



SAMRAKSHA ANNUAL REPORT

2022-23

Samraksha: An Introduction

Samraksha is a development organization which has been working with different communities in Karnataka for many years. Samraksha values the strengths and potential of individuals and communities. It is committed to building on these strengths, so that they can deal with the impact of adversities on their lives.

Samraksha's Vision

Our vision is of a Society where every Individual has the capability to lead a life full of health, equality and dignity.

Samraksha's Mission

- Samraksha engages with individuals and communities who are vulnerable and at risk, to strengthen their ability to live safely and with respect
- Samraksha cares for and supports people affected and living with HIV to enable them to have a quality of life, without pain and with dignity
- Samraksha enables individuals and communities to be who they are and to move towards what they aspire to be.
- Samraksha engages with communities to achieve this overarching purpose

Samraksha's current programmes largely focus on Koppal district, in north Karnataka and Uttara Kannada district in coastal Karnataka.

Over the years, Samraksha's focus has largely been on families affected by HIV and Samraksha continues to work with these families through various streams of interventions. In the past few years, there has been a special focus on children in these families. The learnings from this has helped Samraksha extend its work to children facing vulnerability in other contexts, leading the work in an exciting new direction.

Samraksha has now started working with children living in peri-urban communities. A significant proportion of them face serious vulnerabilities within families including neglect, domestic violence, parental loss or serious illness. Even in the absence of these issues, there are factors contributing to vulnerability in this population – irregular school attendance, lack of supervision and disinterest and non-involvement of parents in the children's life. This includes both academic as well as the social life.

By expanding the reach of programmes to new groups which are vulnerable, Samraksha is exploring new frontiers.

Samraksha's Programmes

Care and Support for People living with HIV

Care and support for people living with HIV and their families has been a flagship programme of Samraksha right from its inception. As more and more services became available for people living with HIV, including anti-retroviral medications which control the virus within the body, HIV became more of a chronic manageable condition, with existing health systems developing the capacity to respond to it. Samraksha therefore focused increasingly on specific services which enhance the quality of lives of people living with HIV.

Currently, Samraksha continues to run two care and support centres – one in Koppal and one in Karwar- providing important services for people living with HIV, helping them stay adherent to the anti-retroviral medicines. These medicines, provided by the public health system, need high levels of adherence to ensure that the virus is controlled in the body. If taken correctly, these medicines help the people living with HIV avoid opportunistic infections, remain functional in their lives and significantly improve their quality of life.

Currently, 9300 people living with HIV are registered in these centers and seek support whenever needed. This includes 583 people newly registered in the last year.

In the last year, Samraksha was able to bring back 6554 people who had stopped taking ART medicines due to various reasons, back into the treatment fold. This was done through a combination of regular contact, one to one counseling, reassurance and accompanied referrals.

Additionally, for people living with HIV, it is important that their partners also test for HIV periodically. This can help in early detection and treatment, and in taking action for prevention. In the last year, with the support of Samraksha, 445 partners of people living with HIV were tested for HIV after due counseling. Treatment was initiated for those who tested positive.

Since HIV has such a serious socio-economic impact, linkages of families living with HIV to social entitlements including pension, housing schemes, low interest loans etc. is critical and Samraksha was able to support 995 families in this regard.

Ramakka, a 50 year old woman recently lost her husband. After her husband's death, she started becoming very irregular with ART medicines. She explained that she was supporting herself, through daily wage labor now and because the work was very heavy, she was avoiding taking these medicines, which made her feel tired and drowsy. She also expressed a desire to start her own enterprise, with a cow, so that she could live off the profits and not be forced to work on others' fields. Ramakka was encouraged to apply for the Dhanashree Scheme interest free loans, and with Samraksha's help she completed all the relevant documentation. She was selected under this scheme, and with the amount, she was able to buy a cow. In a few months she was able to turn over a profit with her small venture. It was enough for her own needs and she no longer had the need to work on others' fields. Gradually, her adherence to ART also improved.

Specialized Services for People living with HIV: Early Detection and Treatment for Cervical Cancer

After phasing out the palliative care centre for people living with HIV, Samraksha has been looking out for opportunities to provide specialized health services for people living with HIV, based on their specific health needs. Cervical Cancer has long been recognized as a major cause of mortality among women living with HIV. Therefore, Samraksha organized screening camps for women living with HIV to detect early signs of cancer. 339 women availed these screening services. Of these 120 were identified as needing further diagnostics and treatment. Samraksha was able to arrange more

advanced diagnostic and treatment clinics and motivate 91 women to avail these services. This helped in providing the first line of treatment and also examine for malignant growth through a guided biopsy. Two women were detected with early stage cancer, and are availing treatment for the same. Detecting cancer at this early stage and prompt service seeking can ensure complete recovery.



Completing the Treatment Loop: Counselors explaining the test results and motivating clients for further diagnostics and treatment

Working with Adolescents in HIV Affected households

For the last five years, Samraksha has been specifically working with adolescents in HIV affected households, with an understanding of different facets of their vulnerability and an aim of promoting resilience among them. Resilience is the capacity to overcome the adversities in their lives. Resilience building involves both capacity building within the adolescents and also helping create a more supportive environment for them.

In the last two years, some of the older cohorts of this programme have passed out from the programme. This year, we worked with the final two cohorts consisting of 47 participants – 26 girls and 21 boys.

Integrating different elements to strengthen the model of resilience building with vulnerable children

This year, Samraksha was able to integrate the experience of different kinds of capacity building – theatre training and dance training- into this model and use these elements towards promoting resilience in these children. Mr. Lakshman Piragar, a renowned theatre resource person, and his group who have all been extensively involved in using theatre as a medium of empowerment were part of these efforts. Mr. Suresh, choreographer and dance instructor also contributed to this.

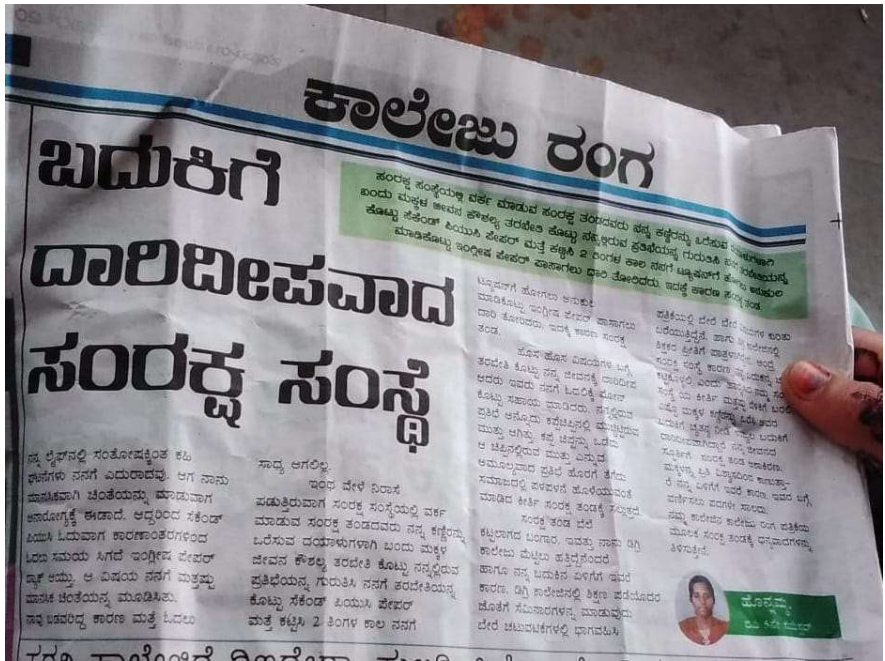
These media gave the participants new opportunities for self-expression, creativity, critical and lateral thinking. At the end of a six month intensive training (consisting of bi monthly sessions over the weekends), the participants put together a programme integrating elements of dance and drama, to showcase their talents and skills.



Using Elements of Theatre and Dance for a new model of resilience building

Theatre and Dance Production as part of the Valedictory Programme





One of the older participants in the resilience building programme has shared about her experience with Samraksha in an article in her college newsletter

Academic Support Interventions for Children in HIV affected families

Samraksha continued to provide academic support for children in HIV affected families, through tuition services for those who were writing their school final examination. Many of them had huge gaps in their schooling due to difficult family circumstances in their childhood and were academically not at the required level, but with support and encouragement from Samraksha, they attempted the exam and all of them passed it, at least on the second attempt. There was also a danger that some of these participants may drop out after completing 10 standard, but due to family level interventions, all of them are continuing education, either in junior college or through job oriented ITI Courses.

Shweta (name changed), a 16 year old girl living with HIV, dropped out of school at 11, because of serious health problems. Even at 11, she could barely read or write. After becoming a part of Samraksha’s programmes, she expressed an interest in learning and with the help of bridge courses, attained functional literacy and numeracy. Her motivation was so great that she decided to appear for the 10 standard exam as an independent candidate and sincerely attended all tuitions to help her in the preparation. She was unable to write the exams due to an administrative issue, but has now resolved to enroll for school and complete her exams in the next opportunity.

Maruti (name changed), a 15 year old boy also had many gaps in schooling because his family migrated to different places following his father’s death. Maruti himself was living with HIV and had many health issues also, and dropped out of school. Again, he was barely literate when he joined the Samraksha programme. He attended bridge classes to help him gain basic literacy and finally enrolled in school again in the 8 standard. He was able to successfully complete his 10 standard exams.

15 children benefited from academic support interventions.

Promoting Mental Health and Resilience among vulnerable children

There were many learnings from the resilience building programme for adolescents in HIV affected households. This experience also highlighted that such programmes have value for children who are facing similar vulnerabilities, though not related to HIV. Factors which contribute to vulnerability include lack of involvement of parents in children's lives, poor socio-economic background, domestic conflict including domestic violence and exposure to behaviors like alcoholism and gambling. These vulnerabilities were manifest in different behaviors – high degree of absenteeism from school, truancy from school, inability to focus in school activities, inability to maintain basic discipline, poor academic performance (below par considering the age) and extremely aggressive or extremely withdrawn behavior. These behaviors affect not just the individual, but also contribute to the classroom environment.

Samraksha is following a multi-pronged approach to this work with the children. While certain issues are addressed in group level sessions, focusing on building life skills and self-confidence, other issues are addressed at the level of the child and the family, through specifically tailored counseling interventions. These individual and family level interventions are undertaken with the children identified as extremely vulnerable.

Samraksha initially rolled out the programme with 7 higher primary schools in Koppal. On seeing this, another school themselves requested that we start the programme in their school also. Therefore in all, we reached 8 schools in the last year. The schools themselves serves communities which are very vulnerable- some of them serve areas with a high proportion of nomadic population, others serve largely scheduled caste communities, some of them serve areas with a high number of religious minority population.

Samraksha is working in 8 schools, with children enrolled in classes 5, 6 and 7. A total of 420 children are enrolled across these schools, and around 320 of them have been regular in this programme.

Group Sessions

In the last year, Samraksha completed 25 group sessions in all these 8 schools. Initial sessions focused on building rapport with the children, helping them relate to the Samraksha team, not as teachers in a position of authority, but as their mentors and well-wishers. These were followed by sessions which gave them a chance to express a diverse range of skills – creativity, lateral thinking, physical dexterity etc. Reflective sessions focusing on the self, on values as well as emotions were also conducted.

Building Self-Confidence

These sessions gave a chance for children to display their skills. This was crucial for building self-confidence and self-esteem in them. Children have demonstrated many of the skills they have learnt in these sessions in different forums, earning them praise and recognition from their teachers. In some cases, teachers themselves were surprised at the efforts made by some of the children whom they had always considered were not capable of performing anything.

Teachers in Sirsappayana Matha Higher Primary School expressed delight and joy at the way Shwetha, a child with hearing impairment and speech difficulty was participating in the sessions. This made the teachers realize the strengths of the participant which they were missing out on during their sessions and try to include her more in school activities.

Promoting Self Awareness and Emotional Regulation

Reflective sessions focused on self-awareness, value clarification, understanding emotions and emotional regulation. This set the stage for addressing issues like bullying which contribute to toxic classroom environment and children had opportunities to reflect on the values of inclusiveness.

Regular practices of breathing exercises and meditation were also included in these sessions, to introduce these habits to the children and gently nudge them towards adopting them and practicing them regularly. These being critical for emotional regulation, it was heartening to note that a majority of the children were interested and willing to engage in them.

Understanding Every Child and Developing Interventions for Vulnerable children

After a detailed assessment, involving discussions with parents and teachers, as well as structured one to one interactions with the children themselves, around 103 children were identified from across the schools as more vulnerable. After more exploration and initial interventions, about a third of them were identified as most vulnerable, and one on one interventions were started with them. Over the course of the next two years, we will continue to work on a one to one basis with these children.

Interventions follow a multi-pronged approach. For instance, an issue which a child is facing in school may need interventions at the group level to influence the attitude of the peers. At the same time, interventions have to be done at the individual level, to help the child cope with the problem, as illustrated by these examples.

Anita (name changed), a 12 year old girl from Gandhi Smaraka School, has a congenital spinal issue which has led to problems of incontinence. She was therefore always excluded from all activities in class and in group sessions, all other participants would avoid being in groups with her. During the course of the year, Samraksha had multiple one-to-one sessions with her, gradually encouraging her towards self-care, hygiene and practices like yoga which may be useful to her. At the same time, within the group, Samraksha was able to get the others to recognize the need to be more inclusive of everyone and empathize with the problems of others. Anita's other strengths and contributions were acknowledged and highlighted. Gradually, other participants became more open to her, even seeking her out to be part of their groups. Similarly with Shivu (name changed), a 11 year old participant from Kotgargera, who was mocked by classmates for his speech impairments. At the individual level, Samraksha worked with the family and referred him to a disability resource centre for therapy. At the group level, Samraksha was able to get the other group members to acknowledge the need for being inclusive and reaching out to him in class.

Attempting to Change Attitudes towards Education in these vulnerable communities

In many of these schools, more than a quarter of the enrolled students are regularly absent in class. Different socio-cultural factors contribute to this long term absenteeism in schools. On the economic front, nearly 18% of the carers are doing unskilled work and 42.5 % are involved in semi-skilled work, with low job security and little scope for progression. Nearly 20% of them are involved in small businesses, with uncertain incomes. around 22.5 % of the families reported monthly income of less than 5000.

Most of the children are first generation learners in their family, with no role models or guidance for academic work within the family. Nearly 41% of the parents have no schooling and 34 % have only completed primary school. Some of the children themselves continue to have problems with basic literacy despite having almost completed primary school. According to the teachers, nearly 19% of the

enrolled children cannot read at all and 25% continue to have some problems in reading the primary language.

We are also making an attempt, through regular case work support, to decrease absenteeism in these schools and ensuring that more of the enrolled children attend school regularly.

In one of the chosen schools, Gandhi Nagar Higher Primary School, the principal had shared that the proportion of children who sought admission in high school after primary school was very low. The community around the school largely consisted of itinerant vendors, and they inducted the children into their business at a young age. There was also social pressure regarding endogamous marriages for girls and this was also a reason why many parents forbid girls from enrolling in high school. In the last year, there were two children sought Samraksha's support in continuing education, which their parents were resisting. we undertook interventions at the family level,

In another school, Gandhi Smaraka Higher Primary School, difficulties in learning and fear of not being able to do the school work was leading to high levels of absenteeism among some children. However, by building a one -to- one relationship with the children who are irregular, the Samraksha team was able to encourage them to attend schools at least for the sake of the group sessions. In group sessions, efforts were made to encourage and appreciate contributions by these children, adding to their self image. Gradually, some of the children started attending few classes also. This is an ongoing process with many ups and downs, since many children again lapse back to absenteeism, if they encounter some difficulty in school or at home. But we have made a start in terms of gently nudging the children towards school.

This work in schools is taking Samraksha's work in an exciting new direction. Samraksha has always been committed to promoting mental health in all its work, and through this new programme, Samraksha has found an opportunity to work with a vulnerable group, at a crucial stage in their lives. Through this programme, Samraksha is hoping to equip the children with the skills and resources to bounce back from difficulties in later life.



Creative Expressions: Diorama and Pot Painting



Pranayama and Meditation



Exploring Emotional Awareness through non threatening media like board games

A note of thanks to our donors

We would like to thank all our donors who have made this work possible.- TTK Prestige, Haribhai Desai Foundation , International HIV/AIDS Alliance and Maharashtra Network of Positive People, who have supported us in the last year.

We would also like to thank Indian Cancer Society and Kaarkinos Healthcare Limited for partnering with us to offer special services for vulnerable women. We would like to thank City Hospital, Koppal for supporting these services.

Our special thanks to all individuals who have extended support to our work – Ms. Carol Perreira, Ms. Joyce Tan, Mr. Kumar Iyengar, Ms. Shanta Dhanraj, Ms. Maitreyi Ganesh and Ms. Gayathri Ganesh. Your recognition of our work gives us a lot of encouragement and we really appreciate your gestures of support.

Summary of Financial Information

Income and Expenditure Statement 2022-2023		
	Amount (INR)	Percentage of Total
Income		
Grant Received	11829896	99.21
Donation/Prog support	43276	0.36
Fixed Deposit interest	46556	0.39
Others	4094	0.04
Total	11923822	
Expenditure		
Programme Expenses	10570449	88.65
Admin Expenses	827190	6.94
Excess of income over Expenditure	526183	4.41
Total	11923822	

Balance Sheet		
	Amount (INR)	Percentage of Total
Assets		
Cash in hand	0	0.00
Cash at Bank	18884270	94.15
Loans and Advances	1084738	5.41
TOTAL	20057393	
Liabilities		
Corpus Fund	1000	0.01
General Fund	6805397	33.93
Capital Fund	88385	0.44
Donor Fund	12795378	63.79
Current liabilities	367234	1.83
Total	20057393	

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Samraksha's vision is a society where every individual can lead a life full of health, equality and dignity. The current areas of work are Koppal and Uttara Kannada districts in Karnataka.

Samraksha believes in the strength and potential of individuals and communities. It works with them, specially the most vulnerable groups like children to strengthen their ability to overcome difficulties. Samraksha is also committed to ensuring care and support for people affected by HIV, to ensure that they have a good quality of life, and are able to live with dignity and without pain.

Samraksha also helps individuals and communities actualize their potential: to be who they are and move towards what they aspire to be.