

# Project - SAMADHAN

## Impact Assessment Report



सर्वजन हिताय

# Samadhan

**A Comprehensive Community Development Program**



**Ladli Foundation Trust**

A National Award Winning  
Non-Profit Organization

A CSR Initiative by Delhi State Civil Supplies Corporation Limited in Association with Ladli Foundation Trust

A CSR Initiative by Delhi State Civil Supplies Corporation Limited in Association with the Ladli Foundation Trust, at Parvatiya Camp, RK Puram, New Delhi



**Ladli Foundation Trust**

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# Executive Summary

Pockets of slums are found in almost every part of Delhi city-even in the backyard of posh residential colonies. The inhabitants from the most marginalized cross-section of society- by and large, migrants having sought refuge in bigger cities in search of livelihood options- land up working menial jobs. A range of issues and challenges are seen here in the slums. For a successful implementation of a community development program it is essential to target the families instead of a particular beneficiary of an age group. To target the development of the families it means we are targeting every member of a family - from children to elderly.

Keeping in mind the need to implement an effective comprehensive community development program keeping in mind the sustainability approach, Ladli Foundation Trust came up with this Project - SAMADHAN incorporating their expertise gained over the years and adding the previously held activities and projects to further strengthen the project.

Project - SAMADHAN is to establish a holistic comprehensive community development program which started from January 2022 - March 2022 and develop it into a model project, assess their significance and provide recommendations for their mitigation which can be adopted by the different civil society organizations and authorities. The report covers areas such as crime and drug prevention, women healthcare, primary education, handholding support for the government welfare schemes, sustainability and socio-economics. Early identification and characterization of critical issues and challenges affecting a community impacts allow the public and the Government to form a view about the program's acceptability of a proposed developmental project and what conditions should apply to mitigate or reduce those issues and challenges. The purpose of the pilot program is to test a contextually appropriate, sustainable, low cost, and replicable alternative model in a typically resource poor setting context in low and middle income countries that will guarantee access to varied welfare services and as well contribute towards prevention/reduction of substance abuse and crime related activities, of anemia & children's learning and development. To test the effectiveness of this pilot program this Impact Assessment Report has been prepared which includes the assessment of all the data and activities conducted in the program.

A baseline survey was undertaken in January 2022 to establish the pre-project conditions and set a reference point to measure the intended outcomes of the project. A follow up end line survey was conducted in March 2022 following the completion of the project activities. The data was collected using the Questionnaire Survey format and assessment method.

### **Objective of the Impact assessment study:**

- To measure through research and analysis the impact that can be achieved through this programme
- To assess sustainability and learning
- To gather data on the effectiveness of the program and whether the objectives of the program were achieved
- To provide Ladli Foundation Trust with inputs to prepare for future interventions

The salient findings from the impact evaluation revealed the following:

### **Key Findings:**

- The targeted 300 families saw a significant increase in the level of awareness on MHM, WASH, Crime and Drug Prevention, Digital Literacy, population who weren't sensitized before on these topics and Gender awareness, behavioral change was seen after these sessions and workshops.
- Best practices were adopted On an average there is a 90% chance that these participants will pursue these activities in the future.
- Women & girl child from the lower strata of the society are more likely to be anemic, malnourished and not aware about the existing health issues they might be having,
- Anemia reduction can happen with food-based approach intervention. Awareness regarding the foods that are easily available to these women and can be helpful in anemia reduction/eradication brings behavioral changes and following these food practices.
- Children who got disconnected from studies, were previously involved in substance abuse or were leisurely their time are now with the regular classes held for them got connected with studies and spend their time doing activities fruitful for them and for their families.
- After educating Girls on MHM, WASH, Good Touch - Bad Touch, STD's, Prevention of Transferable Diseases, Nutrition, etc. and to inculcate the habit of menstrual/personal Hygiene, behavioral changes were adopted among the women & girls who were not practicing primary menstrual health & hygiene.
- The program capacity and regular intervention with the planned activities led to the comprehensive community development at the Parvatiya Camp, RK Puram, New Delhi.

**Conclusion:** - Results of the Impact study find that the SAMADHAN Project is both effective and equitable. Children who were disconnected with the studies got reconnected with studies, and learned through digital education, the program inculcated digital literacy to let children ahead in the digital progression.

Women got to know about the prevailing health issues through the medical camps that were conducted, some of them had never gone for a health checkup or CBC test. 125 Women were identified as anemic, low platelet count, white discharge and other medical issues. They are provided with Anemia eradication kit with regular check ups of proper intake from the field coordinators and volunteers through field visit, door to door survey and phone calls at regular intervals.

Youth indulgence in drugs and crime related activities was reduced by involving them in sports activities, counseling sessions and enrolling eligible beneficiaries in the YUVA program.

Handholding support for welfare schemes - old age pension, sukanya samridhi yojana, ladli scheme.

The activities and services provided to the targeted community was beneficial and accessible to them who otherwise would not have received it.

# ABOUT LADLI FOUNDATION TRUST



## **Ladli Foundation Trust**

**A National Award Winning  
Non-Profit Organization**

**In Special Consultative Status  
with Economic & Social Council, United Nations**

Ladli Foundation Trust is a grassroots-level, National Youth Award winning non-profit organization. It is accredited as Special Consultative Status in the Economic and Social Council (ECOSOC) since- 2020. The Organisation is actively working at the pan India level with its effective community outreach. The organization is a registered entity under FCRA and endowed with the Union and State Governments, District Administrations, and Police Departments. An International wing of the organization has also incorporated in New Jersey as Ladli Foundation USA -A NJ Non-profit Corporation.

Recently the organization was recognized by the United Nations Secretary-General Mr. António Guterres during the 65th Session of Commission on the Status of Women for raising the voice to prioritize the agenda of Women's Health and elimination of Child Marriages in developing countries for achieving Gender Equality (SDG5).

In the past nine years, the organization has gained recognition through its innovative initiatives, especially for empowering lakhs of uneducated, disadvantaged females and persons with disabilities in urban and rural slums. It is also known for innovations, implementation & assessment of grassroots-level Initiatives.

Its Innovative initiatives have directly benefited over one million beneficiaries through Primary Healthcare, Education, Sensitization, Rehabilitation projects and also impacted the lives of millions of people indirectly by creating awareness on most sensitive issues like patriarchy, religious myths, menstrual taboos, child marriages, trafficking

The programs & mega-events of the Organization was witnessed & praised by the Union Home Minister, Union Minister of Social Justice, Women & Child Development, Youth affairs, Department Secretaries of the Government of India, International Diplomats, Bollywood celebrities & other Dignitaries.

# Our Mission



Lying at the heart of Ladli Foundation has a mission to build a safe & gender-neutral and inclusive society by enabling access to Primary Healthcare, Education, Skill Training, and opportunities by focusing on bringing a reformative change in the mindsets of the society by eradicating social victimization of women in each sphere to uphold the status of women. It aims at building a community enabled with the accurate use and significance of their traditional practices for achieving UN SDGs' In India.

We initiate to alter and start a dialogue among people about inhuman traditionally inherited practices like patriarchy, myths, taboos, social victimization which are the main hurdles in providing basic amenities, equal rights, opportunities which are prominent causes of vulnerable conditions of women in India. We envision the idea to break the taboos and adopt a safe, secure & sustainable healthcare system that upholds the reproductive rights of women in our society by sensitizing the male population in a way that they become promoters of Gender Equality.

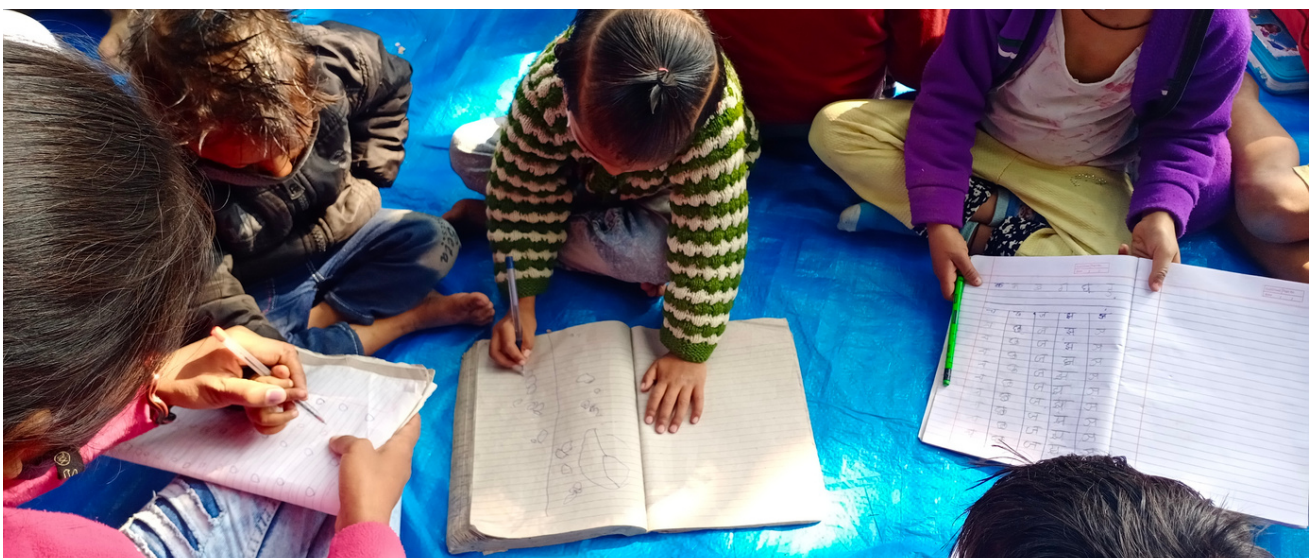
# OUR INTERVENTION

Ladli is known for its deep Research about Gender Discrimination, Plight of slum females in India & Implementing its initiatives for providing Primary Healthcare, education, livelihood and sensitization about various alarming issues. Ladli is involved in enhancing the standards of living and restoring the dignity of socially victimized women and has directly benefitted 75000+ unprivileged females and sensitized more than 5 Lac people through its successfully implemented projects at the grass-root level.



# OUR GOALS AND OBJECTIVES

Lying at the heart of Ladli is the vision of creating a gender-neutral society by attempting to bring about a reformative change in the minds of the people. For which we come up with projects that not only help Women and Girl Child directly but also sensitizes the whole community regarding a particular issue.



# About the Founder

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Devendra Kumar, a young man, self-made and having grown amidst extreme poverty but with a "never say die" approach, is the soul behind Ladli!. He was born in a high-crime-prone Slum of Delhi, where he embarked on his journey when he was left alone by his parents at the age of two with an infant sister. At the age of 8, he started working as a child laborer by selling balloons & working as an aide at a clinic for just 4 US dollars Per Month for his survival, by continuing his education in a Charitable School.

During his balloon-selling, he was snatched & brutally beaten by a group of delinquents and drug addicts. These miseries motivated him to uplift his fellow youths by involving them in Sports & community policing initiatives with the Delhi Police and volunteering with saint john ambulance and Indian Red Cross society. In 2010 his struggle with dowry for his sister's marriage led him to found Ladli Foundation Trust.

A social reformer noted for his diverse approach to empowering the oppressed and disadvantaged has received accolades and recognitions in India and the United Nations. During the 65th Session of the Commission on the Status of Women, he was acknowledged by UN Secretary-General António Guterres for raising his voice to prioritize the agenda of women's health and the elimination of child marriages in developing countries.

Under the aegis of Ladli Foundation Trust, he also assisted in the liberation of thousands of women and young girls from sexual abuse and exploitation and subsequently, empowering them to become self-reliant.

A strong believer of gender equality, his creative approach to raising awareness about gender-based violence in various communities and assisting the needy and troubled through relief projects has been very inspiring as well by his life story, Child Labor to National Award Winner..



# About the Program



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**Problem Statement:** Delhi being Capital of Indian republic, it has been one of the metro cities having witnessed large influx of migration and the trend is almost recurring. More than 25% of Delhi's population over 18 million live in around 860 slum colonies (clusters) that are chronically overcrowded and lack even the most basic amenities. Pockets of slums are found in almost every part of Delhi city-even in the backyard of posh residential colonies! The inhabitants from the most marginalized cross-section of society- by and large, migrants having sought refuge in bigger cities in search of livelihood options- land up working menial jobs.

Migration from rural areas to towns, smaller towns to bigger cities and bigger cities to Metros are a continuous process-adding on to birth and growth of urban population.

Slums are almost always initially informal settlements with no land tenure. Weak social fabric leads to poor collective negotiation capacity of the slum dwellers. Issues like illegality, social exclusion, uncertainty of land tenure, threat of eviction and being forced to live in a disabling environment result in a sense of resignation among slum dwellers. This holds true of all slums in the country.

**Major concern areas:** A range of issues and challenges are found in the slums. We want to start from the development of the most marginalized and often ignored section of this community which are - women and children. Childrens here are often deprived of primary education, women have no access to primary healthcare or are not aware of basic health & hygiene. The pillars of our society, their lives, health, and concerns should be of utmost importance to the whole community and concerned authorities. For a holistic development of the community, of our nation we need to make our two pillars strong.

**Women healthcare:** The whole nation is struggling to build a Modern India; we will not make progress if half of our population is left behind anemic, undernourished, and suffering from chronic disease, having a very poor awareness of health issues.

In the backward sections of society, women and girls are still not aware of the basic precautionary steps about their health. This is due to the patriarchy, gender inequality & negligence of the society towards them & lack of education. In rural areas & lower strata, the females are not given an equivalent respectable position. As a result, they have no access to Primary Healthcare, Education, Sanitation, and Basic human rights. In recent years, understanding the epidemiology of iron deficiency anemia and the technical means for preventing and controlling it has been significantly explained.

Anaemia affects over 800 million women worldwide. In India, it is classified as a significant public health problem as it is estimated that 52% of nonpregnant women of reproductive age are anaemic. Although the primary cause of anaemia is iron deficiency, it is seldom present in isolation. It coexists with several other causes, such as malaria, parasitic infection, nutritional deficiencies, and hemoglobinopathies. The importance of iron deficiency as a cause of anaemia varies by region.

The vulnerability of women in India is the major issue. A high number of females are victims of sexual and physical violence due to alcohol and substance abuse among their male counterparts that deteriorate the condition of the women and lead to severe health issues, including anemia.

**Education:** Status of education among children particularly from lower strata of socio-economic ladder remains more or less the same. While enrolment drives may bring students to schools, the state finds it difficult to retain them after their primary education. The situation with regard to the potential drop-outs, school drop-outs continues to remain a cause of concern despite all hue and cries rose, from time to time, emphasizing the need to rectify the scenario.

According to the ministry of human resource development (MHRD), 62.1 million children are out of school in India. The 2011 Census estimated the figure at 84 million—nearly 20% of the age group covered under the Right to Education (RTE) Act.

Over 30% of girl students drop out of schools by the time they get to class IX and the number rises to 57% in class XI, according to the report — Children in India 2018 — released by the ministry of Statistics and Program implementation recently.

India has an estimated 46 million children between 6-18 years of age who should be in school but are working as child beggars or servants. Most of them have never had the chance to attend the school or have had to drop out due to financial crunch.

Education is the only way to have an unbiased society. An excellent education equips children with the knowledge, skills, values, and mindsets that are required to be empowered individuals and responsible citizens for the country.

In a growing country like India more than 50% of students in Grade 5 cannot read a Grade 2 text or solve a simple subtraction problem. The harsh reality is that the financial status of the parents and their families decides whether the child will attend school and yes, then type of school.

The truth is that today, we are failing the majority of our children.



*In Picture - Project Location: Parvatiya Camp, RK puram*

**Lack of livelihood opportunities:** Due to the lack of above mentioned daily necessities, children from low income/backward socio- economic background are forced to get involve into child labor. Some of these children's parents being dependent on begging make them more vulnerale to other challenges and hardships. There is often a trajectory found - laborers/daily wage laborers kids at a young age have to start doing what their parents are doing which leads to a large number of dropouts or not even getting admission into a government run school. As they have to look out for their livelihood first, their survival, having a stable lifestyle. Attending school has become a luxury. Children also face the scare of being pushed into begging and trafficking and other illegal affairs by rackets.

**Child sexual abuse:** Childrens in slums are more vulnerable to abuse. When it comes to sexual exploitation of both women & children, Delhi is a major Destination State. They are trafficked to Delhi from almost all the states of the country and Nepal & Bangladesh. “More than 50 per cent of child abuse cases reported in Delhi are from slums or backward areas, said experts present at the Delhi Commission for Protection of Child Rights (DCPCR)”. According to figures provided by the World Health Organisation (WHO), 57.8 per cent child abuse cases take place in Indian homes, but go unreported.

**Substance abuse:** Addiction of Drugs Substance Abuse is one of the greatest social evils, also among lower strata of communities,that India is striving to win over. It affects the young minds which happen to be the future of any Nation. But what exactly drives them towards this horrendous practice of drug abuse? Well, there could be various reasons including societal pressure and environment, health, family, abuse, neglect, vengeance, poverty, unemployment and mental stress being a few of them. Talking about unemployment, it is one of the most crucial challenges faced by our country today. Even the educated and skilled job-seekers are not employed and the dilemmas faced by the illiterate are far worse. The situation prevalent in the slums of India is substandard and unpleasant, owing to the widespread prevalence of poverty and illiteracy in these areas.

Unable to cope with the harsh and ruthless realities of life, youth from slum areas, especially the male population indulge themselves in heavy drug abuse, which has adverse effects on their health. Besides, being under the influence of drugs and substance abuse, these unprivileged children are instigated towards social malpractices and heinous crimes including violence against women.

# Literature Review

Youth is a time that is irreplaceable in a person's life. It is at this tender age that a person's personality is shaped and moulded, which later on decides if that person will prove to become an asset or a liability of the nation. Youth is also the time when the mind is most impressionable, and falling prey to deleterious habits like use of drugs due to peer pressure or certain economic and social conditions is not very difficult.

Research has shown that participation in sports and other extracurricular activities like dance can play an important and positive role in the health and development of the youth. A study by UNODC examines the relationship between sports and alcohol and drug use among adolescents. To date, several systematic reviews have been published on the association between sport participation (primarily with respect to organised high school and collegiate sports) and alcohol, tobacco, and illicit drug use (Diehl et al., 2012; Lisha & Sussman, 2010; Martens, Dams-O'Connor, & Beck, 2006; Mays, Gatti, & Thompson, 2011). Collectively, the reviews suggest that sport participation is associated with a lower use of tobacco and illicit drugs during adolescence.

The positive impact of sports is particularly seen during high school; suggesting that this may be a critical period to reduce or prevent the use of drugs through sport.

People who use substances in harmful and dependent pattern (i.e. suffering from Substance Use Disorders) are in need of help. It is thus important to understand as to what extent people who need help are able to access the same.

Sports may be best seen as a physical activity with an agreed upon structure, or set of rules, that allows for competition against oneself or an opponent. Through sports can be played for many reasons, there should always be an opportunity for a mix of fun, self-improvement and competition that will vary with the players involved and the sport they are playing at a time.

Lewando Hundt et al., (2012) found in their study that there are issues of accessibility in terms of distance, and of acceptability in relation to the lack of local and female staff, lack of cultural competencies and poor communication. Also, they found that provision of accessible acceptable health care in rural areas poses a challenge to health care providers and these providers of health care have a developing partnership that could potentially address the challenge of provision to this rural area. Meenakshi Gautham et al., (2011) in their study found that most rural persons seek first level of curative healthcare close to home, and pay for a composite convenient service of consulting-cum-dispensing of medicines. Non-Degree allopathic practitioners (NDAPs) fill a huge demand for primary curative care which the public system does not satisfy and are defector first level access in most cases.

Ray et al., (2011) analysed in their study that large number of patients did not avail any services when they fall sick especially in the tribal district where distance, poor knowledge about the availability of the services and nonavailability of the medicine in addition to the cost of treatment and transport. Utilization of government health facilities was around 38% followed by unqualified practitioners and private practitioners. Referral was mostly by self or by close relatives/ families. According to Jennings et al., (2010) demonstrated in their study that the messages provided to pregnant women significantly improved in birth preparedness, danger sign recognition and newborn care and authors concluded that a job aids-focused intervention can be integrated into routine antenatal care with positive outcomes on provider communication and maternal knowledge.

Kaveri Gill (2009) concluded in their study that the National Rural Health Mission is on the right track of addressing the rural health care with the institutional changes it has brought within the health system. But there are problems in implementation, so that delivery is far from what it ought to be with respect to physical infrastructure, medicines and funding. Whereas with respect to human resources and to the extent these impacts actual availability of services, structural issues of some complexity need careful resolving with a definite long-term investment in the training and education of paramedical and medical staff.

**Activities conducted under this initiative to curb down/prevent and reduce or eradicate the above mentioned challenges:**

S.No.	Remedies	Activities under the Project
1.	Primary Healthcare, Sensitization and awareness program on MHM, WASH and kits distribution for 300 Women aged between 15-40	<ul style="list-style-type: none"> <li>• Registration &amp; beneficiaries registration</li> <li>• Training &amp; Sensitization Phases:</li> </ul> <p>Phase-1</p> <ul style="list-style-type: none"> <li>• Involving young boys, youths in activities promoting physical development and overall health – through training in YOGA, Fitness Dance, Sports including Volleyball game; supplemented with appropriate dietary practices.</li> </ul> <p>Phase-2</p> <ul style="list-style-type: none"> <li>• Orientation session and career counselling;</li> <li>• Organising reward-based competitions and tournaments</li> </ul> <p>Phase-3</p> <ul style="list-style-type: none"> <li>• Desired Skill Training at YUVA Skill center of Delhi Police &amp; NSDC Job placement opportunity through Exclusive Job Fare</li> </ul>
2.	To Provide mobile education classes for 100 children beneficiaries aged between 05-12	<ul style="list-style-type: none"> <li>• Registration &amp; beneficiaries registration</li> <li>• Training &amp; Sensitization Phases:</li> </ul> <p>Phase-1</p> <ul style="list-style-type: none"> <li>• Involving young boys, youths in activities promoting physical development and overall health – through training in YOGA, Fitness Dance, Sports including Volleyball game; supplemented with appropriate dietary practices.</li> </ul> <p>Phase-2</p> <ul style="list-style-type: none"> <li>• Orientation session and career counselling;</li> <li>• Organising reward-based competitions and tournaments</li> </ul> <p>Phase-3</p> <ul style="list-style-type: none"> <li>• Desired Skill Training at YUVA Skill center of Delhi Police &amp; NSDC Job placement opportunity through Exclusive Job Fare</li> </ul>
3.	Drug prevention & Youth Orientation through sports for 100 beneficiaries aged between 08-20	<ol style="list-style-type: none"> <li>1.Registration &amp; beneficiaries registration</li> <li>2.Training &amp; Sensitization Phases:</li> </ol> <p>Phase-1</p> <ul style="list-style-type: none"> <li>• Involving young boys, youths in activities promoting physical development and overall health – through training in YOGA, Fitness Dance, Sports including Volleyball game; supplemented with appropriate dietary practices.</li> </ul> <p>Phase-2</p> <ul style="list-style-type: none"> <li>• Orientation session and career counselling;</li> <li>• Organising reward-based competitions and tournaments</li> </ul> <p>Phase-3</p> <ul style="list-style-type: none"> <li>• Desired Skill Training at YUVA Skill center of Delhi Police &amp; NSDC Job placement opportunity through Exclusive Job Fare</li> </ul>

# Project Area & Beneficiaries



*In Picture - A beneficiary giving the volunteer Parvatiya Camp's tour*

Education - Government schools are far away and not all parents can send their children to school as it is inconvenient. Teachers in schools are not strict at all. Children are not given any homework. The kids have no idea what they are being taught. They tear their notebooks up and nobody scolds them.” (from YKA report).

Benefitted beneficiaries: People residing in Parvatiya Camp.

Project location: R.K. Puram, New Delhi Slums in RK Puram lack basic necessities and hygiene practices - “slums here consist of some houses made out of tarpaulin and cement. The houses surround a huge open drain. Basic facilities like electricity, water, education, sanitation and health continue to be a privilege for people living in such slums.

Sanitation & Health - Many work as labourers at construction sites in Motibagh. Their work includes making tiles for toilets and washrooms. Despite being responsible for the construction of toilets in the houses of other people, they have no choice but to defecate in the open as they do not have facilities of a proper drainage system.

It's not just sanitation, the general health of the residents isn't taken care of either.



*In Picture - Parvatiya Camp, RK Puram*

# Program Objectives

**Objectives of the Program:** Holistic development of the community from January 2022 - March 2022 through the implemented activities.

**Education** - To Provide basic education to street children, ragpickers & child beggars at Red-Light Crossings & Slums

- Under this initiative we not only focus on children but on their parents too. It is essential to understand that parents need to be motivated to send their children to school as they play an important role to make their future bright and stable. Therefore, we do interactive sessions with the parents to motivate and to make them understand the importance of education.
- The other aspect of this initiative is to protect these children from sexual abuse for which we conduct exclusive sessions with the students of pathanshala on good touch and bad touch and on the other hand we take session with the parents on POCSO Act to make them aware of their children rights.

**Women Healthcare** - Primary Healthcare, Sensitization and Awareness Programme

The primary objective of this program is to implement a constructive intervention for women's healthcare and create awareness about women's health, Hygiene, sustainable menstruation practices, and providing hygienic sanitation facilities for the holistic development of the community.

- To identify, train, educate and empower women from weaker sections who would act as catalysts in bringing behavioural change that impacts their living conditions & improves their health & wellness.
- To Eradicate Anaemia / Increase the haemoglobin level in identified & reducing the risk of leucorrhoea, white discharge, other infectious diseases, and cervical cancer.
- Diagnose them and identify the potential carriers of communicable and critical illnesses and assist them with medical intervention in the nearest govt center.
- To educate Girls on MHM, WASH, Good Touch - Bad Touch, STD's, Prevention of Transferable Diseases, Nutrition, etc. and to inculcate the habit of menstrual/personal Hygiene.



*In Picture - Beneficiaries of the Sports Activity conducted under the Project*

***Sports - to divert youth & juveniles from substance abuse & crime by involving them in YOGA, Fitness dance & mental health counselling in slums***

The primary aims & objectives of this activity are as follows:

- Weaning away adolescents and youths, residing in slums and low cost areas, from drugs & substance abuse;
- Reduction in involvement of such youths in anti-social activities and crimes; bringing them under national mainstream
- Complete and Supplement government's national campaigns - Nasha-Mukht Bharat , Fit India, Skill India Movement; and UN SDG's
- Creating employment opportunities and their socio-economic development.

The aim is to engage all the beneficiaries into other healthy activities, if not sports. Such youths will be given a chance to enhance their personal development and knowledge by different mediums. This will provide a fair chance to motivate and encourage the youth, which is the ultimate goal here. The ultimate objective of organizing such activities is not to find the best among them but to bring out the best in them and motivate them, so that they continue to put in their efforts - diverting their energy from unproductive and channelize it towards productive activities.



# Study Methodology.

The methodology used in our research is as follows:

- Direct Observation
- Participant Observation
- Ethnography
- Questionnaire and Qualitative Interviews / Interventions
- Case Study

This report is a systematic analytical review of Ladli Foundation's interventions, assessed for the Project - SAMADHAN (2022).

Research methodology adopted for this project are:

- Baseline survey, primary & secondary research, conducting one to one interviews of the beneficiaries, Survey questionnaire. identification of impact and outcome level indicators.
- Reviewing existing project implementation, evaluation and concurrent monitoring data and reports, using both quantitative and qualitative data.
- A final survey questionnaire of beneficiaries to measure the Impact.
- Qualitative & Quantitative analysis for all the beneficiaries.



*In picture - Volunteers doing the Baseline Survey & Interviews*

To study the prevalence of crime and substance use among adolescents in Delhi, reconnecting children with education and vulnerability of women to anemia and other diseases, we applied the following steps:

- We used focused group discussions and personal interview methods to find out more about the respondents.
- We defined proper parameters and then tried to identify drug users on the basis of body language and eye contact. The most common symptoms of any form of substance abuse are lack of eye contact, lack of control over one's body and dilated pupils.
- In the interview, we interviewed both drug dependents and people in and around their surroundings.
- Our focus was in understanding, the reason, the frequency, the source and awareness about drugs.
- We conducted medical camps to detect Anemia, Lymphocyte, and HIV/AIDS in Women and assess the rate of vulnerability to such diseases and infections.
- We provided anemic women with supplementary kits for three months to see if there is reduction in the cases of anemia among them while taking the supplements and following a sustainable food practice.
- We conducted daily classes for the children and taught them according to their current level of knowledge.

# Results & Findings

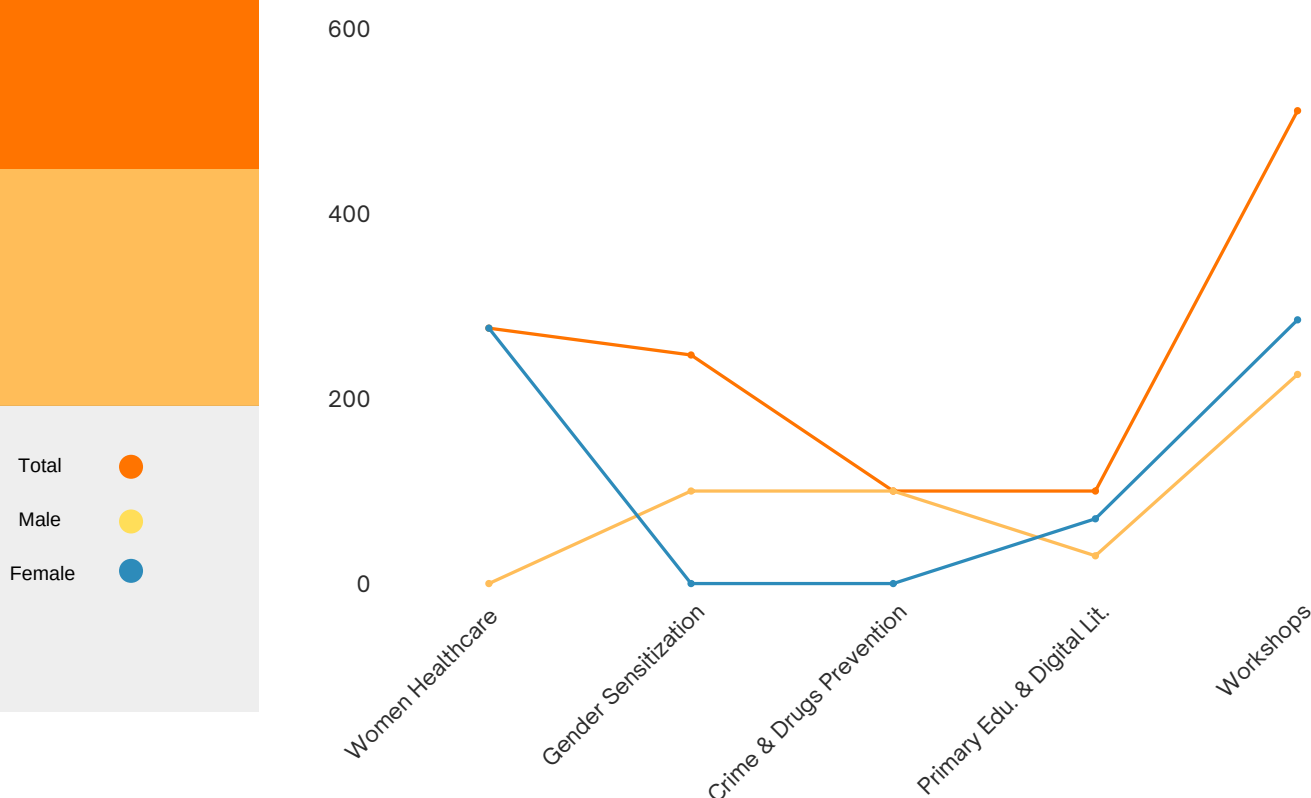
## Overview of study population

Overall 15 out of 300 families observed at baseline were unable to be found at the time of the endline assessment (Table 1). Therefore endline analyses will be conducted on the remaining 285 families who were interviewed at baseline and endline. The children missing at the endline are those who could not attend activities due to the reopening of schools, school final term exams, or as summer holidays are approaching some of the families are leaving for their hometown. An attrition analysis found that younger mothers were significantly more likely to be missing at the endline than older mothers.

Table 1 - Sample at baseline and endline:

Program	Baseline Sample	Endline Sample	%Missing
Primary Women Healthcare	300	Ongoing	-
Crime & Drug Prevention	100	90	10%
Primary Education & Digital Literacy	100	95	5%

Chart 1 - Overview of endline survey by program type and beneficiary group:



## Percentage of students attending primary education classes

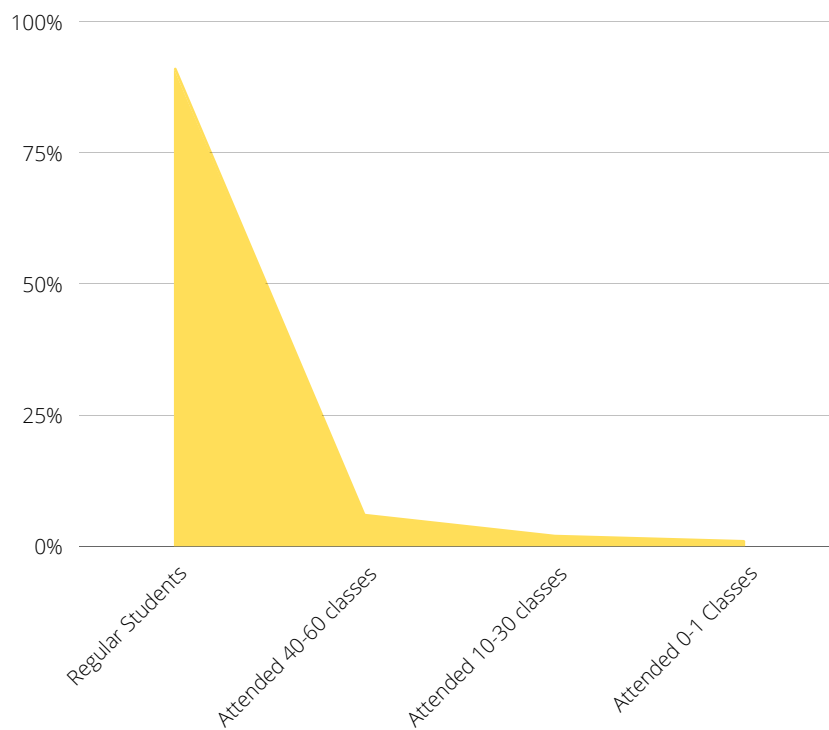


Chart 2

The above chart represents the percentage of beneficiaries who were attending the primary education classes at the location everyday. The regular intervention led to attract more children to join the classes and even encouraged some parents to send their kids to these classes. The children who were attending the classes regularly, their result and improvement in studies was a direct result in the large number of children coming regularly. Parents who saw improvement in other neighboring kids started sending their kids to the classes. Children themselves were reconnected with studies. Self study among children increased at their own testament from the parents shows that. After the reopening of schools there was a slight decline in the number of students being able to attend Pathanshala classes so the organization changed the timings of the classes so that it is according to the students convenience.

Some students couldn't continue with the classes due to summer holidays approaching so many families are going back to their hometown.

## Awareness on child sexual abuse before & after the Project

Chart 3 represents the data about the level of awareness regarding child sexual abuse. At the inception of baseline survey the researchers found out that the children and the people in the community are not aware about child sexual abuse and what to do if one encounters it. After conducting regular planned workshops with the kids on the topic and sensitizing the community on it the level of awareness increased (as shown in chart 4) and children themselves started engaging more with the counselors and volunteers on ground about the abuse and harassment that they have faced.

The increase in awareness is an indicator to reduce children's exposure to sexual abuse and ensure safe, stable, nurturing relationships and environments for all children.

### Before SAMADHAN

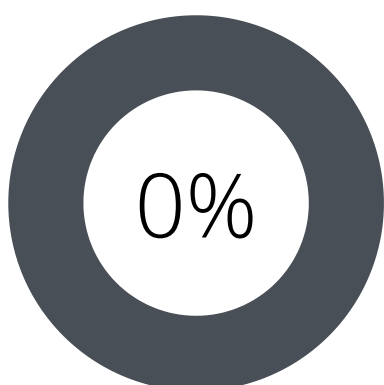


Chart 3

### After SAMADHAN

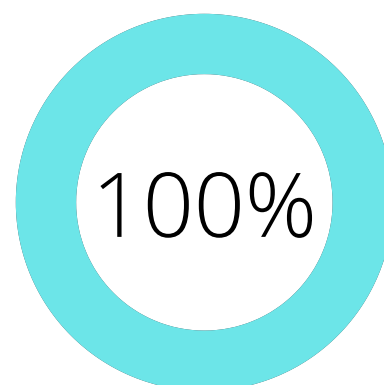


Chart 4

# Awareness regarding harmful effects of drug use before & after

Chart 5 represents the data about the level of awareness regarding harmful effects of drug use. During the baseline survey for the activity on crime and drugs prevention researchers found out that the youth whose indulgence in the drug use is high and some who are at-risk are not aware about the damage it can cause on their physical and mental health. As the data in chart 5 shows only 10% of the overall registered beneficiaries of this activity had information on the harmful effects of drug use.

After the relevant workshops, sessions and involvement of beneficiaries in the sports activity the number of awareness increased and now 93% (chart 6) of the total are aware. The missing % are those who couldn't attend the endline survey due to unforeseen reasons.

## Before SAMADHAN

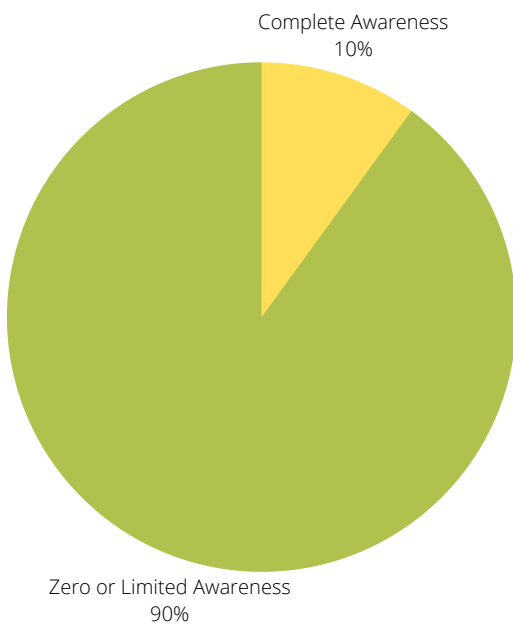


Chart 5

## After SAMADHAN

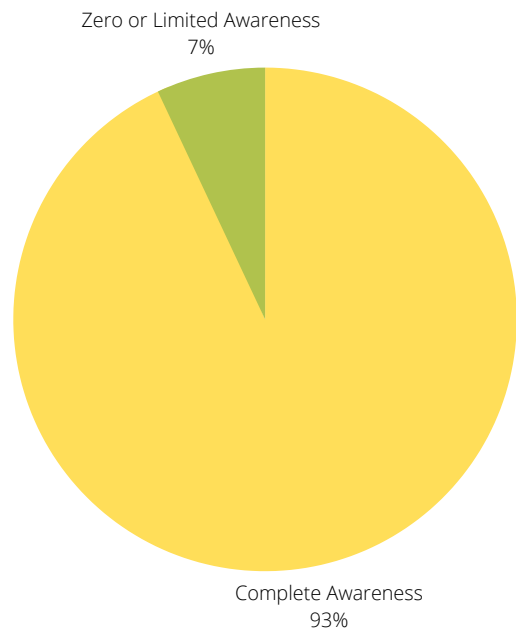


Chart 6

# Comparing few more variables to assess the Impact of the Project

Reduction/Eradication of substance abuse in youngsters

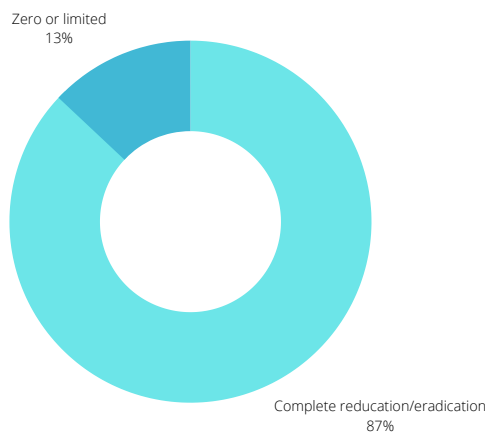


Chart 7

Awareness on MHM & WASH before & after the session

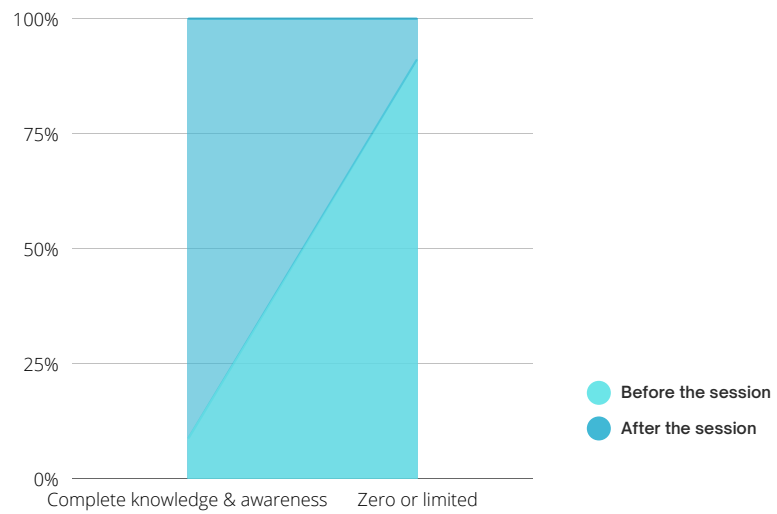


Chart 8

Percentage distribution of participants who have prevented others from engaging in illegal activities

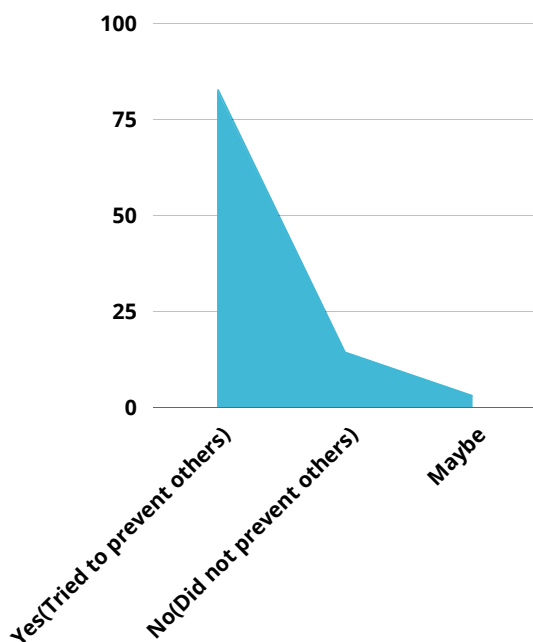


Chart 9

Did someone force them to do substance use/crime again ?

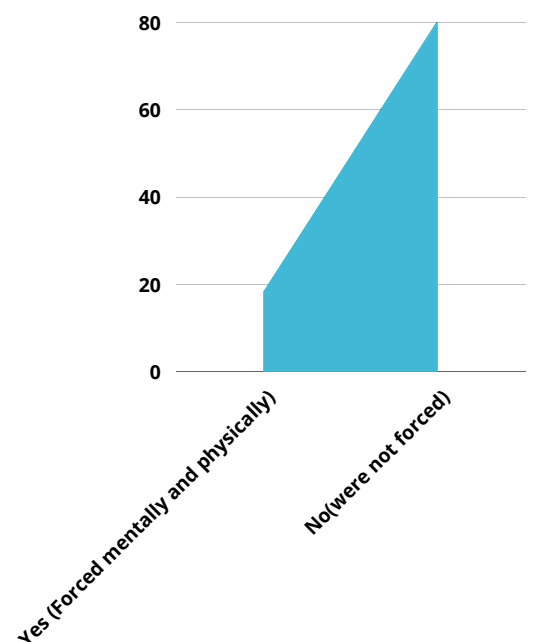


Chart 10

# Digital literacy awareness and learning with e-classes



Picture of the primary education classes beneficiaries learning with Digital learning resources

How to take classes online/E-learning and awareness on digital literacy

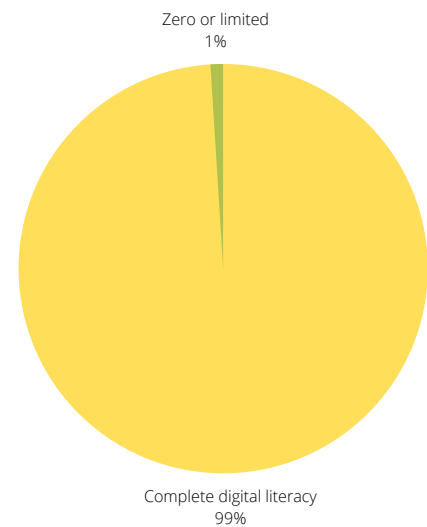


Chart 11

The Covid-19 pandemic led the world to realize the importance and need of digital education and literacy. Many schools and institutions adopt digital education as a solution in the currently prevailing condition. Hence it has become crucial for all to accept and acknowledge the advantages of the digital education system. The organization introduced digital learning for students through the Project - SAMADHAN.

While providing children with Primary education classes, the teachers present in the field started teaching the kids how to take classes online; as the organization has a collaboration with the Byju together, they are aiming to provide free Byju's premium app subscription to one lakh marginalized students in the coming three years.

Through the digital literacy workshops, it was seen that only 1-2 people present had little knowledge on the use of online classes or were aware of digital literacy. The rest heard about it the first time. Regular intervention, workshops on the topic, and classes through the app made the beneficiaries capable of using online resources for their education, taking classes on the Byju's app, how to use Gmail, and being digitally literate. To assist students in learning at the appropriate path and speed is the best advantage of the digital education system. In today's digital world, nearly every career requires digital communication at some point, so equipping students with the skills to effectively and responsibly find, evaluate, communicate, and share online content is key to their futures.

## SAMADHAN as a project could be implemented to the slums, due to the following reasons



*Pictures of the various activities conducted at the Parvatiya Camp through the SAMADHAN project*

- The nature of leisure time activities and time and space for leisure varies in slums compared to developed areas. In slums, due to inadequate housing, lack of education and lack of basic necessities, the majority of time is spent outdoors, which increases the risk of getting involved in illicit activities as compared to developed areas. The high population number and density, narrow space, lack of facilities and infrastructure are the triggers for crime (Tatik Sutyarsi et al. 2019 IOP Conf. Ser.: Earth Environ. Sci. 338 012014).
- Slum area is often seen as potentially causing urban problems, a common perception in the community about slum area that it plays a role as a source of deviant behavior, such as crime and other sources of social issues. The marginal conditions of the unsuccessful population to achieve decent life such as unemployment, vagrants, beggars become the trigger of such deviant behaviors.
- The issue of gender inequality for women slum-dwellers cannot be ignored as the number of people migrating from rural to urban landscape in India trends upwards every year continuously, where the share of women is substantial. Gender Sensitization of the community thus becomes an essential activity to conduct.
- High population density, slum areas and high crime rate causes problem for the community. Thus, there is a need for an overall community development program such as SAMADHAN.



## Conclusion of the Impact Study

Results of the impact assessment prove that the SAMADHAN initiative was both effective and a sustainable program for comprehensive community development

- Volleyball turned out to be the most effective sport for most of the participants. It engaged all the participants mentally and physically, and encouraged them to pursue this sport further in life.
- Significant reductions in percentage of participants consuming drugs after the SAMADHAN initiative.
- Students who were interested in going to school also increased by 100 per cent after conducting regular primary education classes in the locality.
- Peer group study among the students increased by 100%.
- The beneficiaries benefited immensely from the workshops and sessions on women healthcare. After a few initial reluctant responses, the beneficiaries on their own accord approached our volunteers as well as doctors/counselors on ground to talk about their problems.
- After initial reduction in substance use through such interventions, it is highly likely that their bodies relapses and starts the substance use again, therefore the sustainability of our program (i.e. enrolling the eligible beneficiaries in Delhi Police's YUVA skill development program which guarantees 100% employment after the completion of the course) will help tackle that as well.
- The program has been successful in the larger aim of counselling the beneficiaries about gender sensitisation, patriarchy, social victimisation, basic human rights, financial and digital literacy, the need to go to school et cetera.
- After a few iterations to the program structure, the success of this pilot program indicates that we can launch this initiative at a larger scale as well.



*In Picture - Beneficiaries during the MHM & WASH workshop*

# Remarks & suggestions for improvement

Identifying causal relationships between the changes and the program inputs will help in establishing a relation between those two for future initiatives

- Examination of the extent to which each part of the initiative worked individually will help us in identifying which part of the program has better impacts and which have minimal impacts.
- Iterative experimentation using the above results will help in further improving the program in the future so that it can have a bigger impact
- The results of this study can be used as a baseline study case on how to improve the lives of the people living in slums already in the pits and chaos of everyday survival challenges.
- The study shows that regular intervention with activities planned for community development can help in the upliftment of the targeted community.



Pictures of the different activities conducted at the Parvatiya Camp

# Proposed Recommendation

On the basis of the above impact assessment report some following recommendations are proposed :

- Ladli Foundations observed that the implemented program has significant impacts on the lives of the participants. For further effectiveness and sustainability of the initiative such programs should be carried out at a regular frequency or for a longer period of time. To make sure that the participants do not relapse back to their older form of lifestyle regular checkups or surprise checkups are highly recommended.
- Some form of positive reinforcement by the instructors or their mentors will also keep their activities in check.
- Regular meet ups in the local neighbourhood organised by seniors of the group will not only be beneficial of all the participants but will also give a position of leadership to some participants giving them a feeling of accountability and responsibility of others.
- Whatsapp groups can serve as a regular reminder to work towards building a positive atmosphere regularly.



*In Picture - Medical camp held for the women beneficiaries*



*A beneficiary during her weight check up at the medical camp*

# Success Stories

Covid-19 has affected different sectors differently, and education is one of them. Learning has been disrupted for more than 1.5 billion children and youth by the coronavirus (COVID-19) pandemic. Most students worldwide are out of school and using remote learning programs through the internet, TV, radio, or a combination of these, if they are available. Inequity in access to the internet, data packages, and devices to support remote continuity of education for all learners has become evident, but the specific risks that this pandemic poses to Students belong to Economic Weaker Sections residing in Marginalized sections of the society.

Masoom (Ibram) is one of the children whose education has been affected due to the pandemic. His parents' livelihood was affected by it as well. Masoom's mother is a domestic worker, and his father is a daily wage laborer, and we know how badly people working in these sectors got affected and lost their livelihood. That was also one of the reasons that contributed to his declining interest in education. Schools were closed, and the overall burden of sustaining a day contributed to the disruption. Masoom even forgot how to read a clock and tell time. But as they say, after darkness, there is light; Ladli Foundation Trust started their Pathanshala Project in Masoom's area. He came to know about the project from his peers and wanted to try it out. Once he started, there was no going back as he reconnected with learning. Slowly he learned and gained the knowledge he once forgot to recollect. An excellent education equips children with the knowledge, skills, values, and mindsets required to be empowered individuals and responsible citizens for the country. Education plays an essential role in shaping the overall development of an individual and society. That's precisely what Pathanshala & E-Pathanshala has done and will continue to do so. Now Masoom is at the top of his class, attentive and has become a role model for other kids in his locality. More children got encouraged by Masoom, to get enrolled in Pathanshala and get admitted into schools to continue their education.



*In Picture - The local coordinators team at the Parvatiya Camp*

Many children mentioned how after joining SAMADHAN, Volleyball had become their favourite sport and they even wished to play Volleyball at a professional level.

Ankur, a class 9th student, said, “It is my dream to represent India at the Olympics and I wish to be part of the Indian Volleyball team.” While interacting with a group of boys at the field site, most of them mentioned that now Volleyball had become their favorite sport, and earlier they didn’t even know about the existence of this game. Volleyball also encourages a healthy competitive spirit in children as they are divided into teams based on their locations and there is zeal and enthusiasm to win the tournament and make their team and trainers proud.

# Glimpse of the activities conducted



# Glimpse of the activities conducted



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- <https://www.ruralhealthresearch.org/recaps/7>



# Annexure

## Survey Questionnaire



**Ladli Foundation Trust**  
A National Award Winning  
Non-Profit Organization



**PATHANSHALA**  
An Initiative by Ladli Foundation Trust

Name .....

D.O.B. .... Gender .....

Father's Name .....

Mother's Name .....

Address

.....

..... Pin Code.....

Qualification .....

Why (If not  
studying).....

Contact No .....

Category SC  ST  OBC  Gen

Aadhar Number .....

Signature  
(Parents)



# Annexure

## Survey Questionnaire

### MHM - Pre Session Questionnaire

नाम ----- पति/पतिता का नाम ----- उम्र -----

दैनिक ----- फोन नंबर ----- पता -----

1 क्या आपको महनि आता है (हाँ)----- (नहीं)-----

2 महीने के दौरान आप क्या इस्तेमाल करते है - (कपडा)----- (पैड)-----

3 क्या आपको पता है कपडा और पैड कतिने घंटे में बदलना चाहिए है

(क) - हाँ ----- (ख) - नहीं -----

4 क्या आप कपडा और पैड लगाने के बाद हाथ धोते हो ?

क) - हाँ ----- (ख) - नहीं -----

5 क्या आप कपडा और पैड लगाने से पहले हाथ धोते हो ?

क) - हाँ ----- (ख) - नहीं -----

6 क्या आपको पता है कपडे और पैड को इस्तेमाल करने के बाद कैसे फेका जाता है ?

क) - हाँ ----- (ख) - नहीं -----

7 क्या आप महीने के दौरान रोजाना अपने नज्जि वस्त्र बदलते है ?

क) - हाँ ----- (ख) - नहीं -----

8 महीने के दौरान आपको क्या क्या समस्या/तकलीफ होती है ?

-----

9 क्या आप महीने के दौरान होने वाली समस्याओ के लिए डाक्टर से परामर्श लेते हो ?

क) - हाँ ----- (ख) - नहीं ----- (ग) - कभी- कभी

10 क्या आपका मासकि चक्र नियमति रूप से चलता है ?

(क) - हाँ ----- (ख) - नहीं ----- (ग) - कभी- कभी

महीने के दौरान आपको कनि स्थानों पर जाने नही दिया जाता

(क) - स्कूल (ख) - रसोईघर (ग) - धार्मिक

हस्ताक्षर

# Annexure

## Survey Questionnaire

### Post MHM Session

- 1 अब आप महीने के दौरान क्या इस्तेमाल करेंगे - ( कपडा )----- (पैड) -----
- 2 क्या अब आपको पता है कपडा और पैड कतिने घंटे में बदलना चाहिए है  
(क) - हाँ ----- (ख) - नहीं -----
- 3 क्या अब आप कपडा और पैड लगाने के बाद हाथ धोयेंगे ?  
क) - हाँ ----- (ख) - नहीं -----
- 4 क्या अब आप कपडा और पैड लगाने से पहले हाथ धोयेंगे ?  
क) - हाँ ----- (ख) - नहीं -----
- 5 क्या अब आपको पता है कपडे और पैड को इस्तेमाल करने के बाद कैसे फेका जाता है ?  
क) - हाँ ----- (ख) - नहीं -----
- 6 क्या अब आप महीने के दौरान रोजाना अपने नज्जी वस्त्र बदलेंगे ?  
क) - हाँ ----- (ख) - नहीं -----
- 7 क्या आप अब भी महीने को लेकर समाज की गलत अवधारणाओ को मानेंगे जैसे की – लडकी को स्कूल नहीं भेजना, रसोईघर में नहीं जाना, धार्मिक स्थलों पर नहीं जाना ?  
क) - हाँ ----- (ख) - नहीं -----
- 8 क्या अब आप महीने के दौरान होने वाली समस्याओ के लिए डाक्टर या किसी नज्जी डसिपेंसरी से परामर्श लेंगे  
क) - हाँ ----- (ख) - नहीं ----- (ग) - कभी- कभी
- 9 क्या इस वर्कशॉप के बाद आपको महीने के बारे में बात करने के व अपनी बेटी को इस बारे में बताने में कोई हचिकचाहट नहीं होगी  
(क) - हाँ ----- (ख) - नहीं ----- (ग) - कभी- कभी
- 10 इस वर्कशॉप में बताई गई जानकारी को आप कतिना अपने जीवन में अपनाएंगे  
(क) - पुरणतः (ख) - थोडा बहुत (ग) - बलिकुल नहीं

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HOUSE NO 277 BLOCK -9, DAKSHIN  
PURI EXTENSION, DR. AMBEDKAR  
NAGAR, NEW DELHI- 110062**

**C-3, QUTUB INSTITUTIONAL AREA,  
HAUZ KHAS, DELHI. SOUTH DELHI-  
110016**