



# Centre for Integrated Development

*"Serving Humanity"*

**Annual Report  
2020-2021**



## **Centre for Integrated Development**

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### At A Glance

Center for Integrated Development was established in 1992. We are a non-profit organization, based in Gwalior, Madhya Pradesh. CID is working for neglected and weaker sections of the society. In the span of 29 years CID has worked on various vulnerable sections of the society such as children, women, and tribal s. Our key areas are education of child labor, promotion of child rights, health, rural development, gender equity livelihoods and skill development.



## From Director Desk

**Dear Friends.....**

Writing this note in 2020-2021, at a time when the whole world is in grip of a pandemic, is a reminder of the unpredictability of life; how even the best-laid out plans don't work. More importantly, it highlights that even in the toughest times our values, purpose, resilience and standing with the people can be the compass to navigate whatever the future brings.

As we start writing this Annual report 2020 – 21 in a time which is far from what we have been used to, we feel now, more than ever a sense of gratitude and honour for being destined to touch lives in a meaningful way. No doubt this pandemic is a challenge of a different order affecting thousands of people worldwide, creating panic and anxiety for health, safety, economic sustainability and for the very existence of life. However, we have no other option but to act in these difficult times as individuals, families, leaders, organisations and states.

While the Annual Report spells out all the initiatives we undertook this year, I would like to share with you some of the highlights achieved by us in the year 2020-2021.

We have successfully completed all the deliverables proposed under the projects that we executed this year. Our spectrum of work spanned from working at the grassroots to mainstreaming child labour into institutionalized education system to create awareness among people and from running the Child Line helpline for protection and care of the child to CID's working towards reducing malnutrition and anaemia in Child Adolescents & sexual reproductive health and also from inclusive development of the PWD's to capacitating the Frontline Workers of the health and education department to work effectively



Dr Vijay Gupta  
Director:  
Centre for Integrated Development

Each Year, we have continued some activity which we have been doing and added some of the new activities as well taking incremental steps, iterating, refining, measuring, reviewing & Learning.

For the success and achievements of the last year, I would like to congratulate and thank the entire team of CID for their unmatched zeal, enthusiasm, passion and hard work in achieving the goal meted out under the projects & the programmes they worked for. Sincere and heartfelt thanks to all others who have been a part of success of our journey, our board, volunteers and the communities we work with. We would also like to mention that our efforts would not have translated into effective action, success, and consistence without the support of our Partners.

Our annual report gives us an opportunity to share the past year experience and achievements with everyone who has supported the Centre for Integrated Development and contributed to our journey. We are proud of our achievements of this year despite of pandemic. We are immensely optimistic about reaching out to more beneficiaries in the current pandemic time. But, there is a long journey that lies ahead of us in achieving our vision. As they phrase, "there are miles to go before I sleep, miles to go before I sleep"



## About-Centre for Integrated Development-

Centre for Integrated Development (CID) is a brainchild of socially committed philanthropic people who stood up together in 1992 to make small but significant effort which could create difference in lives of the ignored and excluded sections of society. CID initiated its operation in northern region of Madhya Pradesh. Madhya Pradesh is famous for nothing but its backwardness, deaths due to starvation, feudalism and malpractices which makes it an under developed area. Among deep distress there is a ray of hope as CID continues to proceed forward in its action at remote areas of the region for voicing out concerns of the vulnerable sections of the society. In 29 years of journey CID has worked on various vulnerable sections of the society, such as Health, women, children, PWD's and tribal communities. Some of our key areas range from multi-dimensional development and promotion of child rights and education for eradication of child labour, community health, community development, rural development, gender equality & equity, and poverty reduction through livelihoods and skill development. In the field of health CID works on most crucial issues like malnutrition, Anaemia, Pneumonia, Deficiency of Vitamins and Family Planning & Sexual Reproductive Health in Madhya Pradesh. Today CID is a well-recognized organization of Madhya Pradesh. Centre for Integrated Development (CID) is currently working in **Fifty-one districts** of Madhya Pradesh. It has its team in the mentioned districts. CID is working for development and welfare of the society on various issues like-

- Child Rights, Child Protection, Child Education
- Women Empowerment,
- Gender Equality and Equity
- Anaemia, Malnutrition, Maternal and Child Health, TB, Micronutrient Deficiency
- Environment protection and conservation
- Poverty Alleviation & Rural Development
- Livelihood Development, Skill Training Program
- Environment Protection and Conservation
- Adolescent & Youth Health, Life Skill Education & Development



## **Vision-**

A harmonious society free from discrimination, offering equity and sustainable development.

## **Mission-**

CID aims to empower communities through awareness, participation and capacity building which leads to a society, based on equity and equality for sustainable development.

## **VALUE-**

Commitment towards weaker sections of the society especially children, women, schedule castes & Tribal communities. Advocacy based intervention for policy as well as community level changes.

# Turning 30

In 1992, Centre for Integrated Development was registered under society to encourage and support underprivileged people. The organisation looked for opportunities and shaped itself to serve its stakeholders. Centre for Integrated Development now works with many foreign, corporate, institutional and individual donors on projects across a wide range of thematic areas from- education, Child labour, health, community empowerment, environment, disability, Sahariya Tribes etc.

Thirty years is a long journey of Centre for Integrated Development, it is a story about coming of age, with some significant milestones – the Support of Terre Dess Hommes, Christoffel Blinded Mission, Clinton Health Access Initiative, Ministry of Women & Child Development, National Child Labour Project, Action Aid, Tata Trust and getting support from corporations and NGOs. In the years to come, Centre for Integrated Development will continue to strive to create a better society.



## OUR AREAS OF INTERVENTION-





# CHILD

**Multi Sectoral Approach for eradication of children labour:** In Gwalior District there are approx. 20-25 thousand child labourers, most of them are working in various occupation and industries like Carpet, Stone Crushers, Bidi, Brick kilns, Automobiles, Hotel-Dhaba, Domestic help and Rag-picking etc. There is decline in the number of Child labourers due to awareness in public, RTE, NGOs and community efforts and government schemes like scholarships to backwards and minority communities. Out of the total mentioned child labour population, 55% are Girl Child labourers. Since the inception of CID, we have focused on multi-dimensional development of child so that they can easily come out from the labour practices and understand their rights. This is the responsibility of society to ensure the rights of children to preserve their childhood. There are some basic rights of the children categorised as Right to live, right to development, Right to participation and Right to protection. CID focused on the determinants of these rights to fulfil the wholesome requirement of child rights.

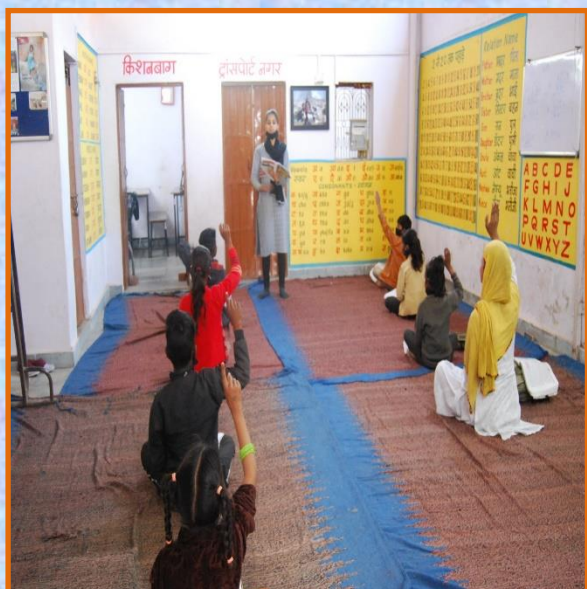




**Child Rights & Protection:** Centre for integrated development believes that every child possesses an individual identity and have same right in this society as those of any adult, for that CID works to ensure their rights at grass root level. For awareness generation, CID undertake Rallies, Workshops and Seminar with Children, Youth & parents for implanting their basic rights i.e. right to participation, right to development, right to survival & right to protection. For Child education and protection CID Runs 4 projects multi sectoral approach to eradicate child labour, Child Line-1098, Child Help Desk Railway Station and National Child Labour Project in Gwalior.



**Child Education:** CID has a long experience of imparting education through innovative and interesting manner, which helped us in bringing children from deprived communities like Child labour, street children, Girls and children from slums to our centres and integrate them in formal school. CID has its own trained experienced team of Teachers / **Education-Facilitators** and Supervisors to initiate education programs.





# HEALTH

**Health** - Madhya Pradesh has been identified by the National Health Mission as a state and the condition of health is very low health indicators. Centre for Integrated Development works on Anaemia, Malnutrition, Adolescents Health, Vitamin Deficiency, Community Based Maternal and Child Health, Tuberculosis & Sexual Health in 51 districts of Madhya Pradesh to improve health condition at the village level.



**People with Disability & inclusive development-** Inclusive development is core value of CID which includes all sections of society in its developmental processes. CID tries to include and ensure participation of persons with disability in its all initiatives. CID is working with 662 persons with disability of Ghatigaon block for their rehabilitation by providing them health care, linking them with government schemes, facilitating them to start income generation activities, ensuring education to Children with special need (CWSN) formation of Inclusive Self-help group and Disability Peoples organizations etc.



# LIVELIHOOD

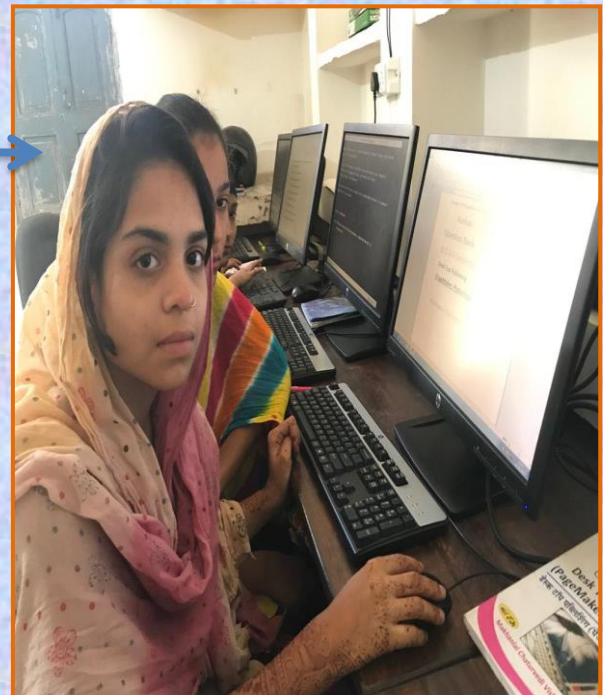
**Livelihood-**A Sustainable livelihood is a basic need for having quality and dignified life for anyone. This is the core objective of poverty alleviations programmes. For ensuring sustainable livelihood for deprived section in our intervention area CID lays emphasis on Entrepreneurship development, Skill development, SHG and Inclusive Self-help group formation , Linking government income generation and self-employment programmes, easy access to credit support, linking with financial institution, Market linkages etc. CID formed 84 ISHG having 662 members. These all ISHG's have been linked with government livelihood promotion programmes. Women associated with these SHG's have started engaging in income generation activities such as poultry, Agriculture activities, dairy, Goatry, broom stick making, Women jewellery shop, grocery shop etc, CID also organized skill development programme for Sewing clothes, beauty parlour, mobile repairing etc. Demonstration Unit for live demonstration established for goatry, Kitchen garden and poultry.



**Women empowerment- Women empowerment** is the process of empowering women. Empowerment can be defined in many ways, however, while talking about women's empowerment, empowerment means accepting and allowing people (women) who are on the outside of the decision-making process into it. Women empowerment is the most crucial point to be noted for the overall development of a country. For women empowerment CID supports women through SHGs, Skill enhancement and Linkage with the Government Schemes.



**Life skill Education & Skill Development-** Skills development is the process of identifying your skill gaps, and developing and honing these skills. It is important because your skills determine your ability to execute your plans with success. Skill development is the continuous process and so the Centre for Intergraded development runs many programmes like Computer Education centre, Stitching programme, course of Beauty Parlours for youth, adolescents & women.





# **CENTRE FOR INTEGRATED DEVELOPMENT (CID) IN NUMBERS (2020-2021)**

Total number of household- **50000+**

Total number of beneficiary- **900000+**

Total number of SHG Members- **2000+**

Total Number of Children Educated by Online Support- **615**

Total Number of Bal Panchayat Member- **410**

Total Number of Youth and adolescents group Members- **460**

Total Number of Community Group Members- **684**

Direct Support to children those are in need, care and protection- **1315+**

Total Number of FLW's oriented on Covid- **30000+**

Total Ration Kit Distribution- **3070**

Mask Distribution- **16000+**

Immunity Booster Medicine Kit Distribution- **3594**

Total Community awareness on Covid- **300000+**

## PROJECTS AT A GLANCE:



**Multi Sectoral Approach To  
Eradicate Child Labor**



**Child Line 1098**



**Reduction Of Malnutrition And  
Anemia In Madhya Pradesh**



**Child Help Desk, Railway Child  
Line**



**National Child Labor Project**



**Saksham Program: An Initiative  
For Empowerment Of People With  
Disability**



**Family planning – Sexual  
Reproductive Health**





## **Multi Sectoral Approach to Eradicate Child Labor:**

Gwalior is one of the largest cities of Madhya Pradesh. According to Census 2011, the population of Gwalior was 1,069,276: of which male population 569,003 and female population were 500,273 respectively. The root cause of rapid urbanization in Gwalior was the concentration of population due to promotion of Gwalior to the status of a big city in Madhya Pradesh and subsequent enlargement of its geographical jurisdiction. Major causes of concern in Gwalior are increase in population, poor sanitation and extreme poverty.

**Community served-** This project is basically initiated to serve each and every community including the families from migrated labour section and Minority (Muslim) community which is found more in number in the affected area.

**Intervention Area-** Slums of Gwalior

### **Objectives:**

Eradication of Child labour by removing them from their workplace and providing support in area of education, health, better upbringing and developing better environment through community empowerment, awareness building and advocacy efforts”

### **About the project:**

In Gwalior, many people from the nearby villages come every year due to rapid urbanization and shrinking of livelihoods opportunities in the villages. Therefore, people are compelled to move towards cities and work as informal labourers. Rapid migration leads to discontinuation of education of children and their engagement in labour force.

Through the implementation of TDH Suisse supported project for several years, many children were completely withdrawn from labour practices and they now have the access to basic education and the opportunity to acquire knowledge on child rights and citizenship. Children and youth are being capacitated to take up advocacy initiatives for the realization of their rights. They are negotiating with the local authorities to claim their rights. Parents have been sensitized on child rights with a special focus on right to education, protection and participation. CID has supported the parents, particularly the mothers of children and youth to improve their socio-economic condition through Self Help Groups.

CID runs 9 Support Education Centres for the vulnerable children (particularly children engaged in labour) who are at risk of exploitation. They provide education to identified children for 4 consecutive years following the curriculum of the State Primary Education Department and prepare them for the integration into mainstream government schools. At these Centres, children are provided with educational support, recreational materials and medicines (if needed). Apart from receiving educational inputs, children participate in co-curricular activities, like Sport, Street Play, craft making sessions etc.



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**Centre for Integrated Development (CID)** is the local Partner of TdH Suisse working in Gwalior city of Madhya Pradesh, India since 1992. The Organization is committed towards weaker sections of our society, particularly children, young people, women, tribal and Dalit population.

Child labour is a stigma on Indian society. Despite the enactment of many legislations and implementation of different government programs, a significant number of children are working to financially support their families. Children, who are engaged in labour belong to socio-economically weaker and marginalized communities. Therefore, they do not get the access to basic education and are compelled to work.

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After the invasion of COVID-19 pandemic the entire population in the city of Gwalior have been heavily affected, particularly the community where CID is working. As we all know due to this lock-down all state sponsored education institutes are closed and children are heavily affected for not continuing their education. At this moment CID has become proactive in supporting these children.

Prior to lockdown CID supported 9 education centers where 315 children got support on a regular basis. During and post lockdown, CID continued its effort by reaching children through online and offline. Children who have provisions of internet and smart-phone/mobile phones are being connected on a regular basis through normal call, video call, etc. but problem was with those children who are not having any support of mobile phone or internet facilities.




When the unlocking period has begun, CID team and teachers became active and took special care for these children who do not have mobile phone support. Teachers started home-visit of these children on a regular basis. CID take up two-pronged strategies – individual home visits and small group classes in their community with following of gesture barriers / WHO guidelines of COVID-19. This way, teachers of CID are trying to cover the entire targeted beneficiaries i.e. 315 children and are trying to complete the curriculum of each child to keep them motivated.

Teachers are also organising demonstration for safety measures and how to maintain hygiene during this COVID19 pandemic.

Under School Enrolment Campaign (School Chalo Abhiyan) 50 community children and 55 children got enrolled in Government Schools in August 2020. During this campaign there was a huge participation of children and youth who sensitised the community at large. CID organised several community meetings where CID BAL Panchayat members and CID youth group members sensitised community people on COVID-19 pandemic safety measures and hygiene maintenance.

CID distributed around 2500 kits of mask and sanitizer to the community children, youth specially girls.

Community empowerment is one of the important aspects of the project. Community awareness on COVID-19 and other issues was continuing as before. CID took the initiative of linking community people with the Government schemes which are available for them. With the support of CID, 75 people from community are registered under Atma Nirbhar Scheme of Government of India, in which they received loan from the Government to start their own small business enterprises. Community has also become proactive in supporting children for getting admitted in Government Schools, preparation of AADHAAR Card and Bank account opening.



## **Child Line 1098:**

**About Project-** CHILDLINE India Foundation (CIF) is the nodal agency of the Union Ministry of Women and Child Development acting as the parent organisation for setting up, managing and monitoring the CHILDLINE 1098 service all over the country. CIF is the sole agency/body responsible for establishing the CHILDLINE service across the country, monitoring of service delivery and finance, training, research and documentation, creating awareness, advocacy as well as resource generation for the service. CHILDLINE 1098 is a phone number those spells hope for millions of children across India. It is a 24-hour a day, 365 days a year, free, emergency phone service for children in need of aid and assistance. We not only respond to the emergency needs of children but also link them to relevant services for their long-term care and rehabilitation. We have, till date, connected to three million children across the nation offering them care and protection.

### **Intervention Area- Gwalior City**

#### **Objective:**

- ❖ Ensure that every child who is vulnerable, neglected, marginalized and/or abused or exploited has access to the emergency helpline phone assisted of CHILDLINE through a nationally recognized telephone number i.e., 1098.
- ❖ Provide a platform of networking amongst organizations and to provide linkages to support systems, which facilitate the rehabilitation of children in difficult circumstances.
- ❖ Work towards an active partnership with allied systems (such as the police, health, transport, education and such others) to protect the rights of children.
- ❖ Build up a referral network of experts from the legal, medical, media, education and other relevant professions in each city to take up issues related to the Child need of care and protection.

**Orientation for CHILDLINE Staff:** CHILDLINE organized an orientation program for team of City and Railway CHILDLINE Gwalior. 21 members including City and Railway CHILDLINE were participated. First of all, the centre coordinator of CHILDLINE Gwalior Mr. Rajendra Soni explained the information about this module as well as its object then he informed the contents of module.

- ▯ Understanding emotional needs of children.
- ▯ Understanding emotional needs of most vulnerable children.
- ▯ Helping Children deal with stressful and painful events.
- ▯ Recognizing signs of psychological distress needing specialized help.
- ▯ Talking to children about COVID-19
- ▯ Talking to children about rumours related to COVID-19.
- ▯ Handling heightened risks of violence, abuse and exploitation.
- ▯ Toolkit for Age Group 6-10 years.



▣ Toolkit for Age Group 11-19 years.

▣ Counselling Activities and Worksheets for Children and Adolescents.

After that he informed about the tool kit for 6 to 10 years and 11 to 19 years and said that we have to do that program with our stake holders and children.

**Orientation with group of adolescent girls:** CHILDLINE organized an orientation program with group of adolescent girls at Madre ki mata area. 20 girls and 3 adults were participated in this program. First of all CHILDLINE coordinator gave information about this module and informed that how they can help to children with the help of this module and how they can understanding emotional needs of children, understanding emotional needs of most vulnerable children, helping Children deal with stressful and painful events, recognizing signs of psychological distress needing specialized help. After that he informed about the tool kit for 6 to 10 years and 11 to 19 years. CHILDLINE coordinator informed to all that how can they keep protect from corona virus and informed to use mask, sanitizer and maintain social distancing. She also informed that if they find any information about children who are suffering from deprecation then call 1098. The entire adolescent volunteer appreciated us to giving this information and gave assurance to help.

**Orientation with group of adolescent girls:** CHILDLINE organized an orientation program with group of adolescent girls at Kishanbagh area. 20 girls and 5 adults were participated in this program. First of all CHILDLINE coordinator gave information about this module and informed that how they can help to children with the help of this module and how they can understanding emotional needs of children, understanding emotional needs of most vulnerable children, helping Children deal with stressful and painful events, recognizing signs of psychological distress needing specialized help. After that he informed about the tool kit for 6 to 10 years and 11 to 19 years. Railway CHILDLINE coordinator informed to all that how can they keep protect from corona virus and informed to use mask, sanitizer and maintain social distancing. She also informed that if they find any information about children who are suffering from deprecation then call 1098. The entire adolescent volunteer appreciated us to giving this information and gave assurance to help.

**Orientation with group of Collies, benders and TT's:** CHILDLINE organized an orientation program at Railway Station with the help of Railway CHILDLINE. 19 collies, 8 venders, 2 TT's, 9 passengers and representative of education department were participated in this program. First of all CHILDLINE coordinator gave information about this module and informed that how they can help to children with the help of this module and how they can understanding emotional needs of children, understanding emotional needs of most vulnerable children, helping Children deal with stressful and painful events, recognizing signs of psychological distress needing specialized help. After that he informed about the tool kit for 6 to 10 years and 11 to 19 years. Railway CHILDLINE coordinator informed to all that how can they keep protect from corona virus and informed to use mask, sanitizer and maintain social distancing. She also informed that if they find any information about children who are suffering from deprecation then call 1098. All the participants appreciated us to giving this information and gave assurance to help.





## Reduction of Malnutrition and anaemia in Madhya Pradesh

CID and WJCF entered into the said Agreement to fulfil the objectives related to public sector work in Reducing Malnutrition and Anaemia in 13 districts of Madhya Pradesh state, namely, Gwalior, Bhind, Morena, Sheopur, Shivpuri, Datia, Guna, Ashoknagar, Shahjapur, Agar, Rajgarh, Vidisha, Raisen.

**Project Goal-** CHAI's Nutrition Initiative for MP aims to break the inter-generational vicious cycle of malnutrition. The goal of this project is to reduce the proportion of both anaemic adolescent girls and pregnant women by 10 percentage points (from current status of 57% and 60% for adolescent girls and pregnant women, respectively) and to reduce the proportion of underweight and stunted children by 10 percentage points by 2019.

### Intervention Area- 13 Districts of Madhya Pradesh

#### Objectives:

CID in partnership with CHAI aims to work with ICDS and Health Department, through NGO partners to improve knowledge, skill and attitude of large network of the Front line workers. Collaborations with NGO partners will help carry out the implementation strategy of reaching out to AWWs, ASHAs, Teachers and Caregivers through various platforms/activities. The strategy includes the following aspects to reduce the burden of anaemia and malnutrition in Madhya Pradesh

- ❖ Improve the intake of iron folic acid (IFA) supplement by adolescent girls & pregnant women
- ❖ Build the capacity of front-line workers to effectively manage ICDS support
- ❖ Improve hygiene and sanitation conditions in areas with high burden of malnutrition

**VHND/GAKs/AWCs/One to One:** Understanding the facts that the VHND services in health and ICDS are essential but required a long process for improvements and required monitoring and supporting FLWs in delivering VHND services in line with Anemia and Malnutrition. It's not only improved the demand generation of IFA and THR nevertheless also hits and improve the understanding of deworming and DD interventions. Strategically designed the intervention of orientation, observation and providing feedback during VHND/ the GAKs/AWCs and VHND visits and interacted with ASHAs and AWWs. 809 Schools visited to monitor progress and implementation of NIPI program. PCs interacted with students through 114 Baal Sabhas. 556 government health facilities monitored for their preparedness on Vitamin A campaign and later on the facilities have been visited for the IFA procurement, RCH mapping and DDB mapping, but the numbers have not been captured due to options and checklists not available.

**Meeting with Mothers/ Adolescents/ Newly Married Women:** To bring the positive change in the behaviour of mothers in relating to anemia, nutrition, IYCF and THR the activity was planned. It also helps in generating awareness on anemia, nutrition, IYCF- Immediate breast feeding, exclusive breastfeeding



and complementary feeding. CID team during the month (January to July 2020) have conducted around 1403 mothers meet, 1418 adolescents and 1335 newly married women and reach out to the 44414 community members including children in Baal Sabha.

**Block Level Meetings:** The Project Coordinators participated in **571** block level meetings and met block officials to close identified field level gaps. These meetings been also leveraged as a platform for capacity building efforts. The meeting conducted with the block officials of **ICDS, Health, Education and PRI** departments to share the gaps and trying to fill the gaps through the departments.

**Divisional Level Review Meeting:** During each quarter the divisional review during the divisional meeting has been planned and conducted in the project duration of year- IV. 6 divisional meetings were planned in this year, 3 divisional review meeting were held to review and address the issue and performance of the Project coordinators. 3 divisional meetings had postponed due to COVID-19 lockdown. The reports of the same have been submitted to CHAI in every quarterly deliverables.

**Quarterly Learning and Review:** One quarterly learning meeting has been participated by the team for the QLRM for the duration of **January to February 2020** and the overall achievement was marked as **90** percent for the duration and the reason for variance were provided for the shortfall occurred.

**NRC Visits:** **100** percent (target 8 and completed 8) monitoring visits made in nutrition rehabilitation center to check the quality of services offered. We intervened to rectify service gaps if any. PCs had done mothers meeting in these visits for counselling and following the aspects of Nutrition and IYCF

**VHSNC meeting:** To improvise the demand for IFA, THR, Deworming and DD intervention and reducing anemia and malnutrition the meeting with the members of Village health sanitation and Nutrition committee was planned and interaction by PCs was done with **587** committees.

**SAM Beneficiary Validation:** This activity was the most important activity that can validate the work done by the frontline workers and to access the knowledge level of the caregivers/ mothers about the health and hygiene practices and know the common causes of trends related to Anemia and Malnutrition in particular areas of interventions. Around **180** SAM were identified and validated during the field visits by the Project coordinator. The major challenges faced in this duration arises when one block strategy taken place that hampered the identification and validation of SAM in one block.

**Sector level meeting with ASHAs:** To reinforce the knowledge and skill related to anemia, nutrition and IYCF one sector meeting per PCs was planned and the team has conducted total 58 sectors meeting with ASHAs.

**Sector level meeting with AWWs:** To reinforce the knowledge and skill related to anemia, nutrition and IYCF one sector meeting per PCs was planned and the team has conducted total 114 sectors meeting with AW



## Child Help Desk, Railway Child Line 1098

Child help desk is a joint initiative of Ministries of Women & Child Development and Railways. The largest number of homeless children, pavement dwellers, street and working children, child substance abusers and child beggars left on their own and in need of care and support reside in urban areas. These children suffer extreme deprivation compounded by lack of shelter and access to basic services for survival. Many of them travel from small towns and rural areas to urban areas, alone or with families, in search of livelihood, or hope for a better life, or in anger, or on impulse. A large number of children who run away from their homes use railways as a mode to travel. There are also children who are trafficked and transported through railways. Finally, a number of children get separated from their guardians during the course of their journey through railway. Such children are vulnerable to the harsh reality of street life and are often victims of various forms of abuse; physical, sexual, emotional as well as economic exploitation. They often end up living on their own in streets, market places and especially at railway stations. All these places are transit points for trafficking and need focussed programmes and attention for rescue and rehabilitation. The Ministry of Women and Child Development and Ministry of Railways have jointly taken an initiative to ensure the care and protection, security and well- being of run-away, unaccompanied and trafficked children who come in contact with the railways.

### **Intervention Area-** Gwalior Railway Station

#### **Objective:**

- ❖ Ensure that every child who is vulnerable, neglected, marginalized and/or abused or exploited has access to the emergency helpline phone assisted of CHILDLINE through a nationally recognized telephone number i.e. 1098.
- ❖ Provide a platform of networking amongst organizations and to provide linkages to support systems, which facilitate the rehabilitation of children in difficult circumstances.
- ❖ Work towards an active partnership with allied systems (such as the police, health, transport, education and such others) to protect the rights of children.
- ❖ Build up a referral network of experts from the legal, medical, media, education and other relevant professions in each city to take up issues related to the ChildLine need of care and protection.





## National Child Labour Project

**National Child Labor Project (NCLP)** is a central government scheme launched for the children. Under this project children are withdrawn from hazardous occupations and then put into special schools in order to get mainstreamed into formal schooling system. These special schools were formed in order to help them get mainstreamed into formal schooling system. These special schools provide non formal/bridge education, skilled/vocational training, mid-day meals, stipend @rupees450/month and health care facilities. This year we were able to mainstream 22 children to class fifth, out of which there were 12 boys and 10 girls. These children were withdrawn from labour activities like carpet weaving and carpentry. We also conducted five rallies in different parts of the city aimed at generating mass awareness about prohibition of child labour.

**Project location:-** CID is running a **Child labour Education and Rehabilitation Centre** for the children engaged in carpet weaving Situated at Awadpura (Gwalior).

**Target Group and activities:-** The child workers identified in the survey are put in the special schools and provided the following facilities:

- ❖ Non-formal/formal education
- ❖ Skilled/craft training
- ❖ Supplementary nutrition.
- ❖ Stipend
- ❖ Health care facilities through a doctor every month.

Orientation for CHILDLINE Staff: On date 23.01.2021 CHILDLINE organized an orientation program for team of City and Railway CHILDLINE Gwalior. 21 members including City and Railway CHILDLINE were participated. First of all the centre coordinator of CHILDLINE Gwalior Mr. Rajendra Soni explained the information about this module as well as its object then he informed the contents of module.

Understanding emotional needs of children.

Understanding emotional needs of most vulnerable children.

Helping Children deal with stressful and painful events.

Recognizing signs of psychological distress needing specialized help.

Talking to children about COVID-19

Talking to children about rumors related to COVID-19.

Handling heightened risks of violence, abuse and exploitation.

Toolkit for Age Group 6-10 years.

Toolkit for Age Group 11-19 years.

Counselling Activities and Worksheets for Children and Adolescents.

After that he informed about the tool kit for 6 to 10 years and 11 to 19 years and said that we have to do that program with our stake holders and children.

**Orientation with group of adolescent girls:** CHILDLINE organized an orientation program with group of adolescent girls at Madre ki mata area. 20 girls and 3 adults were participated in this program. First of all CHILDLINE coordinator gave information about this module and informed that how they can help to children with the help of this module and how they can understanding emotional needs of children, understanding emotional needs of most vulnerable children, helping Children deal with stressful and painful events, recognizing signs of psychological distress needing specialized help. After that he informed about the tool kit for 6 to 10 years and 11 to 19 years. CHILDLINE coordinator informed to all that how can they keep protect from corona virus and informed to use mask, sanitizer and maintain social distancing. She also informed that if they find any information about children who are suffering from deprecation then call 1098. The entire adolescent volunteer appreciated us to giving this information and gave assurance to help.

**Orientation with group of adolescent girls:** CHILDLINE organized an orientation program with group of adolescent girls at Kishanbagh area. 20 girls and 5 adults were participated in this program. First of all CHILDLINE coordinator gave information about this module and informed that how they can help to children with the help of this module and how they can understanding emotional needs of children, understanding emotional needs of most vulnerable children, helping Children deal with stressful and painful events, recognizing signs of psychological distress needing specialized help. After that he informed about the tool kit for 6 to 10 years and 11 to 19 years. Railway CHILDLINE coordinator informed to all that how can they keep protect from corona virus and informed to use mask, sanitizer and maintain social distancing. She also informed that if they find any information about children who are suffering from deprecation then call 1098. The entire adolescent volunteer appreciated us to giving this information and gave assurance to help.

**Orientation with group of Collies, benders and TT's:** CHILDLINE organized an orientation program at Railway Station with the help of Railway CHILDLINE. 19 collies, 8 venders, 2 TT's, 9 passengers and representative of education department were participated in this program. First of all CHILDLINE coordinator gave information about this module and informed that how they can help to children with the help of this module and how they can understanding emotional needs of children, understanding emotional needs of most vulnerable children, helping Children deal with stressful and painful events, recognizing signs of psychological distress needing specialized help. After that he informed about the tool kit for 6 to 10 years and 11 to 19 years. Railway CHILDLINE coordinator informed to all that how can they keep protect from corona virus and informed to use mask, sanitizer and maintain social distancing. She also informed that if they find any information about children who are suffering from deprecation then call 1098. All the participants appreciated us to giving this information and gave assurance to help.



**Orientation with girls of children home:** CHILDLINE organized an orientation program with girls of children home, Murar Gwalior 25 girls and 8 staff members were participated in this program. First of all CHILDLINE coordinator gave information about this module and informed that how they can help to children with the help of this module and how they can understanding emotional needs of children, understanding emotional needs of most vulnerable children, helping Children deal with stressful and painful events, recognizing signs of psychological distress needing specialized help. After that we have done an activity with girls and according to this, girls wrote their stress, fear and anxiety on a paper and we dropped in a box and we gave assurance to all that we will through this box very far from you. Railway CHILDLINE coordinator informed to all that how can they keep protect from corona virus and informed to use mask, sanitizer and maintain social distancing. She also informed that if they find any information about children who are suffering from deprecation then call 1098. The entire participants appreciated us to giving this information and gave assurance to help.

**Orientation with volunteers:** CHILDLINE organized an orientation program with volunteers at Awadpura area. 25 volunteers and 5 adults were participated in this program. First of all CHILDLINE coordinator gave information about this module and informed that how they can help to children with the help of this module and how they can understanding emotional needs of children, understanding emotional needs of most vulnerable children, helping Children deal with stressful and painful events, recognizing signs of psychological distress needing specialized help. After that he informed about the tool kit for 6 to 10 years and 11 to 19 years. Railway CHILDLINE coordinator informed to all that how can they keep protect from corona virus and informed to use mask, sanitizer and maintain social distancing. She also informed that if they find any information about children who are suffering from deprecation then call 1098. The entire adolescent volunteer appreciated us to giving this information and gave assurance to help.



## **Saksham Program: An Initiative for Empowerment of People with disability:**

Persons with Disabilities and their family have equal access to health, education, economic, social and political entitlements through comprehensive community based rehabilitation and development programme. CID is working in two directions to ensure accessibility of persons with disability and their family members. Firstly CID aims to generate awareness among community and persons with disability about their rights, entitlements and government services. To do so it focused on capacity building of DPO leaders, ISHG members and other community members so that they can become capable enough to avail their rights on their own. Secondly it aimed to apprise the service providers and office bearers on issues pertaining to Persons with disability and their community and tried to build up coordination and networking.

**Intervention Area-** 35 Villages of Ghatigaon Block

### **Objective:**

- ❖ Community Based Inclusive Development

### **Conduct training for parents/caregivers on basic therapy intervention and ADL activities**

Awareness program on Activities of daily living for children with disabilities was carried out for 34 parents and caregivers at Ghatigaon on 6th February 2020. In this programme Mrs. Krishna agrawal, Assistant project Coordinator of Education department, was main facilitator. She is also special educator. She oriented caregivers how to help Children with special need to perform daily routine works such as bathing, brushing teeth, use toilet, and maintain health and hygiene practices. She also suggested care givers to make efforts make their children self dependent for daily living activities with support and guidance. On 17.08.2020 and 24.08.2020, about 70 parents and caregivers in Ghatigaon were participated in orientation programme focused on daily care and basic therapy. Mrs. Rakhi asthana from Roshni Sansthan was main facilitator of these programmes.

Facilitate and refer to accessing medical care service-Project team members and DPO members try to help community individuals and PWDs who are in need of medical help due to disease or health issues. These people are facilitated to have medical services at District hospital or Medical College at Gwalior. In this reporting period 215 people (133 PWDs) refer for availing medical treatment and 170 community people (143 PWDs) facilitated for getting proper treatment for their medical issues, 11 eyes camps were organized in 11 villages of with the help of Kalra Eye Hospital. In these camps 200 people undergone with eye checkups and 80 got treatment and 20 people underwent cataract surgery. 30 Severely malnourished children admitted to NRC (Nutritional Rehabilitation Centre) for 14 days their parents got 14 days' wages as well as knowledge on Nutritional food.




Conduct a sustainable livelihood basket assessment of persons with disabilities, family members and other marginalized members- A training program on evaluation of livelihood basket with 23 people was organized on 16.03.2020. This training was based on key learning of Training organized by Naman Seva Samite. Mr. Hamid Khan, project coordinator was main facilitator of this training. After assessment on the basis of their interest and scope of work a livelihood basket have been prepared of all participant. At Community level basket assessment of 156 people (76 PWDs) have been done. Total 156 Persons with disability, family members and ISHG members made business plan by CID team according to module prepared by Naman seva samiti.

Acilitate and support to develop Individual business plan- 22 Persons with disability were oriented on business development plan at Ghatigaon on date 02 June and 12 June 2020 and made a livelihood basket for all people. After that individual plans were prepared for all 22 participants. Mr. Hamid Khan was main facilitator of these programmes. These business plans have been supported by project and ISHG.

Further Individual business plans prepared and facilitated for 156 community people. Among these 76 people with disability (21 Male and 55 Female) and 80 other female members. These people started their income generation activities with support of Samarth project and national rural livelihood mission.

Develop the capacity of the project team on capital budgeting, bank proposals and financial process of banks and institutions- On 16th September, 22nd September, 14th December and 26th December 2020, trainings were organized at Samarth office Ghatigaon and satkar guest house. All team members were present in these trainings. These trainings facilitated by Mr. Ashvin Juneja former director of RSETI, Mr. Ashok Sharma director of Rural self employment training Institute (RSETI) and Mr. Deepak Sinha, branch manager of central bank of India Ghatigaon. These trainings focused on Drafting bank proposals, MUDRA loan, operating systems of bank, personal and firm Bank Account operation and eligibility criteria to avail bank loan.

Conduct a study on value chain on Goatry, Poultry, Vegetable and Slipper production-A team led by Mr. Anil Sharma from Hewitt Creation conducted Value chain study of Goatry in October month of 2020. Team explored local market and goat farmers at local level.



## Family planning – Sexual Reproductive Health:

Family planning and sexual reproductive health are basically two prominent aspects of society. In Madhya Pradesh the fertility rate is 2.8 and the population rate in M.P is increasing by each passing day, especially in tribal areas and small villages. Every year around 45000 (estimate) women die in India due to complications of pregnancy and child-birth that essentially means that there are 174 maternal deaths per 100000 live births and this is probably because not many people in India are acquainted with the concept of contraceptives (temporary and permanent). Only 49% of the married use a modern method of contraceptive and around 13% of married women have an unmet need for family planning owing to which there is high rates of unwanted pregnancy and unsafe abortion now a days. In Madhya Pradesh unsafe abortions are still very common. Adolescents and women bear a disproportionately high burden of both unsafe abortion and unwanted pregnancies. Married adolescents in India have a particularly high unmet overall contraceptives need i.e. 22%. In fact in one of the top five largest states in India by population- Madhya Pradesh – only 7.5% of currently married adolescents use modern contraceptives.

Despite fairly liberal legal and policy ground for the provision of safe abortion, unsafe abortions are still common. The number of certified abortion providers and facilities is inadequate therefore resulting in limited availability of quality services, especially in rural areas and in the less developed states. In addition there is limited knowledge and awareness surrounding the legal provisions for abortion and availability of services both among client and health care providers.

### **This project is working on 2 most important objectives-**

1<sup>st</sup> Increasing access to safe abortion and post abortion care

2<sup>nd</sup> Increasing access to modern methods of contraception (ANTARA & IUCD).

**Intervention Area-** 51 Districts of Madhya Pradesh



## CID'S COVID-19 RELIEF EFFORTS-

**Mask distribution & Awareness among people for Vaccination** - Centre for Integrated Development, distributed around **16000+** masks in the community for imparting awareness on 3 basic rules: frequent hand washes, wearing of masks and social distancing to fight against covid-19. The other effective weapon to fight covid is Vaccination and so Centre for Integrated Development has also significantly contributed in making community people aware of the need for vaccination.



**Ration distribution-** 3070 ration kits were distributed in the project location and that included rice, Atta, Dal, food oil, Dhaniya Mirchi, Namak, Aalu Pyaz. Owing to the lockdown so many families had lost their livelihood and with that even the basic source of their income and so centre for integrated development has took the initiative with the help of some local partners and distributed ration kits to those in need.



**Immunity booster kit distribution-** Homeopathic & Ayurveda immunity booster kits were distributed within the community and around **3594** people got immunity booster medicine which helped them improve their immunity so as to be able to fight with basic Covid symptoms.





**Provide Psychological support to the children-** During lockdown people were stuck in their homes were removed from their jobs and hence deprived of their income. So it became a reason of fight between parents and children. Children were not willing to go outside to play and schools were closed. They were very often frustrated with this confining situation and so Centre for Integrated Development extended psychological support training to the children and parents of the children. Around 365 of them got training under the said programme and this training support was somewhat a coping mechanism that helped to bear with psychological pressure.



**Hygiene kit-** Around 300 hygiene kits were distributed to adolescent girls during lockdowns.

**Community awareness on Covid-19- 1000** & Community sanitization by- CID Youth Member- 500 & Awareness through pamphlets and IEC around 1780 people from community were briefed and apprised on Covid-19

**Awareness generation of front line workers through Tele-calling-** when the covid pandemic began no one had enough or sufficient knowledge to cope with the pandemic, at that time centre for integrated development started an initiative with the joint efforts of Madhya Pradesh government to provide training to front line workers. Around 80% of the total front line workers of Madhya Pradesh were made aware through an orientation on covid-19 and how to fight against covid.

**Wall writing & Painting for Awareness-** For awareness generation, centre for integrated development did wall painting in some of the key locations of Gwalior around 70 to 80.

**Awareness through Videography-** Making the community aware through videography on handwash and wearing of masks which helped around 14018 people to get knowledge about the covid-19.

**Continue education of the children through online platform-** Centre for integrated Development ensured the continuation of education of around 600+ children from the community. Because ever since



the lockdown, schools have been shut and the children were unable to avail proper education. So CID provided home to home tuition and online education to the community children.



**Tri-Cycle distribution for Disabled people**-Disabled people are the worst sufferer because they are most neglected by the community and the family members. For their support, CID and jivodaya foundation distributed **25** tricycles to disabled people in order to ensure them of their livelihood and regular source of income.



# **Our Past and Present Partners:**

- **TERRE DESS HOMMES (TDH) SUISSE**
- **CHILDLINE INDIA FOUNDATION**
- **CRISTOFFEL BLIND MISSION (CBM)**
- **JIVODAYA FOUNDATION**
- **MINISTRY OF WOMEN & CHILD DEVELOPMENT**
- **MINISTRY OF LABOUR AND EMPLOYMENT**
- **CLINTON HEALTH ACCESS INITIATIVE (CHAI)**
- **EUROPEAN COMMISSION**
- **NUTRITION INTERNATIONAL (NI)**
- **CHILD RIGHTS AND YOU (CRY)**
- **MADHYA PRADESH VOLUNTEER AND HEALTH ASSOCIATION (MPVHA)**
- **TERRE DESS HOMMES (TDH) GERMANY**
- **CANADIAN INTERNATIONAL DEVELOPMENT AGENCIES (CIDA)**
- **UNITED NATIONS INTERNATIONAL CHILDREN'S EMERGENCY FUND MP (UNICEF)**
- **ACTIONAID INDIA**
- **MP STATE AIDS CONTROL SOCIETY**
- **INDIA LITERACY PROJECT (ILP)**



# **Our Cooperation with Institutes / Internship**

- **JIWAJI UNIVERSITY**
- **AMITY UNIVERSITY**
- **NMIMS MUMBAI**
- **ICFAI UNIVERSITY**
- **IPS COLLAGE**
- **BVP LAW COLLAGE PUNE**
- **DR RAM MANOHAR LOHIYA, UNIVERSITY LUCKNOW**
- **NIRMA UNIVERSITY**
- **BUNDELKHAND UNIVERSITY**
- **SYMBIOSIS LAW COLLAGE HYDERABAD**
- **LOVELY PROFESSIONAL UNIVERSITY**
- **IIM INDORE**
- **BHARTIYA VIDHYA PEETH PUNE**
- **MODY UNIVERSITY OF SCIENCE & TECHNOLOGY**
- **MAHATMA GANDHI LAW COLLAGE**
- **DHARMASHATRA NATIONAL LAW UNIVERSITY JABALPUR**







## Thank-You note for our Supporter who support us in Development process-

Centre for Integrated Development would like to take this opportunity to thank our partners and donors for their strong and consistent support, without which we would not have been able to achieve so much. I would especially like to thank our Board Members for their contribution, particularly when we needed to find solutions to big development challenges. During the year, we worked closely with national and state governments to implement our programmes, and provided inputs in their policy making process. Without their support and guidance, we would not have been able to reach more than 900000+ people in Madhya Pradesh to make positive changes in their lives. And finally, I would like to thank all members of the CID family, and all our Partners, Donors, Individual Giving, and other stakeholders who continue to support and believe in our work.



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