

# ANNUAL REPORT 2016- 17



**SOCIETY FOR INTEGRATED DEVELOPMENT IN URBAN AND RURAL AREAS  
(SIDUR)**

**Regd. Off : 144 / 2RT, VIJAYANAGAR COLONY, HYDERABAD – 500057**

**Adm Off: B51 / F1, Vijayanagar Colony, Hyderabad - 500057**

**CONTACT NO – 040 66368110**

**EMAIL – [sidurhyd@gmail.com](mailto:sidurhyd@gmail.com)**

**Website : [www.sidurindia.org](http://www.sidurindia.org)**

## Secretary's Foreword



*I look back at 2015-16 and the one word that describes the year is 'Challenging'. It has been a year of experimentation, trying new methods and modules. The team demonstrated more tenacity than ever to handle the challenges in the field and we found ourselves innovating. As a team, we all held firm in the belief that no one in our target area should be left out. We need to reach everyone in any way possible. This unified goal had such power that we exceeded our expectations. I feel extremely proud of the team for giving their very best to do more than we imagined.*

*I would like to congratulate all the team of all the programmes for their hard work and the effort that they have put in to make SID'UR what it is today.*

*This year we were able to cater to many communities who were deprived of Water and sanitation. Their lives have been better now and we are happy to see the children regular to schools and they have improved in their academics.*

*The Children's programme on Childline had many challenges and we are proud to say that we were able to deal with 133 number of cases more important of 29 physical abuse and 23 Child begging cases.*

*We are happy to inform the Women's programme at Mahaboobnagar is leading towards the objective of making them into CBOs. They are showing enthusiasm and interest in building up the CBO.*

*Huge thank you to all our co travellers, our donors, advisors, Board members, volunteers, well wishers ad interns for transversing a path with us that is not very easy and faith and conviction.*

A handwritten signature in black ink, appearing to read 'Nanda'.

**Dr.(Mrs.) Nanda Vardhan Thumaty**

## **1. Water and Sanitation Credit Programme (water.org)**

### Secure Water and Adequate Sanitation

Water and sanitation intervention continues to be SIDUR's interest. This programme is for the improved hygiene along with sanitation in preventing water-borne diseases and to motivate the behavioral changes necessary for improved hygiene and sanitation. The outcome of our work so far has given us a better perspective in understanding the concept of hygiene and sanitation in the urban slums of Hyderabad. With this motive we extended this project to other slums in GHMC with the support of Water.org, USA.

This credit programme has five member women groups as a unit called JLGs.

The credit programme intended for the communities of of Begumpet, Yellamma banda, Old city and Borabanda consisting of 120 slums. This programme is intended to supplement the safe water movement along with sanitation and hygiene to bring about healthier lifestyles in the community.

To provide loans to the small and disadvantage communities, SIDUR had made funds available for water and sanitation revolving fund and also loans taken from different individuals. This helped in providing funds to communities and to reach more number of households.

### **GOAL**

- To provide qualitative potable accessible and effective clean drinking water and sanitation to maximum households and hygienic environs in 100 slums of Hyderabad.
- To emphasize on providing funds to small and disadvantaged communities and to programs that encourage pollution prevention as a tool for ensuring safe drinking water.

### **OBJECTIVES:**

- To deliver sustainable health and hygiene benefits to the slum population through improvements in water supply and environmental sanitation services.
- to provide assistance to the slums in identifying and implementing an appropriate Strategic Action Plan for promotion of long-term sustainability of Water Supply and sanitation.

- To implement Water supply and environmental sanitation services in an integrated manner with an added advantage of Revolving Fund benefit.
- To lay special emphasis on hygiene and environmental sanitation awareness and to strive towards ensuring sustainable health and hygiene benefits.



### **Operations – SHG's/JLG's**

The Joint Liability Groups consisting of 5 members are formed within the operational area with all eligibility criteria to form a group or to become a member. The credit is given to the members within the groups. Five such JLG groups total of 25 make a center. They gather every month to collect the repayments and also suggesting for next loan.

### **Problem Statement**

As a result of poor sanitation, there arise Health issues like water borne and fecal borne diseases. Women suffer from lack of privacy and also being burdened with additional tasks. The health issues arising out of poor sanitation and the money spent on this adds up to their economic constraints or woes.

**Impact:**

The effects of this project are multiple in terms of health, poverty reduction, education and equity: The project provides direct benefits to about 1.62 lac inhabitants by the end of project period of 2017 year spread over 100 slums.

**Loan Portfolio:**

Loan Portfolio for the year 2016-17									
S.No	Product	Loan size	Interest	Loan Tenure	No of Loans disbursed	No of JLGs	No of centers	Total Amount in INR	No of Beneficiaries
1	Water	10000	24%	12 Months	1110	222	44	11100000	6660
2	Sanitation	15000	24%	12 Months	930	186	37	13950000	5580
				<b>Total</b>	<b>2040</b>	<b>408</b>	<b>81</b>	<b>25050000</b>	<b>12240</b>

**Advocacy:**

Demand creation for facilities through creation of awareness for eliminating open defecation to minimize risk of contamination of drinking water sources and food. Health education, Attitudinal change including superstition/de-addiction/family planning. Eradication of disparities (economic & social), Ownership building, Women's participation.

**Capacity building:**

Local communities were given capacity building training particularly women to motivate them fully in the implementation of the project. The JLGs were empowered through savings and credit programs through Self Help Groups and their involvement in decision-making processes.

**Mass events**

World water day, Women's day and World Aids day are celebrated in a big way gathering large masses with processions & rallies. This is one of the productive ways to involve the community in the programme activities. These types of mass events help us for promotion and would strengthen the rapport with the community. This year nearly about 24550 men, women and children participated in these events.

## **Household Education**

BCC sessions are conducted by the field workers, visiting house to house giving health education .Flip charts are used for one to one, one to group, group to group sessions. It is a regular activity to educate the community on health and hygiene. BCC is helpful for developing rapport with the stake holders and identifying beneficiaries. SIDUR developed IEC material on WATSAN topics and trained the FCOs to use this material.

Field credit organizers (FCO's) visit 4 to 8 houses everyday giving health and hygiene education to the households.

## **School health Education**

Every six months the schools are visited and Environmental education programmes are conducted. The programme is conducted in three days for teachers and students.

### **Activities:**

Capacity Development activities increasing awareness and generating felt needs.

Enhance people's capacity to choose appropriate options through alternate delivery mechanisms as per their economic condition. Selection of the beneficiaries based on the economic levels. Relevant behavioral changes for improved sanitation and hygiene practices. Demand for sanitary facilities. Provision of alternate delivery system, proper technical specifications, designs and quality of installations. Provision of Revolving Fund loan. A duly completed household sanitary latrine shall comprise of a Basic Low Cost Unit with a super structure. Regular collection of repayments.

### **Potential Loan Products:**

Water and sanitation are the potential loan products. 50 weeks or 12 months period would be the term period whichever is convenient to the group.

### **Outcome:**

The program promotes full cost recovery, that is, the loan to be paid by the beneficiaries' repayment of the Loan. SIDUR has created a client base in the said area where the RLF Programme is proposed for implementation, putting to rest the chances of risking the project. The outcome of this Program will be the source of new scientific data, innovative methods, and cost-effective technologies for improving the assessment and control of drinking water and sanitation facilities.

This year we were able to cover 2990 for water, 2997 for sanitation and 54678 for hygiene education.

### **1. Case Study - (water)**

Mrs. Srilatha w/o Mr. Lakshman is living in Srilanka basti since ten years. She is a housewife and her husband is daily wage labourer. They have three kids and they go to the neighboring school. Like everyone in the slum, they also suffered for drinking water. Since they are family of five, they needed lot of water for washing, cooking and bathing. They used to collect bore water from a neighboring street for domestic use. Both husband and wife used to take turns in fetching water. For drinking water, they had to walk all the way to Balamrai pump house which is 4 kms away. This was very hectic and time taking. Sometimes they used to get into arguments and at times husband used take leave as it used to get late. The children sometimes never went to school, as the cooking was delayed as there is no water.

At this junction they came to know about credit facility from SIDUR. They approached SIDUR staff and availed the loan.

Now They are a happy family with supply of drinking water at their door step. There is no more fights and arguments in the house. They say with one voice "We can earn more money and take care of our children and also successfully meet our family problems without anybody's support."

### **2. Case Study -(Sanitation)**

Mubeena Begum w/o Shaik Faruk aged 32 yrs, lives with her family in Safdar nagar, Borabanda since 10 years. She has four children .She is a housewife and her husband is a daily wage labourer who gets about Rs.300/- to Rs.400/- per day. They have 3 girls and a boy. Shaik Faruk, apart from other problems, he is most worried about his growing girls and his wife going for open defecation in a distance 1km away. This was a big botheration as they do not have a toilet in their house. The problem is much more in rainy season, emergency times and in odd times. Most of the time Mubeena Begum accompanies the girls early morning and sometimes in the evening. When she falls sick, the whole responsibility falls on Shaik Faruk. At times there were days when he didn't go to work, which led to no money, no cooking.

The credit facility for sanitation programme came as a boom to this family. They availed a loan of Rs.15000/- and very quickly within 20 days they constructed the toilet. Mubeena begum now relaxes having the toilet within the house area. The big task has become a facility for them by availing the loan and also learnt to keep the premises clean. They are repaying the loan regularly.

## **2. HIV / AIDS Prevention & Control among Migrant & Female sex workers (NACO/APSACS)**

Prevention and control of HIV and AIDS is a Threefold intervention- Rehabilitation, Repatriation and Prevention.

This programme is supported by National Aids Control Society (NACO), Government of India through Telangana Aids Control Society (TSACS). SIDUR works with two high risk groups that is migrant workers and female sex workers.

### **a. Migrant workers.**

This programme covers 19 different Industrial areas / addas across Hyderabad and Ranga Reddy districts.

The focus is on 21,798 Migrant labourers men and women who migrated from rural to urban areas especially Hyderabad and Ranga Reddy Districts in search of livelihood. Setting up services for these people in the cities and bringing them into care early.

The project also covers workers in the industry and also involves men and women as peer educators to spread awareness regarding HIV and AIDS among the target group who are highly vulnerable to this virus.

### **Objectives:**

- To increase STD/HIV/AIDS awareness among 15000 migrant and 1200 female sex workers on HIV prevention 19 Addas in Hyderabad district.
- To identify the high risk groups (HRG) among them.
- To increase the access to health service including STI and HIV testing.
- To increase the health seeking behavior and safe sex behavior among them population.
- To link up those found positive with ARC Centers CCC.

### **Introduction Migrant Labourers:**

The studies proved that migrated population have multiple sexual partners and increased HIV transmission. They are the bridge populations for HIV transmission from urban to rural areas and between high-risk and low-risk groups. A large number of people move around different areas for work, the majority are men migrating for employment. Long working hours, isolation from their family and movement between areas increases the likelihood that an individual will become involved in casual sexual relationships, which in turn may increase the risk of HIV transmission. In many cases, migration does not change an individual sexual

behavior, but leads them to take their established sexual behavior to areas where there is a higher prevalence of HIV. Therefore not all migrants are at equal risk of HIV. Being mobile in and of itself is not a risk factor for HIV infection. It is the situations encountered and the behaviors possibly engaged in during mobility or migration that increase vulnerability and risk regarding HIV/AIDS.

### **Achievements**

Areas covered -19, HRGs registered -21798, BCC sessions – 40836, STD treated - 118, ICTC tested - 1223, condoms outlets - 42, condoms distributed – 24150 (social marketing), Peer leaders – 15, Positives – 42 (death-6 , Nil identified in this year).



### **b. Female sex workers**

SIDUR works with two types of FSWs that is street based and home based covering 2338. The target group enhances health problems due to ignorance, poor access to healthcare and low socioeconomic status. The diseases are linked to overcrowding, unsafe water and unsafe sex. They suffer cultural shock due to language barrier, non-conducive atmosphere and poor family support.

Poor and delayed treatment and increased costs, loans and loss of wages, adversely affects quality of life. Debts push them in vicious cycle and don't allow expenses on condoms and STD care. Natural or man-made calamities make the real life situations worst, as they come last in priority for rehabilitation. It makes them seek migration again to newer places to repeat the vicious cycle. Single male temporary migrants and truckers face similar situations. The project works with FSWs 2338 street based and home based sex workers who do their businesses on the high ways or in the outskirts of the city. They all belong to SC/St and BC

community and they come under below poverty line. Most of them are construction workers or daily laborers. They earn about 100 to 400 rupees per day.

There are 42 intervention areas called addas in Hyderabad and Ranga Reddy districts. The focus is on 2338 female sex workers migrated from rural to urban areas and settled in Hyderabad and Ranga Reddy districts. Setting up services for these people in the cities and bringing them into care early.

The project selects some of the female sex workers who are active and with social service mind and who are willing to help other high risk. Women are selected as peer educators to spread awareness regarding HIV and AIDS among the target group who are highly vulnerable to this virus.

**Objectives:**

- To increase STD/HIV/AIDS awareness among 15000 migrant on HIV prevention 42 Addas in Hyderabad district.
- To identify the high risk groups (HRG) among them.
- To increase the access to health service including STI and HIV testing.
- To increase the health seeking behavior and safe sex behavior among them population. To link up those found positive with ARC Centers CCC.

**Achievements :**

Areas covered -42 Hotspots, HRGs registered -2338, BCC sessions 37747- , STD treated - 33, ICTC tested - 3188, condoms distributed - 5,11,389 (social marketing), Peer leaders - 15, Positives - 7



### **Best Practices in both the target groups:**

1. Provision of Medical Mobile Unit is enabling to serve more number of HRGs with general medicines to increase STI treatment.
  2. Facilitating other services to the target group like –
    - Delivery cases linking with nearby government hospitals.
    - Providing identity cards through labour department.
    - Settling labour payment disputes with the contractor.
    - Giving information on free food distribution areas in times of no work days form migrants.
  3. Conducting congregation event in migrants' residential area at their leisure time.
  4. Selecting competent Peer Educators –
    - Sensitization about the procedures of selection.
    - Allocating probation period 1 to 2 months.
    - Conducting test.
    - Selection public orientation on responsibilities.
1. BCC – Allowing HRG's to ventilate their problems to the maximum.
  2. STI treatment public ICTC – Linkages with local business units for transport (PL).

### **Challenges:**

1. STI treatment – All DSRC's are in a distance therefore the clients are finding it difficult.
2. Unavailability of medicines and STI kits in Government Hospitals.

### ***Migrants - Case Study***

*Mr. Baswaraj is a daily wage labourer and is from Kolkata. He came to Hyderabad as a labourer on contract with JMC constructions, Erragadda and he is staying in accommodation which is provided by the contractor. He works hard to earn money. While he was here he got addicted to alcohol and other addictions.*

*During his leisure time he used to go to sex workers along with his friends. After few days he identified symptoms of STI and could not share it with anyone about it. While suffering with it, he continued his work as it was his livelihood.*

*At the same time one of our outreach workers (ORW) went to the place where he works in Erragadda to give awareness on STI/HIV/AIDS. One of his friends attended the awareness camp and he told this to Baswaraj. Immediately he went to ORW and interacted with the ORW. He was given all information showing pamphlets and also explained the usage of condoms.*

*Later, he approached ORW personally and explained his entire story and asked for the precautions. ORW gave him all precautions which are to be taken in every encounter*

### *Female Sex workers - Case Study*

*Mrs. Padma (name is changed) .The peer educator working in Pedhamma nagar found a new lady moving about in that area. She asked her why she is there (This is the place where sex work takes place) There was no response from the new lady. The next day again peer educator saw her and tried to communicate with her. But the lady shouted at her saying, " why do you want my details."*

*Third day was the same, but the way the peer educator spoke to her was different. She expressed her concern towards the lady. She opened up slowly and said that she is alone and does not have way of livelihood and therefore she got into the sex work. The peer educator slowly allowed her to speak up. Then she started telling her about all the precautions she has to take to be healthy. She explained her about all the symptoms of STI.*

*From then onwards the PE used to regularly meet her and gradually gave her all the prevention information she needed. After a week Padma (Sex Worker) rang up to the outreach worker and told her that she is having white discharge and pain in the lower abdomen. The next day outreach worker, along with the peer educator took Padma to Sreeramnagar Hospital.*

*The doctor did internal examination and then told her that she has STI and has to take medicines. Counseling was given and advised her to use condoms. HIV test was also done and asked her to come for follow-up checkup after a week. She carefully followed it and is now using condoms in every encounter.*

*The peer educator and ORW meet her every week and they could see that Padma is strictly following usage of condom and also helps other sex workers in advising them to use condoms.*

### **3. Community Resource and Development Centre for Vulnerable Communities**

The centre provides services to male street children and child labourers giving them shelter, food, education, vocational training, and counseling. It is also to provide differently-able people with a single-window to access an integrated package of services which would address their needs. This centre will benefit about 75 inmates and about 100 transiting street children and child labourers.

**Overall Objectives:** To establish a community resource and development centre for vulnerable communities.

#### **Specific Objectives:**

1. Provide space for male street children /child labor to be mainstreamed through community mobilization and rehabilitation strategies.

2 Promote concerted stakeholders action to derive the benefits of various opportunities / schemes entitled for the communities

**Context and Approach of the project:**

It is a need-based project which is relevant to the present vulnerability situation in the project area.

**Open Shelter for Children on the Street and Vulnerable children:**

SIDUR open shelter is situated in Vanastalipuram catering to children who need transit and also orphan and semi orphan children / boys. A warden / counselor, two field workers, cook and watchman take care of this program. The centre houses street and other vulnerable children in difficult situations.



**Implementation of the Project:**

Counseling provided to 104 street children and 94 child labour.

**Indirect Beneficiaries:**

1. Families and other caregivers of PWDs from villages and slums
2. Families and caregivers of PWDs
3. Families of street and other vulnerable children
4. Childline India Foundation (Government of India)

The project ensures rescue and immediate relief to the children in distress. It aims to provide support to the children in need of care and protection. The programme covers children up to 18 years of age. It provides services by telephonic information about the children or children found during out reaching by volunteers. SIDUR is a partner of nationwide CHILDLINE network. It is working as support agency at city level CHILDLINE network.

Services provided to the children:

- Medical and emotional support, Shelter, Counseling , Re- integration in to their families , Protection against abuse and exploitation

### *Case Study :*



*Narasimha is 18 years old. He remembers few things which he expressed. Narasimha used to stay with his parents at Mumbai. His father Siddappa was a Tailor and Jyothi is a housewife. His father used to drink heavily everyday and beat them up. Not able to tolerate his torture, his mother took her two children and got into the train which brought them to Hyderabad. This was in 2005. There they started begging. SIDUR staff saw them and brought the two children to home and the mother went away to her native place in Mahaboobnagar district.*

*These two children were joined in the school and were taken care in the home. Both of them were very studious and clever and they worked very hard and took the opportunity of getting the schooling.*

*Narasimha has successfully completed his tenth class in 2017 with very good grade of 9. He was appreciated by everyone and some phylanthrophists offered him Rs.33000/- for his future studies through sakshi TV media. Later he wrote entrance for polytechnic and scored 10864 rank and then got into Government polytechnic college, Masab tank. His brother ramesh also studies very hard and this year 2018 he appeared for tenth class and he is waiting for his results.*

*Example of these two boys shows that if an opportunity is given to any vulnerable child at the right time we can save them from vulnerability and also give them a bright future.*

## **4. Integrated Slum Development**

Integrated Slum Development programmes are in operation in the urban slums of Hyderabad right from the inception (1990) and it still continues. The slum dwellers themselves recognized the need for development and empowerment. The Integrated Slum Development concept was developed assuming that the slum residents themselves were willing to be active participants in their own development process.

This programme provided an opportunity of knowing the slums residents better, fine-tuning the ISD programmes and designing appropriate learning/monitoring

systems for ISD. The programmes were: Community Health, Non Formal Education Skill Imparting and Community Organization Programmes. A review showed that these programmes have established the foundation for more complex intervention in the urban slums of Hyderabad.

### **Community health programme:**

Community health programmes caters to specifically to women and children. The community health workers visit house to house giving them advice and awareness on common health issues and seasonal diseases.

- i) Medical camps- where basic health services are available,
- ii) A comprehensive mother and child care programme consisting of gynecological care and immunization during pregnancy, enabling safer deliveries and postnatal care and complete immunization of children,
- iii) Referrals to government and municipal clinics,
- iv) TB Control and
- v) Awareness about preventive health methods.

It was believed that these three activities would start a virtuous dynamic cycle of actions for development. The intervention would begin with improvement in skills and capacities, that would lead to improvement in quality of life, that would enhance their self worth, which would lead to critical reflection and finally to more actions for development. This framework provided design and structure of Integrated Slum Development. Based on that, a Frame of Reference was prepared.

The main components in this are:

To address all development needs of health, education, economic betterment, physical up gradation and human aspirations

- i) Slum residents would be participants by deciding and implementing,
- ii) Development processes would proactively benefit women,
- iii) Partnerships with concerned institutions and individuals, and
- iv) Values of integrity, quality, and sensitivity would be inherent.

### **Changes:**

The women realized their inner strength and importance in the society. The organization has taken a pledge to illuminate their lives with pride and dignity and Integrated Slum Development programmes have made a substantial difference. The quality of life in the intervention in the slums has changed for the better. There has been a measurable positive change in basic development indicators. Equally important is the change in attitude. The

earlier diffidence and helplessness has given way to a more positive dynamism where residents feel that they can affect and influence change.

### **Girl child and women empowerment:**

Discrimination and societal behavior leading to physical and psychological harassments, emotional violence bordering on cruelty is still existing. Never scant in woman's basket of woes. Social evils begin at the womb with female feticides, infanticides, sexual harassment, rape and dowry related tortures putting an end to her misery only at the tomb.

In order to make the women realize their inner strength and importance in the society, SIDUR has taken a pledge to illuminate their lives with Pride and Dignity. Self Help Groups are voluntary response of the poor to their marginalization, social, economic and political. Over the years, we now have many success stories of families improving their livelihood and well being via these SHG programs.

Our Empowerment Policy for women aims at Gender equality, Gender justice and Social security.

Elimination of discrimination against women in all walks of life.

Economic development and integration of women into main stream of economy.

Establishment of Self-Reliant Women's Self Help Groups.

Creation of confidence and awareness among members of SHG's regarding women's status, health, nutrition, education, sanction and hygiene, legal rights, economic enlistment and other social, economic and political issues.

Strengthening and institutionalizing the savings habit in rural women and their control economic resources.

Improving access of women to micro credit.

Involvement of women in local level planning and

Convergence of services of DWCW and other Departments

In addition to the regular programmes five special interventions are developed to address special needs and necessities of the most deserving children and youth in need of immediate support.

### **Objectives:**

- To reach out most deserving children in special circumstances through relief or advocacy.
- To sensitize privileged children at an early age.
- To sensitize masses on Child Rights.
- To cater to children with critical needs on healthcare or education

- To cater to Children in distress

**Education:**

Education for underprivileged children along with healthcare, poverty, population control, unemployment or human rights issues is taken up. The educational initiatives include Non Formal Education (6-14 yrs non-school going and drop-outs), Functional Literacy [18-45 yrs women] and Family Life Education for adolescent girls. These programme support more than 100 grassroots initiatives working for the education of very poor and underprivileged children in various slums of Hyderabad and Secunderabad and Ranga Reddy Districts.

SIDUR works with under-privileged children under difficult circumstances such as child labour, children of poorest of the parents, children inflicted and affected with HIV/AIDS, street and runaway children, children with rare disability (Autism, Deaf & Dumb, Blind, and Spastic etc.) disaster struck children and slum children etc.

**Accomplishment:**

Total No. of beneficiaries: 445, Adult education: 342, Non formal education (children): 167  
Skill development: 189 and Job placements: 67

**5. Childline India Foundation (Government of India)**

The project ensures rescue and immediate relief to the children in distress. It aims to provide support to the children in need of care and protection. The programme covers children up to 18 years of age. It provides services by telephonic information about the children or children found during out reaching by volunteers. SIDUR is a partner of nationwide CHILDLINE network. It is working as support agency at city level CHILDLINE network.

Services provided to the children:

- \* Medical and emotional support
- \* Shelter
- \* Counseling
- \* Re integration in to their families
- \* Protection against abuse and exploitation

The broad perspective of the project is to provide protection to children in need of care and protection.

**Target Group**

- Children up to 18 years of age who are surviving in inhuman conditions.

- Area of functioning.
- Half of Municipal limit of Hyderabad city.

### **Abandoned children rescued:**

This intervention revolves around a family living in extreme poverty in Mahbubnagar district, Andhra Pradesh. A few years ago, the mother was diagnosed with tuberculosis and the father became an alcoholic and subjected his family to constant abuse. One day the father put his children on a train to Hyderabad and abandoned them. Some 20 kilometers later, the children got off and realized that they had been abandoned. The railway police referred the children to CHILDLINE. The children were placed in a government home for rehabilitation and follow-up care.

### **Child reunited with his family:**

The child had accidentally got separated from his parents during an interstate train journey and was stranded in Hyderabad. He was picked up by the police and taken to a government shelter home. Once in the shelter, the officials made attempts to return the boy to his family and though the child did not know the accurate postal address. After a few initial setbacks, SIDUR located the boy's home and was reunited.



### **Case Study: 1**

*Nandini aged 16 yrs was picked up from Police Station. It all started with a complaint by a young man helped orchestrates a massive rescue operation. A young frazzled girl was seen aimlessly roaming on the streets and was begging. The local police found her. SIDUR was immediately informed about the child through Childline Hyderabad. After taking the child into custody, a statement by the child revealed appalling details on the state of affairs.*

*She used to sleep on footpath and used to indulge in prostitution. She stopped doing this since few months as she was warned by the local people several times.*

*Later two men seduced her for this act by attracting her with money. A local noticed this and tried to stop it. One of the men started abusing in filthy language. The local guy informed this to Humayun nagar Police Station .The police came to the spot and caught hold of all three persons and brought them to the concerned police station and registered a case. Later police called Childline to provide shelter with safe custody.*

*SIDUR team members went to concerned police station and took her to medical check up to Osmania general hospital. Later informed to Child Welfare committee (CWC ) and as per their suggestions provided temporary shelter at Government girls home in Nimboliadda.*

*Initially she was followed every two weeks and later once in a month. She is quite healthy and is persuading her skill training in tailoring.*

## **6 . Integrated Programme in Mahaboobnagar**

Mahaboobnagar Programme started 2012 in three villages Kesampet, Kakanoor and Kothapet. This project is looking at long time development in the women of Mahaboobnagar This partnership is about giving poor and underprivileged people in Telangana, hope and helping them to overcome poverty in a new way. It uses a vision/strategy that has previously been tried out, to good effects, in Bangladesh as the family and community Transformation (FCT) model. The focus is on making a real difference – physical, social, spiritual, economic and educational – in the lives of these poor people while pioneering the new vision/strategy in the Indian context.

### **Work done so far -**

Formed 30 SSS (Swayam seva Sangam) and working with 340 women.

These women belong to below poverty line families .They are illiterate. They live in very unhygienic surroundings .They all work in fields , some have their own piece of land others work as allurers .They start their work early in the morning and they came back after 7.30 pm.

### **Literacy Training –**

These literacy classes are conducted after 8pm twice a week. Around 290 members underwent literacy classes and have successfully completed the course. Most of them are able to read small story books .A collection of small story books are kept in a place where they can access at the time of meetings.



Woman exhibiting her writing skills in literacy classes

### Group Meetings –

SSS group meetings are conducted every week .Information on Group formation CBO formation , local affairs , trainings to elected Governing body members ( President , Secretary and Treasurer ) health classes on relevant topics are given . Staff prepares lesson plans and teaching material. Lessons are taught in participatory method. Health Leaders are selected in each group and are trained.

### Other trainings –

Some training were conducted to bring out their inner capacities and to motivate/ strengthen right values for better living and to become a useful community.

Vision and values trainings with lessons on - serving attitude, Integrity, transparency etc were given .They were encouraged to follow values in their daily life and in groups.

Advocacy meetings were conducted with different stake holders and there is good support by MPTC, Sarpanch and local leaders.

All group members save regularly, raise loans from their groups for small business.

### *Case study*



*SIDUR is working with 10 (Swayam Seva Sangam) groups .This is a case study of one (SSS ) group which became very strong. All the members were non vocal, illiterate and were very much occupied in their livelihood. This group after number of group meetings and trainings turned out to be one of the best groups in Kothapet.*

*They were empowered so much that they took up a business together. They wanted to start vegetable business by growing them themselves. But they did not have land.*

*They together negotiated with a local leader who had land to give them land to grow the vegetables. After a long discussion, he accepted to give the land of half an acre .*

*They invested Rs.28000/- on the land and grew 7 different kinds of vegetables .In 4 months time they were able to yield good quantity of vegetables. They did business and got profit Rs.40000/- and invested again in the same business in a big way.*

## **ORGANISATION PROFILE**

**VISION:** We envision a world in which individuals, families and communities have the hope and capacity to build conditions that promote Total Health. Psychological, Social, and Economical development of the people.

**TYPE OF ORGANISATION:** Registered under AP Societies Act and tax exempted under 80-G and 12 A. Working in 294 urban slums of Hyderabad and Secunderabad and Five Coastal Districts of Andhra Pradesh.

SIDUR came into existence in the year 1990 to address the problems plaguing Street Children, Urban and Rural Poor and Dalits.

### **MAJOR PROJECTS INCLUDE:**

1. Water and Sanitation Credit Programme.
2. HIV/AIDS Prevention among Migrants & Sex Workers and Migrants
3. Community Resource and Development Centre for vulnerable communities.
4. Integrated Slum Development.
5. Childline India Foundation.
6. Integrated Programme in Mahaboobnagar.

### **STAFF**

The organization has trained administrative support, accountants, and administrators. We have a panel of consultants who have practical and theoretical knowledge on the field experience; therefore providing training monitoring and evaluations. We also take up impact studies, operational research etc.

### **PARTNERSHIPS**

The organization has very deep relationships with its communities, and community members are involved in project design, implementation and evaluation. SIDUR also has very active collaboration and credible relationship with local government institutions.

SIDUR has partnerships with, Water.org, NACO ,Women and Child Welfare ,Government of India. SIDUR is also a member of numerous national and regional development networks promoting similar initiatives.

### **EXPERTISE IN TRAININGS:**

- Grass root trainings of neighborhood groups/women sangams
- Self help groups

- Micro credit
- Specialized livelihood based/vocational/aptitude based training to street children and slum dwellers.
- Providing consultancy and training to local NGO's.

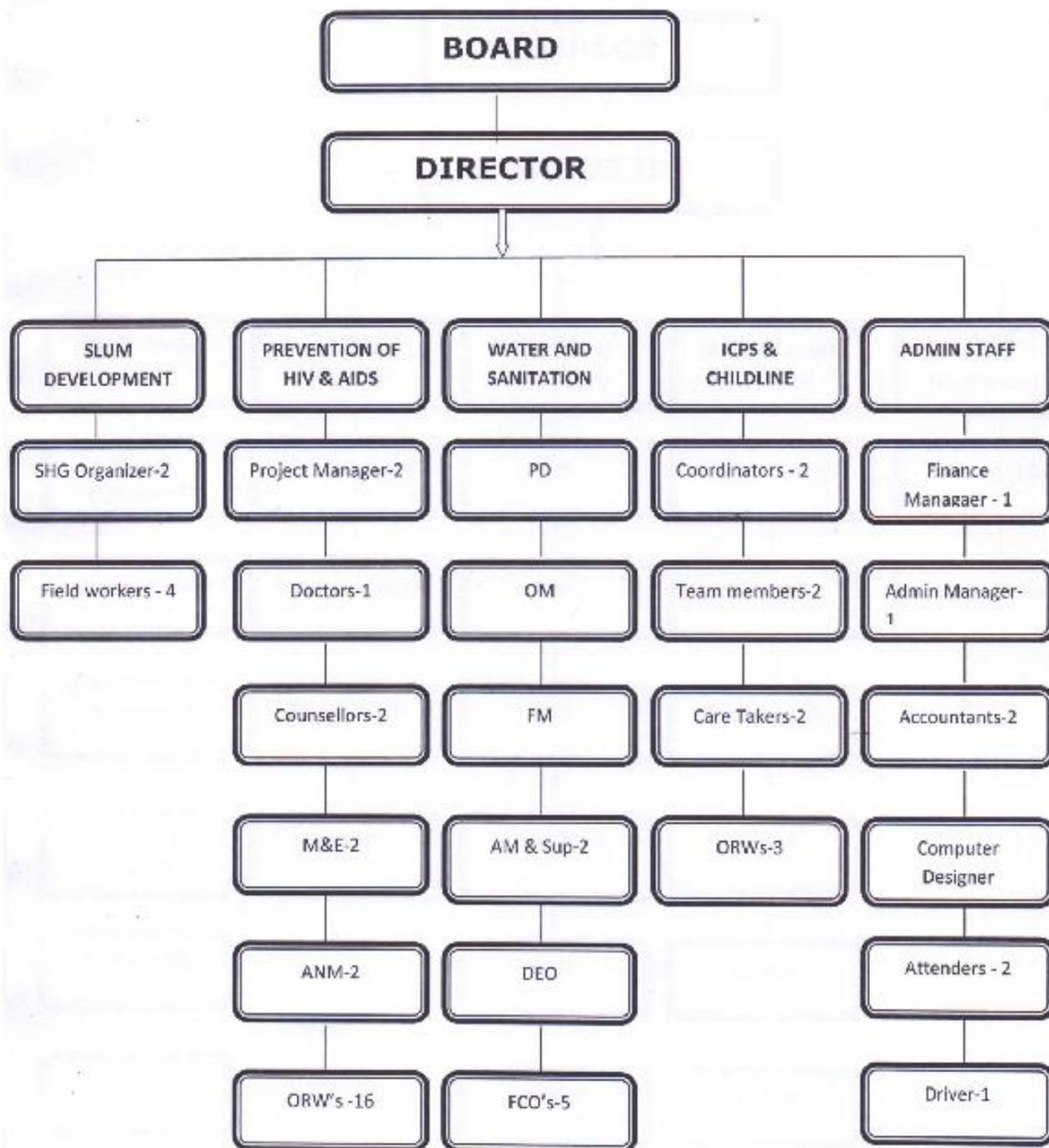
### **Associates & Advisors**

SIDUR's strong point lies in the spirit of its public private partnerships and the wide spectrum of donors, partners and consultants that have aligned their goodwill, skills and resources with our vision to eliminate poverty.

They are elected representatives, corporate, and experts in various spheres of influence and concerned citizens from across borders.

This segment is an acknowledgement to them and our way of saying thank you to all of them for their support and contribution to our development and interventions, which are helping us, transform lives of the people living in diverse neighborhoods.

# ORGANOGRAM



# Financial Statements

SOCIETY FOR INTEGRATED DEVELOPMENT IN URBAN & RURAL AREAS

Regd. Office 144/2RT,Vijayanagar Colony

Admin. Office B51/F1,Vijayanagar Colony

HYDERABAD - 500057-TELANGANA

Consolidated Receipts and Payments Account from 1st April,2016 to 31st March,2017 (FC+LC)

Receipts		Amount Rs. Ps.	Amount Rs. Ps.	Payments		Amount Rs. Ps.	Amount Rs. Ps.
To	<b>Opening Balances</b>			By	<b>Programme Expenditure</b>		
	<b>Cash,Bank,Programme Advances &amp; Other Advances</b>		231,790.04		Offer Trust Programme expenditure	1,072,474.00	
To	<b>Loans/ Advances Other Projects</b>				Water.Org.Sahaya Programme	4,236,518.00	
	Advance to Childline Programme	4,500.00			FC Account Expenditure	57,316.00	
	Advance to Childline Programme	221,500.00			ICPS-Street Children Prog. Expenditure	1,152,025.00	
	Advance to APSACS-FSW	1,500.00			Childline Programme Expenditure	283,875.00	
	Advance to APSACS-FSW	52,000.00			General Account Expenditure	227,387.00	
	Advance to APSACS-Migrants	6,000.00			NACP-4/ APSACS-FSW Programme	1,652,688.00	
	Advance to APSACS-Migrants	51,500.00		By	NACP-4/ APSACS-Migrants TI Program	1,589,901.50	10,272,184.50
	Advance to APSACS-LC	5,000.00			Refund of advances		214,719.00
	Adv.to Govt.Street Children Prog.	3,300,772.00	3,642,772.00	By	Depoists-FDR		2,000,000.00
To	<b>Grants</b>			By	<b>Closing Balances</b>		
	Offer Trust	1,069,574.00			<b>Cash,Bank,Programme Advances &amp; Other Advances</b>		4,509,676.30
	Water.Org.Sahaya Prog.	4,236,146.00					
	ICPS-Street Children Programme	1,001,756.00					
	Childline Programme	190,500.00					
	APSACS-FSW Programme	1,914,736.00					
	APSACS-Migrant Programme	1,659,891.00	10,072,603.00				
To	<b>Bank Interest</b>						
	Offer Trust	5,838.00					
	Water.Org.Sahaya Prog.	13,590.00					
	FC Account	2,200.00					
	General Account	3,005.76					
	APSACS-FSW Programme	8,064.00					
	APSACS-Migrant Programme	4,876.00	37,573.76				
To	<b>FDR Interest</b>						
	Water.Org.Sahaya Prog.		35,157.00				
To	<b>Other Receipts</b>						
	Organisaton Contribution to ICPS- Street Children Prog.	81,000.00					
	Other Receipts-General Account	58,524.00					
	Encashment of FDR	2,000,000.00					
	Travel Reimbursement-FSW	1,100.00					
	Travel Reimbursement-Migrant	2,300.00					
	Stale Cheque reversed-FSW	4,500.00	2,147,424.00				
To	<b>Inter Project Transfers</b>						
	Adv.from FC A/c to Sahaya Prog.	10,435.00					
	ICPS Street Children Programme	68,700.00					
	Advance from Sidur LC account-CL	94,000.00					
	Loan from others	440,500.00					
	Advance from Gen.A/c to Migrant	15,600.00	629,235.00				
To	Advance from Jubilee Fiscal	200,025.00	200,025.00				
	<b>Total</b>		<b>16,996,579.80</b>		<b>Total</b>		<b>16,996,579.80</b>

For SIDUR

-Sd-

(T.NANDA VARDHAN)

Secretary

PLACE: HYDERABAD

DATE: 16.06.2017

As per our report of even date

for J.KAMALAKAR & ASSOCIATES

Chartered Accountants

-Sd-

J.Kamalakar

Proprietor





**SOCIETY FOR INTEGRATED DEVELOPMENT IN URBAN & RURAL AREAS**

Regd. Office 144/2RT, Vijayanagar Colony

Admin. Office B51/F1, Vijayanagar Colony

**Consolidated Balance Sheet as on 31st March, 2017 (FC+LC)**

Liabilities	Amount Rs. Ps.	Amount Rs. Ps.	Assets	Amount Rs. Ps.	Amount Rs. Ps.
<u>Capital Reserve</u>		2,81,271.00	<u>Fixed Assets</u>		4,90,424.00
<u>General Reserve</u>			As per schedule		
Opening Balance	(76,46,233.32)		Habitat Repayment Programme		78,56,785.00
Add: During the year	18,35,393.93	(58,10,839.39)	Receivable		
Habitat Repayment Programme payable			<u>Deposits</u>		3,400.00
Earmark Grants		78,56,785.00	Rent Deposit -Offer Trust	2,400.00	
Inter Project Advances		11,50,000.00	Telephone Deposit(Novib)	1,000.00	
Medicine Revolving Fund		74,11,946.69	<u>Closing Balances</u>		
		928.00	Cash, Bank, Programme Advances		25,39,482.30
			& Other Advances		
<b>Total</b>		<b>1,08,90,091.30</b>	<b>Total</b>		<b>1,08,90,091.30</b>

For SIDUR

-Sd-

(T.NANDA VARDHAN)

Secretary

PLACE: HYDERABAD

DATE: 16.06.2017

As per our report of even date

for J.KAMALAKAR & ASSOCIATES

Chartered Accountants

-Sd-

J.Kamalakar

Proprietor

**Society for Integrated Development in Urban and Rural Areas (SIDUR)**

Admin.Office:144/2RT,Vijayanagar Colony, Hyderabad - 500 057

Regd.Office:B51/F1,Vijayanagar Colony, Hyderabad - 500 057

**FIXED ASSETS STATEMENT 2016 - 17 (FC+LC)**

Sl.No.	Name of the Asset	W.D.V. as on 1-4-2016	Additions	Deletion	Total	Depreciation Rate	Depreciation Amount	W.D.V. as on 31-3-2017
1	FURNITURE	2,09,724.67	35,050.00	1,80,000.00	64,774.67	10%	6,477.47	58,297.20
2	XEROX / PHOTOCOPIER	9,273.73	-	9,273.73	0.00	15%	0.00	0.00
3	VEHICLES	3,12,265.21	-	16,926.00	2,95,339.21	15%	44,300.88	2,51,038.33
4	COMPUTERS / PRINTERS UPS, BATTERIES	45,580.74	1,88,340.00	432.83	2,33,487.91	60%	1,40,092.75	93,395.16
	ELECTRICALS (FANS)	-	6,750.00	6,750.00	-	10%	-	-
5	CAMERA / VCR	21,814.41	-	-	21,814.41	15%	3,272.16	18,542.25
8	G.P.S	720.27	-	720.29	(0.02)	25%	(0.00)	(0.01)
9	Land & Buildings	70,079.04	-	70,079.04	0.00	25%	0.00	0.00
10	Medical Equipment	8,148.83	-	8,148.83	(0.00)	15%	(0.00)	(0.00)
11	Equipment (Audio Visual)	8,883.42	-	8,883.42	0.00	15%	0.00	0.00
12	Air Conditioner	13,005.00	31,000.00	1,530.00	42,475.00	15%	2,868.75	39,606.25
	<b>TOTAL</b>	<b>6,99,495.33</b>	<b>2,61,140.00</b>	<b>3,02,744.14</b>	<b>6,57,891.19</b>	<b>-</b>	<b>1,97,012.00</b>	<b>4,60,879.19</b>

*(Handwritten Signature)*



**PAPER CUTTINGS:**

20/7/2017

సాక్షి:

## వెట్టి చాకిరి నుంచి బాలికకు విముక్తి



**సనత్‌నగర్:** బాలికతో వెట్టిచాకిరి చేయిస్తున్న సాఫ్ట్‌వేర్ ఉద్యోగి దంపతులను సనత్‌నగర్ పోలీసులు అరెస్టు చేసి బాలికకు విముక్తి కల్పించారు. ఇన్‌స్పెక్టర్ వెంకట్‌రెడ్డి కథనం మేరకు వివరాలిలా ఉన్నాయి. మోతీనగర్ గోపాల్ నివాస్‌లో ఉంటున్న సాఫ్ట్‌వేర్ ఇంజనీర్ నాగులు, అతని భార్య పద్మ ఇంట్లో పని చేసేందుకు రాణి(10) అనే బాలికను తెచ్చుకున్నారు. దీనిపై స్థానికులు చైల్డ్ ప్రొటెక్షన్ అధికారులకు సమాచారం అందించినా వారు స్పందించలేదు. దీంతో వారు సనత్‌నగర్ పోలీసులకు సమాచారం అందించగా ఇన్‌స్పెక్టర్ వెంకట్‌రెడ్డి ఆధ్వర్యంలో సిబ్బంది రాణిని తమ సంరక్షణలోకి తీసుకున్నారు. నాగులు, పద్మ దంపతులను అరెస్టు చేసి బాధితురాలిని చైల్డ్ లైన్ సభ్యులకు అప్పగించారు.

## అనాధ బాలుడు



**అదరగొట్టాడు..**

**9.0**  
జీపీఎస్

**కాచిగూడ:** పదవ తరగతి పరీక్షల్లో ఓ అనాధ బాలుడు 9.0 జీపీఎస్ను సాధించాడు. వనస్థలిపురంలోని సిద్ధూర్ అనాధ బాలల ఆశ్రయంలో పి.నర్సింహ 2007లో చేరాడు. మొదటి తరగతి నుంచి వనస్థలిపురంలోని ప్రభుత్వ పాఠశాల చదువుతున్నాడు. పాలిటెక్నిక్ ప్రవేశ పరీక్షల్లో 10,864వ ర్యాంకు సాధించాడు. ఇతడి ఉన్నత చదువులకు దాతలు సాయం అందించాలని హోం ఇన్‌చార్జి యజ్ఞశ్రీ కోరుతున్నారు.