self feeding;meal time skills; toileting and bathing skills; dressing skills; which includes walking, ironing and dressing ability.Some of the earlier learning had to be modified according to the student's growth, ageing and maturation, an area where mostfamilies fail. Focussed attention has been given to menstrual hygiene of girls.

Vocational training

With a view to moving them towards independence, special vocational training for mentally challenged has been ensured. Knitting and tailoring; candle making; file making; book binding; jewellery making and training on flower arrangements are the major craftseducation imparted to the students. After six months of training those who are proficient are given continuous training, the products are marketed and profit shared with them. Joint mushroom cultivation isalso been taken up recently.

Developmental significance

Venganoor BUDS School had a 22-centcomplex which was not sufficient to construct a hostel. The land owner of the adjacent property offered 18 cents of his land for Rs 30 lakh, which was much less than the market value. The panchayat committee discussed it but could not cough upthe finances. At

this time the vice president suggested that all members pool their ward development funds of two lakhs rupees each for the year 2018-19. The suggestion was approved and the Gram panchayat submitted the innovative proposal and the DPC approved it. With this amount land was acquired and subsequently construction of the building was completed by COSTFORD.

New BUDS school complex under construction

The school building did not have sufficient space to conduct vocational training programmes and so a second storey was constructed with the support of Athiyannur Block Panchayat. The tools and equipment for the unit were purchased out of the Kudumbashree grant. Now the area of the vocational unit comprises 350 sq mtr with a ramp and vehicle shed.

Rehabilitation hostel

In 2018, Richard Hey, MP, visited this school and he interacted with the parents. They raised concern about the future of these children after the death of their parents. So they requested that a hostel be provided for orphaned mentally challenged children as a lifelong support mechanism.

The panchayat also endorsed it. The major obstacle was lack of a building. The MP offered tomobilise CSR funds from a company to acquire land and have a building constructed. Sri.Richard Hey contacted the Indian Oil Corporation (IOC) and they offered to sanction Rs 65 lakh for the project. The plan and estimate, prepared by COSTFORD, was approved. An amount of Rs 25 lakh was paid to COSTFORD and building construction is in progress as of December 2020.

The hostel for the lifelong support of mentally challenged inVenganoor GP is the first initiative in Kerala under any Local Self Government. The hostel has a principal, four teachers, a physiotherapist, four helpers and a driver. There is monthly medical service from PHC.

Project costs 2019 – 20

Sl. No	Items	Amount (in Rs)
1	Salary/honorarium of staff	21,87,760
2	Vehicle	1,80,000
3	Contingency	1,00,000
4	Vocational block construction	1,00,000
5	CSR funds from IOC for hostel	65,00,000
6	Education grant for salaries	4,00,000
7	Plan fund from Gram panchayat	19,67,760
8	Block panchayat	1,00,000

Success galore!

The initiative boasts many success stories in rehabilitation. In one of them, a little girl, three years old, was confined to home as she was unable to walk and play. Her muscles were very weak and many thought that she was differently abled. The doctor treating the child found that she had no neurological problems but a defective movement disorder. He toldthe mother to send the child to a centre having facilities for care and physiotherapy. As BUDSwas a centre for differently abled, the family was reluctant to send her there. The anganwadi worker and JPHN persuaded them and the teacher from the BUDS visited her home. Subsequently the child was admitted to the school. The teacher remembered how the little kid kept herself aloof. After two days she began to smile at others and the other energetic children in the class kept trying to keep her happy. After some days the physiotherapist started massages on her and she began to move with the other children. The physical exercise continued and the girl began to play and indulge inall activities. Her mother could hardly believe her eyes when she saw the development. She also began to come along with the child. Gradually, the girl began to learn, play and dance. The family also supported the institution in the process. At the age of five Shallu was admitted to a normal school. Shecomes back occasionally to visit her old friends and staff at the BUDS School. She passed the SSLC exam with distinction and is one of the most cheerful and energetic children in the area. The staff of the school and panchayat have been really proud of her achievement.

Recognition

BUDS school Venganoor is a model for other BUDS schools of Kerala both in terms of the fact that it was a pioneer in the field and for its efficient functioning. Many experts and specialists have visited the centre to study its model.

1 A study team from Uganda under Ms. Agatha Sagma, Member,Women and Child Welfare and ministerial teams of South

Africa, Srilanka and Bangladesh visited the centre and expressed their appreciation.

2 Teams from several Indian states, including Gujarat visited the centre.

3 KILA has documented the BUDS Venganoor programme under the good practices case study and has sent several study teams to the panchayat.

Children who formally had no opportunities for social interaction and who rarely or never left their beds or homes now found themselves laughing and interacting with other children and making big strides towards their rehabilitation. Children who often were not mentally responsive to their environment were now active and confident of facing the society and world at large. Children who were neglected by the community was rehabilitated at BUDS and mainstreamed in society. Inspired by the success story of Venganoor Gram Panchayat, all the panchayats in Kerala have initiated such models in their own locality. As of January 2021, there are 63BUDS Schools in Kerala.

Children and caregivers of BUDS School

5
LOCAL GOVERNMENT-LED PALLIATIVE CARE

The Success Of Teamwork

Ambalavayal Gram Panchayat

Ambalavayal Gram Panchayat is something of a pioneer in the field of pain and palliative care in Kerala. Way before the State Government guidelines were revised, the panchayat had made substantial headway in this field. The scale and expansion the project has achieved today shows the effectiveness of the panchayat leadership in mobilising and channelising various resources towards a common goal of assuaging the pain and suffering of its people afflicted by illness

Ambalavayal Gram Panchayat comes under SulthanBathery Block of Wayanad district. The panchayat is 975 metres above sea level and shares its border with Tamil Nadu to the east. The panchayatis locatedat the foot of the Ambukuthi mountain range which is popular for the historic Edakkal caves. Amabalavayal Panchayat was formed in the year 1961 with 60.68 sq km of area. According to the 2011 census, the population in the panchayat is 35,207 which includes 17,993 women and 17,214 men in 8,568 families. Among the population, 955 belongs to the Scheduled Caste community and 5,867 to the Scheduled Tribes. Majority of the population in this panchayat are farmers and small scale businessmen.

Ambalavayal Panchayat has a community health centre and eight sub centres. Apart from these health facilities, the panchayat has Ambalavayal Ayurvedic Dispensary, Cheengeri Tribal Ayurvedic Dispensary and AmbalavayalHomoeo Dispensary which come under the state and local government. The panchayat also has basic private hospitals. People in the panchayat face issues like environment related diseases and lifestyle disorders and scarcity of clean drinking water. This is the first panchayat in Wayanad where use of incinerator was implemented for scientific waste management.

Palliative programmes

Even though the health sector in Ambalavayal Panchayat was better compared to the nearby panchayats, there were many who suffered from various diseases. The 2015 disabilitycensus revealed thatthere were 172 people who were suffering from both physical and mental disabilities in the panchayat. According to the census, there were 2,521 people who belonged to the age category between 60-69, 983 people between 70-79 and 380 people above 80 years. Aged and differently abled people needed special attention.

Understanding the need for special attention of the people in need, a palliative care unit was started on September 30, 2011. As a part of the National Health Mission, details of the patients who needed special attention were collected across the ward. It was done by the collective effort ofAsha and Anganwadi workers and other volunteers. They collected and registered the details of 260 patients who needed palliative care in the panchayat, in the initial months of 2012. They still continue the process of updating the list of patients who needpalliative care. They have registered a total number of 1,741 patients till February 28, 2021.

Institutional set-up

There are 732 patients who are currently under palliative care. Among them, 262 come under the Scheduled Tribe. The eleventh ward in the panchayat has the largest number of patients under palliative care. Patients afflicted by stroke and cancer comprise the majority of patients. Also, there are 12 children under 18 years of age who are given palliative care.

Palliative care activities within the panchayat are functioning according to the revised guideline, 553/2019lsgd issued by the State Government on March 7, 2019. This guideline emphasises the importance of the pain and palliative care units under each Local Self Government in the state. But Ambalavayal Panchayat had initiated palliative care activities even before this guideline came into existence. The guideline, however, helped them to developit further. A Palliative care Management Committee (PMC) was formed with the panchayat president as the president, the health and educational standing committee member as the vice president and Ambalavayal Panchayat Medical Officer as the secretary. Along with this, a Palliative care Implementation Committee (PIC) was formed to effectively implement and monitor palliative careactivities. A Hospital Management Committee (HMC) coordinates the activities of these two committees in the panchayat.

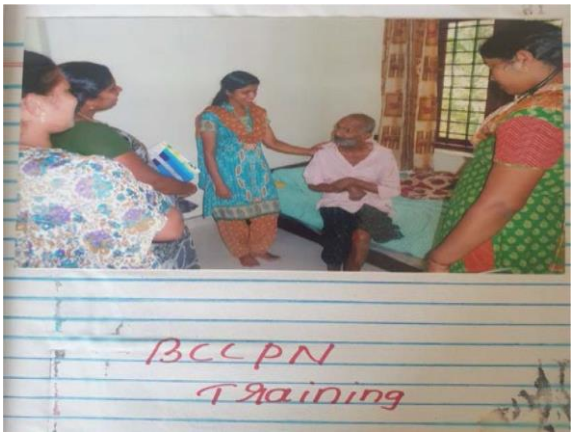
Activities

Over a decade, the Ambalavayal Panchayat could develop effective palliative care units.

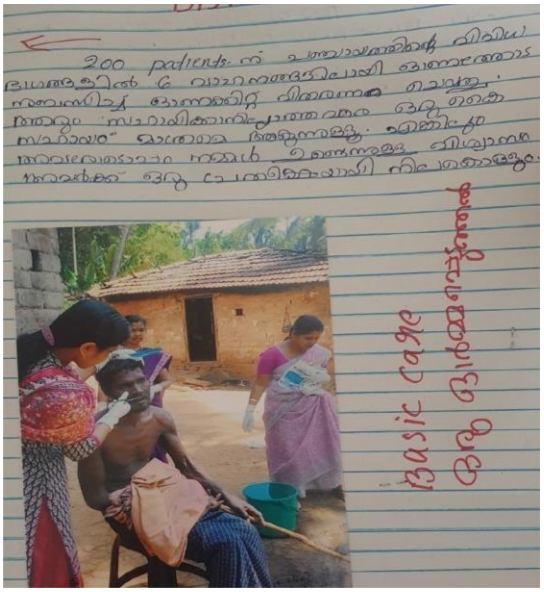
i. Homecare

The team developed for home care could reach and deliver effective services to the patients in need. Along with treatments, the team also providednecessary medicines. For medicines which were not available

through community health centres,the team also arrangedfor medicines from outside the panchayat. The amount required for the purchase was channelised through the Palliative care Management Committee (PMC).



Community nurse, who has completed the course Basic Certificate Course in Palliative Care (BCCPN) interacts with a bedridden patient



A trained nurse gives basic care to a patient

ii. Mental health initiatives

In Wayanad, Ambalavayal Panchayat was the first to initiate consultancy, treatment and distribution of medicines to the patients with mental disabilities. It also provides mental support to the patients under palliative care. In collaboration with the Mental Health Action Trust (Kozhikode), a mental health clinic has been functioning in the panchayat every Friday. They provide consultation and treatment to patients with mental disabilities. This has been effective and helpful to a district like Wayanad which has the lowest rate of psychiatric services in Kerala.

Mental health awareness campaign

iii. Physiotherapy

Patients under pain and palliative care who need physiotherapy are offered the services of a physiotherapist in the palliative care units. At present 85 patients are supported with physiotherapy. 150 patients have been therapisedthrough the project.

iv. Educational equipment

Palliative care units also provide financial assistance to the families of patients from poor economic backgrounds. Distribution of educational equipment to the children during school re-opening has beena major aid provided under the palliative care units. This is being done with the support of the business community in the panchayat.

v. Onam kits

Onam kits including different vegetables and spices are distributed to 200 families on an annual basis. The list of the beneficiary families of the patients under palliative care is updated every year.

vi. Social interactions for patients

A get-together of all patients in the panchayat is organised periodically in the panchayat community hall to ensure collective sharing and bonding among them. This enables easing of mental stress of the patients. The patients are carefully transported to the venue of the gathering with the assistance of an ambulance and three jeeps.

vii. Welfare fund

A welfare fund was constituted in the year 2016 to facilitate emergency needs of the patients under palliative care. This was formed with the support of socially committed people. This fund is collected through different means - amounts collected through donation boxeskept in every shop in the panchayat; individual collections by volunteers during local festivals; funds collected from the *Pooppoli Mahotsava* stalls (a carnival organised by the Agricultural Research Centre in Ambalavayal Panchayat) and joint collections organised by volunteers of palliative care on January 15 (Palliative Care Day). Along with this, donations by expatriates of the locality contribute to a substantial amount of the palliative care fund. The

amount is deposited in the joint account of the Panchayat President and Medical Officer.

Table 1

The amount collected through the welfare fund is listed below:

Year	Amount (Rs)
2016-17	5.5 lakh
2017-18	5.5 lakh
2018-19	10.5 lakh
2019-20	8.46 lakh
2020-21	9.5 lakh

Rs1,000 to 10,000 are distributed by the palliative care units to the needy bedridden. The needy are identified through discussions with the Area Development Society (ADS); applications received from Kudumbashree; report submitted by the community nurse and the recommendations by the ward member. According to these, a cheque is distributed to the patients in need.

viii. Rehabilitation programmes

Rehabilitation programmes are developed for patients with physical disabilities. This helps them to survive the physical disabilities and to earn a living. Patients with lower body coma are involved in various activities like umbrella making, soap powder making, cover making for medicines and such others. More projects for economic support which were envisaged, have been delayed now due to the Covid-19 pandemic. Rehabilitation programmes – training and providing basic amenities-- are carried out through the *Arogyakeralam* project. Soap making; umbrella making;

preparation of medicine covers; paper pens and so on, are being carried out by the patients.

Economic analysis

From the initial phase itself, a fixed amount of Rs 3 lakh was earmarked from the plan fund of the panchayat for palliative care activities. This amount has increased in the consecutive years to Rs 12 lakh in the year 2019-20 and to Rs16.5 lakh during2020-21. This fund is being used for medicines;paying honorarium to the community nurse; stationery expenses; rent for vehicles and other running costs. Other expenses for palliative care activities are generally collected through voluntary contributions and donations. Financial assistance is also sanctioned to the patients from the welfare fund. There is a monthly audit of financial activities. Apart from the Palliative care Management Committee (PMC), the hospital management committee also verifies the income and expenses of the fund.

Public participation

The successful functioning of palliative care programmes in Ambalavayal Panchayat owes itself a great deal to the active participation of like-minded people. Their physical, mental and financial participation needs special mention.

- **Residents of Ambalavayal Panchayat**: Help from the people of the Gram panchayat has been the main resource for its palliative care programmes.
- **Business community**: Each and every merchant – small scale or large scale – has wholeheartedly supported the programme. The merchants are happy to sponsor study materials, free of cost, during the opening of schools.

- **Expatriates**: The *pravasi*(expatriate) friends of the panchayat has been extending full support for the smooth functioning of palliative programmes through donations, sponsorships and other forms of aid.
- **Kudumbashree**: Mobilising the patients, collecting donations from neighbourhood, providing basic care are all being done with the help of Kudumbashree members.
- **Ayush Department**: The department has extended great support for the implementation of the project, providing ayurvedic medicines, counselling and so on.
- **Health Department:** Health officials have been in the forefront in implementing the project efficiently and effectively since its inception.
- **Gram panchayat:** The local administration has played the lead role by providing funds;monitoring the project; mobilising donations; organising support from higher authorities and ensuring timely interaction with key functionaries.
- **Scheduled Tribe Development Department:** Through field level officers like the Tribal Extension Officer, the department has kept a keen watch on the project and provided timely help for bedridden patients belonging to the tribal community.

Many other organisations, institutions such as the Mental Health Action Trust Kozhikode; Vinayaka Nursing School, Sultan Bathery; Janamaithree Police;individuals including volunteers, have all supported the project in its effective implementation.

The way forward

Even though the palliative care units in the Ambalavayal Panchayat have recorded effective performance over the years, there are many

challenges,including lack of bystanders for scheduled tribe patients under treatment;shortage of vocational training;scarcity of community nurses; lack of adequate rehabilitation centres and many other impediments. However, through the collective will of the people and organisations, Ambalavayal Panchayat has succeeded in overcoming all hurdles and continues its march forward in palliative care.

Solace in Solitude

Mala Gram Panchayat

Very often, it is loneliness and indignities that cause more pain and despair tohome-bound patients. This realisation led Mala Gram Panchayat to launch its pain and palliative programme which soon became a complete system of support and solace that helped raise the confidence, dignity, and relief of the sufferers. In the process, the panchayat created new landmarks in palliative care. For instance, the mobile care unit during the Covid pandemic found mention even in national media.

Profile of Mala Gram Panchayat

Area	28.35sq km
Total wards	20
Population	38,853 (2011 census)
Male	20,540
Female	18,313
SC	3,960
Literacy	93.78%
District	Thrissur

Block Panchayat	Mala
L.A. Constituency	Kodungallur
Parliament Constituency	Chalakudy
Taluk	Chalakudy
Villages	Kuruvilassery Vadama North side Annallur

Meaningful interventions

Plan guideline reiterates the need for prioritising projects for ensuring the physical, mental and cultural welfare of senior citizens and creating systems to ensure support for them. Palliative care, treatment facilities, supply of medicines and nutritious food for the bedridden elders have been allowed under the local administration's jurisdiction in accordance with G.O. (ORD) No. 3217/2015/LSGO, dated October 29, 2015. There is also provision for appropriate apparatus and remedial systems for them. Hence the allocation of funds,since the last decade,has gone well above the mandatory limit of five percent.

When asked about the relevance of the programme in the Mala Gram Panchayat, the elected members said, "We owe much to our predecessors in disseminating knowledge and experience in a wide variety of fields. At the sunset of their lives, we should love them and care for them. To exchange the intangible heritage and the ocean of managerial and indigenous wisdom possessed by the elders to the new generation is of significance. It is important to remindthe youth of the imminence of old age, sooner or later."

Objectives

Social justice and economic development are the enduring goals of the Panchayati Raj. Hence the project aims to clear the hurdles in social welfare measures. The ascending rate of aged population invites special attention for geriatric care. The goal is crystal clear.

- Implement extra projects for bedridden patients.
- Identify those in need such as those with permanent disability;those who need home care; out-patients; people with nephrology, cardiac issues; cancer patients and others
- Categorise them for first and secondary palliative care.
- Provide aid and medical equipments like walkers, wheelchairs, medicines and other basic amenities.
- Implement I E C programms to bring members of family, volunteers and agencies to the forefront for the timely protection of those who are in their sunset years.
- Provide relief to patients with incurable illnesses.

Features

The programme is characterised by two levels of care arrangements viz. primary care and secondary care, both related to each other. The units that give primary care are managed by the Mala Gram Panchayat and the units extending secondary care are manageed by the Mala Block Panchayat.

Palliative care unit, CHC Mala

Primary level palliative care is being ensured through 12 home care visits, comprising three visits, every week. Distribution of wheelchairs; water beds; air beds; walkers;clothes and medicines are managed by the Mala Gram Panchayat.

Secondary level palliative care programmes are managed at the block level under the auspices of CHC, Mala. Referral and specialised palliative care services are extended here.

Target

Sl. No.	Particulars	2013	2014	2015	2016	2017	2018	2019
1	Registered	150	150	138	140	100	120	140
2	Follow up	50	60	68	80	70	75	80
3	Death	26	-	-	-	-	-	-

There are 84 patients in the primary care and 42 in the secondary care facilities. 30 anganwadis and 32 ashaworkers are in the forefront.

The beginning

The plan guidelines set apart a minimum five percent of the development fund including SCSP and TSP for elder and palliative care. However, way backin April 2013, Mala Gram Panchayat had created a milestone in the field, providing four lakh rupees. The allocation reached a peak of Rs 6.5 lakh in 2019. This is apart from the funds mobilised through volunteers, contributions and donations. The cost details are summarised below:

2014 : Rs 5 lakh
2015 : Rs 5 lakh
2016 : Rs 5 lakh
2017 : Rs 5 lakh
2018 : Rs 6 lakh
2019 : Rs 6.5 lakh
2020 : Rs 6 lakh

Warriors on wheels

Neighbourhood Network of Palliative Care (NNPC) is constituted every year with asha workers, representatives of NGOs and local volunteersas members. Based on the initial survey of NNPC,the bedridden are shortlisted. Thereafter the team squad comprising of a doctor,ANM, JHI, JPHN inspect the patients and grade their needs for ensuring primary, secondary or tertiary care.

Flow of events

Some of the following events constitute the major highlights of the programme.

January 16, 2015	Palliative Day celebrations and Family Meet. Memento to two families for providing the best palliative care.
January 27, 2017	Distribution of bedsheets to 65 patients.
February 20, 2018	One-day orientation for 34 anganwadi workers and 33 volunteers.
March 19, 2019	Family meet of ailing individuals – 153 relatives took part. Provided blankets and pillow covers to 90 beneficiaries.
February 24 -26, 2020	3-day volunteers' training programme at the Mala Block Panchayat hall.
Rehabilitation training	Training in the manufacture of dish wash;toilet cleaner; paper pens; handwash; medicine covers etc for patients and bystanders.

Participating community

There has been participation from a wide range of stakeholders in the programme.

- Kairali Grandhalayam (rural library), Anappara, collected and handed over aids and appliances like air beds, suction machines, sanitary napkins and so on to the palliative unit.
- The Lions Club and other organisations and individuals have also offered help.
- Sponsorships are mobilised from individuals and groups to address the needs of the bed ridden.

Results

Home visits by staff are a bright spot in the otherwise dreary lives of home-bound patients. Engaged in the camaraderie, they chat, share personal feelings and request for repeated visits. Constant care has helped in reducing bed sores in bedridden patients. Clubs of senior citizens and a panchayat level committee have been formed for elder care. Monthly unions, classes, tours and sponsored programmes are also on the anvil. Two colostomy patients are now going for work.

Challenges

At the time of floods and the Covid 19 pandemic, instructions and intimations were given regularly. So too essential visits. Members of the family are also being trained to attend medical emergencies. Some patients have the habit of removing tubes, attached to their bodies as part of treatment. Reaching patients in such cases, without own transportation has been a challenge. Fiscal and physical constraints, indifference of some families and patients with comorbidities have aggravated the situation. Patients have shown a great deal of improvement after physiotherapy

sessions. They may not have enough space or willingness to do it at home. Still earnest endeavours by the panchayat and others keep the mission moving.

With a view to understanding the priorities and needs of the differently abled, senior citizens and Scheduled Tribes their voice requests are recorded in special Gram sabhas and genuine demands are addressed. Some patients were living in sad conditions, having no cots or beds, attached bathrooms, caretakers and sometimes without even basic necessities including sanitation facilities. Mala Gram Panchayat conducted *sneha yatra*a programme that organises small tours for bedridden patients by providing wheelchairs and vehicles. Regular home visits of a group including LSGD members and officials were also conducted. Palliative care can become more effective if it is designed as an integrated project amalgamating heterogeneous funds; services; schemes; departments and others. The pandemic of Covid-19 has put the brakes on the momentum of the project temporarily. The palliative care programme, as it is made mandatory every year, coupled with a high level of voluntarism attached to it, will see its natural extension every year.

Interventions during Covid-19

When horror and helplessness enveloped the whole world during Covid-19, Mala Gram Panchayat lighted up a new path in healthcare. Due to the complete lockdown imposed by the government, patients of all sections suffered a lot. Then with the approval of the District Medical Officer, the panchayat launched a mobile clinic. The panchayat purchased the medicines, while Holy Grace Academy, Mala, released the college bus, free of cost. Panchayat members; doctors; nurses; technicians all visited two or three centres in a ward daily. Patients with lifestyle diseases were examined and medicines were distributed to them. The entire team used to visit

palliative patients with a view to serving them better and providing essentials. It was a first of its kind in the state and the Chief Minister requested other panchayats to start such mobile clinics. Those who were in hardship physically, mentally and economically, felt that they were not alone in this pandemic, but were being looked after by the panchayat, Health Department and the public.

Highlights

Quality of service has been the highlight of the palliative care initiative of Mala Community Health Centre. The secondary palliative care unit was initiated on June 9, 2018, under the aegis of the Mala Block Panchayat.

The panchayat campaign was unique for its collaboration with various departments. Under the leadership of the panchayat members medical teams the Social Justice Department and media visited the houses of palliative care beneficiaries frequently. So the members of the family of the affected were always kept on high alert as regards patient care and hygiene. A considerable amount of Rs 6 lakh to Rs 6.5 lakh has been earmarked for this purpose every year. The standing committee for health and education spearheaded the programme. All the efforts helped raise the confidence, hope and relief of the sufferers and in the process the panchayat created new landmarks in palliative care. For instance, the mobile care unit during Covid times, found mention even in national media.

A Tribal Resurrection

Meenangadi Gram Panchayat

The Santhwana Souhrudha project of Meenangadi Gram Panchayat tells the amazing story of rehabilitation and resurrection of a community of tribals afflicted by the malady of drug and alcohol addiction. The decade-long effort gave a new facet to the pain and palliative programme in Kerala. Rather than providing just medical and palliative support,theinitiative helped the highly marginalised tribal communities rediscover their true ethos and lifestyle and along with it, their identity and dignity. Thus it has widened the scope of palliative programmes in a tribal setting

Wayanad has been home for a society that has been in the process of evolution from the prehistoric period. It was also a region where people from all walks of life congregated. The tribal population is very prominent in the Wayanad region. The major tribal communities that inhabit Wayanad are the Paniyas; Kurichyas; Malakurumar; Ooralikurumar; Kattunaykkar or Theankurumar; Kadar and Adiyar. All the inhabitants, other than the aboriginals, had migrated from various places to Wayanad over the last century. Owing to the increasing population, there have been various types of diseases spreading in the region. It is a reality that there is still no system in place to effectively predict, identify or treat such diseases. It has clearly affected the tribal people who forms a major part of the population of Wayanad.

An extensive data collection of tribal hamlets was carried out by KILA in collaboration with the LSGs and the Department of Tribal Development during 2009. According to the data collected, there were 36,135 ST families living among the 3,000 Scheduled Tribe colonies in the district. The survey was conducted as a comprehensive analysis of the development aspects of

education; health; employment and livelihood; infrastructure facilities; social security; land ownership; culture; interaction with the forest and isolated settlements of the tribal communities in the district.

New infectious diseases (KFD, Scaub Typhs,) waterborne and vector borne diseases pose a threat to the public health sector of Wayanad. This was caused due to the particular geographical characteristics of the region, diverse demographical features,because of the fact that the region is a hotspot of climate change and also due to variations in the biological and forest sector components of the district. The tribal population could no longer maintain the interactive relations with the forest like former generations due to various factors. The culture of self-reliant agriculture had also been lost. As a result they have lagged behind in terms of health and life expectancy compared to the population in other parts of the district. Infant mortality rates are much higher in the district. On account of the development of the health sector, maternal mortality rates have been falling. The number of people with serious illnesses and also people who are differently abled to the level of not being able to take care of their daily needs are also higher. It is under such severe conditions that the problem of alcohol and substance abuse developed among these people.

Profile of Meenangadi Gram Panchayat

Meenangadi Gram Panchayat is one of the major settlement areas located in the SulthanBatheryTaluk of Wayanad. The panchayat extends to an area of 54.12 sq km and has a population of 33,450 in 8,199 households, that includes 16,624 males and 16,826 females. The population density is 618, as per the 2011 census. According to the 2011 census the tribal population of Wayanad district is 1,51,443 (74,476 males and 76,967 females). Among them 7,775 reside in Meenangadi Gram Panchayat. The male-female split is 3,843

and 3,932 respectively. This accounts to above 23 per cent of the total population of the Gram panchayat.

According to the survey conducted by KILA, following were identified as the major scheduled tribe communities in Meenangadi GP

1. Kuruma (MulaKurumar)
2. Paniya
3. Kattunaykka
4. Oorali (VettuKuruma)

Out of these tribal communities the Paniya and Kattunaykka communities deserved particular consideration because of their poor health conditions and addiction to alcohol and other intoxicants. Malnutrition faced by pregnant women and children deservedspecial attention. At the same time, these people who were mainly farmers and depended on agriculture for their livelihood had been withdrawing from farming and as a result they had to suffer famine and ill health. Life became more difficult as a major portion of the income that they received occasionally were kept aside for drug consumption.

It was in this context that the Meenangadi Gram Panchayat formulated a comprehensive development programme named *OruumayodeMikavilekku* (Together to Excellence). As a part of this, the *SwanthanaSouhrida*(solace friendly) project was conceived to improve the quality of life of Paniya, Kattunaykka, and Oorali communities by reducing their addiction to intoxicants and helping them lead a happy family life. Along with the support of the pain and palliative care project, this project aimedat giving a second chance at life for a group of aboriginals, who were addicted to intoxicants, had lost their health and ability to work and were struggling for a livelihood.

As per the revised order (553/2019) of the Government of Kerala dated March 7, 2019,the need and importance of local bodies to be actively involved in the palliative care sector was highlighted. The order also stipulated that a certain percentage of the plan outlay allotted to local bodies should be earmarked for pain and palliative care activities. This was from the five per cent fund to be allocated for the care and welfare of the aged. The Meenangadi Gram Panchayat resolved to implement such a project, considering various factors such as the government orders, recommendations from the Gram sabha and also the realisation that there were many young people in the panchayat who had lost their health and livelihood due to excessive drinking and drug addiction. The Medical Officer (ISM) who was also in charge of the health-related project in the panchayat made things easier, by coming forward wholeheartedly to implement this project.

The project envisioned expanding employment opportunities by integrating the expertiseof various government and non-governmental organisations. The project aimed at rehabilitating and encouraging the cultivation of natural tubers and other food crops, which were widely used among the tribal population in order to ensure availability of nutritious food.

During the financial year 2012-13 the project was launched at Athikkadavu Colony in Appadu, the second ward of the panchayat. As the project was successful, it was expanded to other colonies over the years.

Developmental significance

Utilising the infinite possibilities of Ayurvedic practices and driven by innovative ideas, the project, implemented with the involvement and participation of public as well as various agencies,aimed atthe recovery and return of tribal youth from the dissipated culture that had engulfed human society in contemporary life.

The major reason behind the formulation of this project was the recognition of needful social interventions to resolve the basic issues of people who had withdrawn themselves from moving forward, without experiencing the benefits of the social development process. Hitherto the pain and palliative care activities among scheduled tribes of the panchayat were limited to mere provision of medicines and medical treatment. Based on this fact, the panchayat decided to consider and solve the basic health issues of tribal people. The project, *SanthwanaSouhrudham*, was thus designed by including various facets of social development such as their employment; education; basic amenities;cultural activities andaddiction related issues along with health.

The total number of scheduled tribeswas 7,730 belonging to 1,854 families of 106 colonies in Meenangadi Gram Panchayat. It constituted 22.34 percentage of the total population. There were 3,669 people in 889 families who belonged to Paniya, Kattunaykka and Oorali, the most backward communities among the tribes. These people who were endowed with good physique and health had started showing deterioration in their health and lifespan. They were addicted to drugs and alcohol from childhood and were

unaware of the danger behind such habits. *SanthwanaSouhrudha* project was initiated, aiming at bringing these people back to a normal healthy life by freeing them from the clutches of drugs and alcoholism by providing consolation and companionship to them.

Athikadavu Colony residents who owned their land through the Forest Act had attained all basic amenities like food, clothing and home. But they were still backward when it came to health and aptitude for hard work. The main reason behind this was their addiction to drugs and alcohol. This also led to their exploitation by unscrupulous elements who subjected them to slave labourand sexual abuse. Hence the first step of the *SanthwanaSouhrudha* project was started at Athikadavu Colony which consisted of 83 families.

These experimental activities were completed successfully and the living standard of more than 80 per cent of the population became much higher. Inspired by the success, the second phase activities were started and extended to colonies named Panchami,Eucalykavala and MadoorThekkin Colony where similar conditions existed. The third phase wascentred around colonies such as Chanthanchira; MadoorKattunaykka Colony; Adichiladi;Meethalloor and Panthalam. **Objectives**

1. To ensure health security through palliative care programmes
2. To ensure socio-economic-cultural development of the tribal people who were alienated from social life due to their addiction to drugs and alcohol.

Secondary objectives

a. To realisethe integrated and sustainable upliftment of tribal people
b. To protect young generation fromalcohol/drug addiction
c. To provide opportunities for personality development
d. To promote indigenous arts and culture

e. To ensure food security by recapturing the region's farming culture
f. To create job opportunities and to develop a positive work culture
g. To help tribal people transform into a self-respecting society by rediscovering their identity.

Project beneficiaries

397 families of nine tribal colonieswere the beneficiaries selected for the project. The total number of families was 1,710. Further details are given in the table below.

Sl. No.	Name of colony	Category of Scheduled Tribe	Families	No of family members			
				Females	Males	Children	Total
1	Athikadavu	Paniya	36	53	49	17	119
		KattuNaykka	38	58	68	19	145
		Oorali	9	13	12	5	30
		Total	83	124	129	41	294
2	Panchami	Paniya	37	56	47	10	113
		KattuNaykka	27	79	80	10	169
		Oorali	2	3	2	34	39
		Total	636	138	129	54	321
3	Eucaly Kavala	Paniya	2	5	3	3	11
		KattuNaykka	35	63	69	44	176
		Oorali	24	51	53	26	130
		Total	61	119	125	73	317
4	Madoor Thekkin Colony	Paniya	22	31	24	15	70
		KattuNaykka	34	50	46	25	121
		Oorali	0	0	0	0	0
		Total	56	81	70	40	191

5	ChanthanChira	Paniya	37	99	93	22	214
		KattuNaykka	0	0	0	0	0
		Oorali	0	0	0	0	0
		Total	37	99	93	22	214
6	Madoor Kattunaykka Colony	Paniya	0	0	0	0	0
		KattuNaykka	28	35	36	6	77
		Oorali	0	0	0	0	0
		Total	28	35	36	6	77
7	Adichiladi	Paniya	27	58	51	14	123
		KattuNaykka	0	0	0	0	0
		Oorali	0	0	0	0	0
		Total	27	58	51	14	123
8	Methalloor	Paniya	21	40	34	7	81
		KattuNaykka	0	0	0	0	0
		Oorali	0	0	0	0	0
		Total	21	40	34	7	81
9	Panthalam	Paniya	18	35	33	24	92
		KattuNaykka	0	0	0	0	0
		Oorali	0	0	0	0	0
		Total	18	35	33	24	92
	Total		397	729	700	281	1,710

Families belonging to the Paniya, Kattunaykka and Oorali tribes faced several socio-economic and health issues. They were basically the most backward communities among scheduled tribes. Nine scheduled tribe colonies were identified for intervention namely Athikkadavu; Panchami; Eucalykavala; Madoor Thekku; Chanthanchira; Madoor Kattunaykka; Adichiladi; Methalloor and Panthalam.

Project implementation

Project implementation consisted of eight stages as detailed below.

1. **Preparatory activities:** The first phase consisted of focus group discussions, policy formulation and field investigations. Focus group discussions were conducted through special meetings of senior citizens, ladies groups and children's groups (art troups).

2. **Formation of Committees :** For the smooth conduct of the programme several committees were formed including a panchayat level coordination committee,colony development committees (local residents, tribal promoters and voluntary organisations as members), sub committees at all colonies and cluster committees of ten houses.

3. **Integrated training programmes:** Awareness programmes against drugs and alcoholism were organised at each colony. Due to continuous interventions and interactions, the programme was eventually accepted by the residents. Members selected from the committees were given several training sessions at various phases by experts on colony development; personal hygiene; lifestyle diseases; family budgeting; unity of colony residents; data collectionand so on. Through these training sessions, members acquired new skills to manage the activities related to the project.

4. With the help of LCD projectors, video presentations were done at night in all colonies highlighting the pathetic conditionof addicts who encountered death in the end. Ayurveda doctors and field staff of the Department of Health took classes on the adverse effects of drugs, pan masala and alcohol in the human body and the gradual rejection of victims by family and society.Influenced by the awareness programme, colony people took a pledge against drugs and alcohol.

Data collection

On the basis of data required for the project, a data collection format was prepared by experts. At the training workshop this form was introduced to members assigned for collecting the data. In the prescribed form details of the members of each family were collected. Instead of the questionnaire method, data collection was done in the form of discussions. Analysis of the data helped to understand the status of each colony and a plan was formulated for the activities to be carried out there. After detailed discussions the panchayat committee took decisionson the action plan to be implemented.

Data collection from tribal settlements

No	colonies	familes	Families completely de addicted	Families partially de addicted	Families completely addicted	Hygiene status in Families	Families whose health progressed	Families which focussed on children's education	Families having employment
1	Athikadavu	83	30	51	2	83	71	18	74
2	Panchami	66	26	23	17	59	51	60	22
3	EucalyKavala	61	9	52	0	50	46	52	37
4	Madoor Thekkin Colony	56	5	50	1	56	50	50	54
	Total	266	70	176	20	248	218	180	187

Programme implementation Medical camps and counselling

Based on the data collected, the colonies which were backward in health status were visited by a group of expert doctors and given treatment. The doctors visited such colonies every month and medicines were given to the patients. Those who required counselling were given counselling by taking them to the experts. This helped them to lead a healthy life without diseases.

Colony-wise data on pain and palliative care

No	Name of the colony	Total number of patients	Health issues identified	Palliative programme: Nature of care/ treatment given	Remarks
1	Madoor	106	Lung diseases Skin diseases Lifestyle diseases Rheumatic complaints Menstrual complaints (for ladies)	Medicines, Speech therapy Counselling Orientation *Oorulsavam* (for mental satisfaction) De-addiction camp	Medical camps were conducted in the three colonies. Patients from six nearby colonies were also treated atthe same camp
2	Panthalam	75			
3	Panchami	76			

Integration of various departments

A special meeting of officials from various departments was arranged by the panchayat committee and decisions were taken for implementing important activities required for each colony as per the survey findings. Joint efforts of various government departments such as the Department of Ayurveda; Homoeopathy; Excise; Police; Scheduled Tribe Development; Education; Law; Dairy Development; Civil Supplies and Water Authority helped make these efforts more fruitful. Various integration possibilities of Mahatma Gandhi National Rural Employment Guarantee Programme; Kudumbashree; Akshaya; banks and other supportive agencies like M S Swaminathan Research Foundation (MSSRF); Pazhassi Society; voluntary organisations were all explored at various stages of programme implementation.

Rehabilitation

Many supportive and rehabilitative activities were undertaken as part of the programme.

Livelihood programmes

All the families were given job cards through The Mahatma Gandhi National Rural Employment Guarantee Scheme. 241 new bank accounts were opened. Males were selected from colonies and jobs were given at their own colonies through MGNREGS. The income received through bank accounts motivated them and enhanced their confidence level.

Two families in every colony were given cow and shed with the assistance of Milma, Wayanad, and Meenangadi Dairy Cooperative Society, which ensured a stable income for them. The Civil Supplies Department issued 221 ration cards to families without ration cards. With the cooperation of Kerala State Electricity Board, 242 families obtained electricity connection. Assistancewas given to 212 membersto obtain aadhar cards and identity cards.

Continuing education programme

The illiterate colony residents were given education at their colonies without any age limit and they learnt to writeand sign their names. Children who were unwilling to join school were taken to school and arrangements were made for re-admitting children who had dropped out of school. Three commitee members served as mentor teachers and one as a tribal promoter as part of this programme.

Gatherings at colonies

To encourage deeper bonding between families, a cluster committee for 10 houses was formed and a convenor and chairman were appointed for the

same. In the meetings which were conducted twice a month, health, hygiene and family atmosphere of the ten families were discussed and solutions found for their problems. Organic farming was introduced at these homesand families were encouraged to exchange the produce among themselves as a token of friendship.

Village festival

A village festival was held at MadoorThekkin Colony where people from all nine colonies participated. They performed their own traditional art forms like *vattakkali*; *thudi*; *kuzhal* and folksongs along with modern arts forms like mimicry; mono act; *thiruvathirakkali*;film songs and group dance. An appropriate stage was providedfor these stage performances. Awareness workshops, counselling and sharing of life experiences were also conducted along with the village festival. This was intended to create an atmosphere that encouraged their indigenous cultural practices thereby promoting mental happiness and self respect among tribal groups.

Documentation and monitoring

All the programmes implemented in connection with *SanthwanaSouhrudha* projecthas been documented. News items were published in local channels and newspapers. Summary report was published in book form.

Results

The Kerala model of healthcarehas beenglobally acclaimed. Due to various reasons, tribals have still not fully benefitted from this model. *SanthwanaSouhrudha* project was able to reduce their affinity to drugs and alcohol addiction to some extent through scientific interventions. Alcohol and drug addiction was identified as the main reason for several diseases including lifestyle diseases among tribalsin these colonies. The comprehensive and indirect interventions helped rehabilitate addictsand

lead them to a healthy life. The programme was able to reduce family conflicts and violence and helped to maintain a peaceful family and social order.

Parents were persuaded to give more care and attention to the education of their children. Today, the number of school dropoutshas reduced considerably. Malnutrition problems have also been solved. A culture of working and making a livelihood has successfully been inculcated among these tribals. This has improved their standard of living as well. Improved personal and social hygiene has reduced the incidence of communicable and fatal diseases. Hence it can be concluded that the *SanthwanaSouhrudha* project has been instrumental in ensuring thehealthand upliftment of tribal people.

Constraints in implementation

- Lack of adaptive models posed a challenge at the planning stage
- Each community had its own particular tradition, infrastructure and lifestyle different from others. So conducting a common comprehensive programme was not easy.
- As qualitative data collection method was followed, it was difficult and time consuming.
- At the initial stage, it took time and effort to convince the public about the programme.

Success factors

The factors summarised below contributed to the success of the programme.

- Co-operation of the panchayat committee
- Public participation in the acceptance and implementation of the programme

- Collaborative efforts of the Departments of Ayurveda; Homoeopathy; Excise; Police; Scheduled Tribe Development; Education; Law; Dairy Development; Civil Supplies and Water Authority
- Various schemes and organisations like Mahatma Gandhi National Rural Employment Guarantee scheme; Kudumbashree Misison; Akshaya; banks, M S Swaminathan Research Foundation (MSSRF); Pazhassi Society and voluntary organisations which were all integrated at various stages of implementation
- Cooperation of the colony residents and support of women groups which helped implementation
- Commitment and support of resource persons and tribal promoters through the entire programme

Accolades for the programme

- Meenangadi Gram Panchayat has won the Arogya Keralam award of the year 2013-14 for the implementation of this programme through public participation.
- The Indian System of Medicine selected Meenangadi Government Ayurveda Dispensary, which attained public attention through the *Santhwana Souhrudha* project, as one of the model institutions in the district as per the guidelines of Kerala Accreditation Standardsfor Healthcare(KASH Ayush).
- As this project got attention, Kerala Institute of Local Administration (KILA) made a field study of the colony. As a result, several Gram panchayats and the Folkore University of Karnataka also conducted study visits, with a view to replicating the model.
- In the year 2016-17, the panchayat was shortlisted for the Arogya Keralam award.

Future plans

Considering the success of this programme, the panchayat has decided to scale up the activities as given below:

- Establishment of a disease-free village - saying no to alcohol and drugs
- Extension of the programme to all villages of the panchayat, step by step
- Job training, career guidance for youth to improve their job skills
- Training in arts and sports at villages
- Submission of plan proposals aiming at the comprehensive development of the tribal sector

Financial analysis

The Gram panchayat earmarked Rs 4 lakh for this programme during the year 2017-18. Additional financial resources of various departments including the AYUSH Department (NAM) were also effectivley mobilised.

The *Santhwana Souhrudha* project of Meenangadi Gram Panchayat has added a new dimension to the pain and palliative programme of Kerala. Being a comprehensive programme,it was designed with an emphasis on various livelihood factors aiming at the social and economic upliftment of the highly marginalised tribal communities, rather than providing them with medical and palliative support alone. Thus it has widened the scope of palliative programme in a tribal setting. Project *Santhwana Souhrudha* has given the utmost priority to ensure the mental and physical health of the tribal community. This also effectively combined both modern and traditional systems of medicine. This model thus merit sbeing replicated by other Local Self Governments of Kerala.

The Healing Touch

Vettikavala Gram Panchayat

It is said that a kind gesture can reach a wound that only compassion can heal. Aaswas, thepain and palliative care project of Vettikavala Gram Panchayat, epitomises this, having offered relief to hundreds of bedridden and differently abled people in the locality not by just providing medical care. But by the healing touch of human love and support that has come flooding in, effectively channelised by the panchayat into meaningful interventions. Today, its beneficiaries are facing life with a new joy, hope and purpose

Vettikavala Gram Panchayat is in Vettikkavala Block in Kollam District. The panchayat was formed in 1953 and most parts of the panchayat is hilly. The area of the Gram panchayat is 36.23 sq km and consists of 21wards. Agriculture is them a in source of income of the people. In the health sector one Primary Health Centre and one Ayurveda dispensary are the institutions located in the Gram panchayat. For major accident sand illness, the panchayat resorts to the services of the Taluk Hospital, Kottarakkara, private hospitals or the Medical College, Thiruvananthapuram.

A PHC, six subcentres and an ESI hospital come under the GP. GP funds are also used to purchase medicines at the PHC and under the Aardram programme the PHC was converted to a family health centre. As per the 2011 census, the total population of the panchayat is 36,204, out of which 16,864 are males and 19,340 females. 5,725 residents fall in the SC category.

Aaswas palliative care project

At a meeting he ldon August 18, 2010, the Gram panchayat decided to start the Aaswas palliative care project to support and cure the aged, differently

abled people and those with critical illness. The members of the GP, health workers and health working group members were present at the meeting.

Aaswas pain and palliative care project was a novel project initiated by the Gram panchayat. 492 persons have so far been given home care under this project. Those receiving care were also given opportunities to participate in functions like onam celebrations with their family members and all of them were presented with onam kits and bedsheets. Onam kits, medicines and financial assistance for 18 patients came through sponsorships. 56 differently abled patients in the age group of 30 to 50 were given mobility assistive devices and four of them were given skill training under the *Aaswas* programme.

Programme components

Though palliative care is considered as a project to be earmarked every year in annual plan, in Vettikavala Gram Panchayat, this is seen as a comprehensive programme having the following components.

i **Project team** :This included the constitution of PMC and the appointment of a palliative care nurse.

ii ii. **Data collection** : Data collection was done to find out those in need of care and to identify new cases.

iii **Home car**e: Home care has been given at regular intervals for nearly 500 cases.

iv **House visits :** Apart from home care, house visits were held every month to ensure needed assistance

v **Medicines**: Medicines were provided to the patients registered for palliative care through the PHC. Special OP sessions are being conducted for this every Monday.

vi **Aids and devices:** Aids and devices were distributed to the needy at their homes, based on house visits and assessment. Wheelchairs; water beds; air beds; commode chairs; walkers; bedpans; cervical collars; elbow crutches; splints with fingers and arm crutches were the primary aids and devices distributed.

vii **Support services** : Prompt action is taken by the GP to avail of assistance under schemes like *Aaswas Kiran* and *Karunya* pensions. Special care has been provided to the SC/ST women and the differently abled. Special attention is being given to cancer and kidney patients and persons with mental and physical disablilties. Several support services were extended including conducting of family gettogethers of patients during festival seasons like Onam. Apart from providing onasadhya, Onam kits were provided amounting to Rs 500/. This cost was met through sponsorships.

viii **Rehabilitation services** :Skill development programmes and economic development programmes including livelihood promotion programmes were taken up as part of rehabilitation services.

ix **Training and sensitisation:** Training was given periodically to significant stakeholders including Kudumbashree workers, Asha workers and volunteers at fixed intervels.

Awareness classes on palliative care were conducted in every ward of the Gram panchayat. Classes included sessions on lifestyle diseases, retinopathy, cancer detection and soon.

Funds required for the project were primarily met from the plan fund of the Gram panchayat. Medicines and food were mobilised through sponsorships with the help of volunteers. By marking sponsors of local club members, NRIs and public were made active participants of the pain and palliative care project. Financial assistance to patients, support to bystanders of patients in hospitals and sponsorships for food kits were the main assistance rendered by NRIs.

Notable features

- Weekly house visits of Asha workers
- Special OP on all Mondays
- Comprehensive sensitisation on Palliative Day
- Distribution of food kit and clothes
- Secondary palliative care assistance for cancer, dialysis and mental patients.
- Weekly assistance of a palliative care nurse
- Integration of ayurveda, homeo and allopathy treatments as per requirement.
- Distribution of aids and appliances to the needy
- Training on rehabilitation and employment
- House visits by Kudumbashree and Asha workers and volunteers. These visits also became counselling sessions.

Status of bedridden patients

Year	No of registrations	No of deaths	No of patients whole ft the programme	Those who were left in the register at the end of the year
2018-2019	818	327	8	483
2019-2020	1,068	504	62	492
2020-November	1,138	546	100	492

Patients who had met with accidents were included in the register and when they fully recovered, they were treated as patients who had left the programme.

*Aaswas*palliative care project targets 16 home care visits every month for a patient (weekly four visits). Weekly two visits are targeted in secondary home care for the needy (for instance, deep wounds). They are included in the secondary home care register. Change of nasal and other tubes; bathing assistance; nail cutting and cleaning; BP and sugar testing are all part of the palliative care assistance provided by the team.

Disease profile of registered cases

Age group	Number	Disease
5-10yrs	3	Cerebral Palsy
10-18yrs	4	Cerebral Palsy
18-40yrs	6 22 2	Mental retardation Stroke Kidney failure
40-60yrs	30 10 3	Stroke Cancer Kidney failure
60-80yrs	45	Stroke

	30 25	Cancer Old age
80-90yrs	35 20 10	Old age Stroke Cancer
90 and above	18	Old age

As given in the table, a majority were suffering from serious health issues such as stroke, cancer, kidney failure and others. With regard to cases above 80 years, issues were largely geriatric in nature.

Stakeholders

LSG governing body; people's representatives; Medical Officer; ayurveda and homoeo doctors; the Health Inspector; JHI; JPHN; community nurse; Asha workers;the CDS Chairperson; Member Secretary; PTA student representatives and secretaries of NGOs were the main stakeholders of the project.

List of aids and devices provided

Equipment	Numbers
Wheelchairs	59
Waterbeds	94
Airbeds	18
Commode chairs	57
Walkers	35
Urinals	19
Bedpans	20
Cervical collars	7
Elbow crutches	30
Splint with finger	2
Arm crutches	11

Fund mobilisation

Plan funds, sponsorships and donations were the main funding sources. There are several supportive services extended by the Gram panchayat with the help of the volunteer force.

Fund Utilisation

Year	Fund allocation (in Rs)	Amount Spent (in Rs)	Sponsorships/ donations (in Rs)
2012-13	5,34,960	2,21,928	-
2013-14	5,00,000	4,02,740	-
2014-15	5,00,000	4,13,807	-
2015-16	5,00,000	4,77,949	-
2016-17	6,00,000 .	5,81,520	-
2017-18	7,50,000	7,06,324	-
2018-19	7,50,000	7,38,880	55,500
2019-20	8,50,000	8,28,053	40,000
2020-21	8,50,000 .	2,34,658	-

Results

- Bedridden patients got social acceptance and support and the message that the protection of such patients was the responsibility of the community was spread to every corner of the GP
- Under the leadership of health workers, weekly house visits of bed ridden patients were ensured and their condition assessed.
- By imparting training, by standers were also made part of the palliative care team.
- Provision of medicines, aids and devices to the needy created a big support system for the bed ridden patients.

- Training on rehabilitation and employment created income avenues for the community. The training mainly focused on paper bag, pen and cover making and so on.

Sustainability amidst challenges

Due to shortage of funds, adequate medicines could not be supplied. Treatment of cancer, dialysis and diabetes patients was very expensive. Formation of a ward-wise team of Asha and Kudumbashree workers, NGOs and AWC was a difficult task. Documentation of the activities could not be done properly.

Importance and priority given to the *Aaswas* palliative care project has been well recognised in the GP. As on date, 1,138 patients have registered, of which, 100 patients have recovered, 546 patients have died while 492 continue to be part of the project. Distribution of medicines, aids and devices, clothes and food kits to bed ridden patients was made possible under the project due to the high level of voluntarism.

Monitoring system

For the purpose effective monitoring, 12 registers have been used for the palliative care project. The project has a very vibrant PMC.

1. Nominal register
2. Home care register
3. OP register
4. PMC attendance register
5. PMC review meeting register
6. PMC minutes
7. Stock register (equipment)
8. Stock register (stationery)

9. Issue register
10. Treatment records
11. Volunteers visit report

True stories

During 2014, Babu, aged 38, a resident of the locality, sustained a compression on his vertebra while lifting a heavy piece of timber, which left him paralysed and bedridden. At the time his wife was seven months pregnant and he was totally devastated.

After a year of treatment with the help of the palliative care team, the catheter was removed and he could walk a little. The palliative unit referred him to secondary unit and started physiotherapy. The intervention of the team helped ease his mental trauma, and he made a remarkable recovery. Employment training helped him to eke a livelihood making paper bags, pens and covers. At a certain stage his paper making unit hit a financial crisis and the district panchayat stepped in to help him by providing a tricycle. He started lottery ticket sale and recovered. Food kits and clothes that were provided also helped him in his rehabilitation. Now he has become almost normal. His family has been extremely appreciative of the timely services of the palliative care team which was critical in his recovery and the survival of his family.

In another instance, five-year old Prajith from Kannangode Ward suffered from cerebral palsy and could not speak. He was being taken care of by his mother as his father had abandoned them. The child was registered in the palliative care unit where his needs were assessed and he was referred to these condary care unit followed by a consultation with a physiotherapist. As a result of five months of treatment, Prajith was able to sit up on the bed with some assistance. His condition has now improved significantly and is able to stand up with support. During Onam celebrations he participated in the family gathering and was given medicines and an Onam food kit.

As *Aaswas* pain and palliative care project has been very active in all wards of the Gram panchayat, several patients have benefitted from its rehabilitation programme. Patients and their families really value the services of the palliative care home care unit. One of the nurses working under the palliative care unit remarks, "We see a new confidence in the eyes of our patients every time we approach them." These words speak volumes about the effectiveness of *Aaswas* and its public acceptance. The palliative scheme has emerged as a role model for providing care to the most needy.

Training for ASHA Workers on 2018

Job Training

Job Training