



Vicente Ferrer

Annual Report
2015-16

*Joining people's journey for a
human, compassionate and just society*

THE EVOLUTION OF RURAL
DEVELOPMENT TRUST



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Executive Director's Message

Over the years there has been a vast change in the situation of girls' age of marriage and correspondingly, their education. There were times when girls would dropout from early classes of secondary school or immediately after primary school and would be married at the age of 11 or 12. Today, majority of the girls are studying up to class 10 and even Intermediate. Thereby, they are getting married at the legal age of 18. However, inspite of efforts from the government and RDT, there are still a number of girls getting married at 15 or 16 or 17. This is a matter of concern. This is an issue for all in RDT to address and not just the women sector. We have to make sure that all girls stay in high school and junior college until they finish Intermediate. Special workshops and meetings should be conducted for girls and their parents to insist on the absolute necessity of girls' education up to at least intermediate. We also have to talk to them about the legality and the benefit of marrying after the age of 18.

Let us make big efforts as teams of RDT persons across the sectors regarding this issue and try to see that our project area becomes a non early marriage area for girls and thereby also an area of minimum undergraduate education for girls.



Anna Ferrer
Executive Director

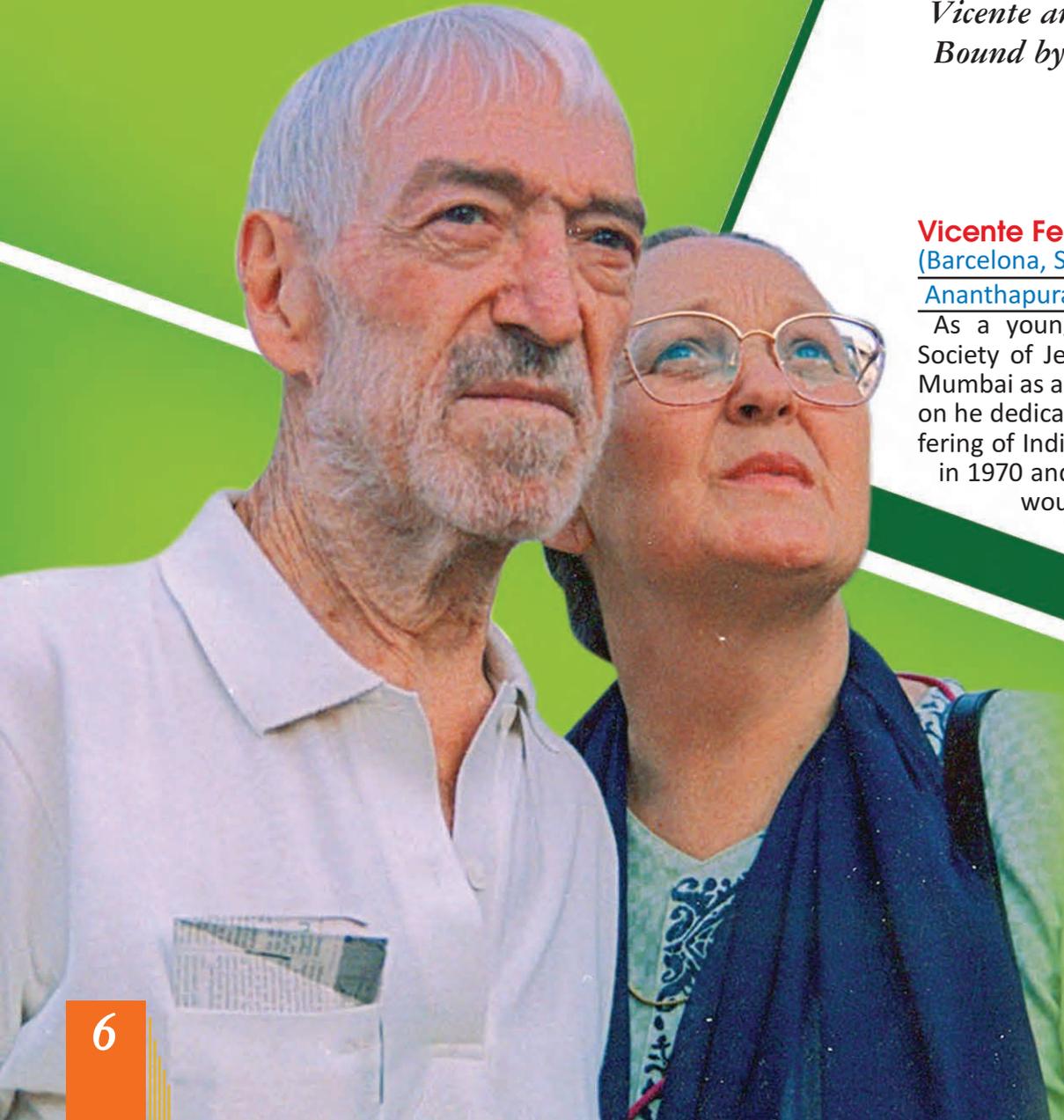




**'help, inspire, give
warmth, give love. This is
the meaning of life and
nothing else.'**

"Many good actions together make
a great big one"

Vicente Ferrer



FOUNDERS' STORY

Vicente and Anna Ferrer met during a press interview in 1968. Bound by a shared commitment to help underprivileged people, they settled in Ananthapuram and created Rural Development Trust (RDT).

Vicente Ferrer

(Barcelona, Spain, April 9, 1920
Ananthapuram, India, June 19, 2009)

As a young man, Vicente joined the Society of Jesus and in 1952, he left for Mumbai as a Jesuit missionary. From then on he dedicated his life to ending the suffering of India's poorest. He left his order in 1970 and, alongside the woman who would become his wife, Anne Perry created RDT.

Anna Ferrer

(Essex, England, 1947)

Anna Ferrer is the Executive Director of Rural Development Trust, India and President of Fundacion Vicente Ferrer Spain. She moved to India as a young woman, studied and worked here, and marrying Vicente in 1970, started a new life in Ananthapuram district. Anna Ferrer has been, and still is, a cornerstone of RDT and has become a resounding voice in the struggle to ensure equal rights for all.



THE EVOLUTION OF RURAL DEVELOPMENT TRUST

The Rural Development Trust (RDT) also known as Fundacion Vicente Ferrer (VFF) in Spain, and Vicente Ferrer Foundation in USA, has worked in the Indian states of Andhra Pradesh and Telangana, for nearly half a century.

Since its inception in 1969, RDT has endeavoured to improve the quality of life of the rural poor, especially among marginalized and underprivileged communities of Dalits(SC), tribes(ST), Backward Castes (BC) and persons with disabilities (PWDs).

Ananthapuram district in the Indian state of Andhra Pradesh has long been a difficult place with patchy rainfall and an arid landscape. Large farm-holders enjoyed a feudal hold over lower-caste tenant farmers, or even bonded labourers created by indebtedness. It was into this scenario- a society deeply divided along caste, tribe and gender lines and marked by pockets of utter destitution that Father Vicente Ferrer arrived in 1969.

The main challenge faced by the rural poor in those years was a lack of basic nutrition, and when they did eat, the meal would be of poor quality. So RDT's early work was in the area of food provision and nutritional

awareness. From then onward, RDT engaged more and more with the rural poor of Ananthapuram, Kurnool districts and Srisailam region, till its work fell clearly into the 10 sectoral divisions it has today.

Today it conducts robust, well-entrenched and widely-appreciated programmes in Education, Women's empowerment, Community based rehabilitation, Hospitals, Community health, Habitat, ecology, Sports, Culture and Chenchu tribal development. Each of these is headed by a Director and is fully-formed with a set of initiatives in its sector.

Dedicated to holistic development, RDT touches not only on the primary aspects of community well-being like nutrition, health and hospitals but also in progressive aspects like education, sanitary habitats, women's development, cultural development, sports, ecology and the empowerment of discriminated sections like girls, women and persons with disabilities.

RDT, India

A team of nearly 2,400 people (99% locals) manages the organization's work across various sectors covering 3,589 villages, and almost three million people. RDT also has resource mobilization offices in Mumbai, Maharashtra and Vijayawada, Andhra Pradesh.

VFF, Spain

In 1996, the organization opened its first office in Spain named Fundacion Vicente Ferrer, to ensure stable funding and help sustain its projects in India.

VFF, USA

In 2015, in a bid to raise funds in new locations and help ensure the continuity of the projects in India, the organization opened its first US office in Washington.

Legal identity

Rural Development Trust (RDT) is registered under the Indian registration Act, 1908 and 12A of the Income tax Act. Donations to RDT are exempt under section 80G of Income Tax Act. RDT is registered under FCRA. For general use we use the name 'RDT'.



VISION

A caring just and environment-friendly society promoting social harmony and peaceful coexistence and balancing the needs of people and nature.



MISSION

To eradicate extreme poverty and human suffering.

To work towards implementing eco-efficient agriculture that ensures the sustainability of livelihoods and encourages a harmony between human beings and natural resources. To ensure that educated youth from poor families have diversified job opportunities fetching a decent salary and are accorded an improved status in society.

To ensure that persons with disabilities have access to equal opportunities and are the main actors in their efforts to lead a life of quality and dignity. To work towards the empowerment of women by helping improve their socio-economic status and sensitising both men and women to deal with such issues as gender discrimination and violence.

To be a value-based professional organization being dynamic and creative in nature, untiring in hard work and motivation, humanistic in approach, strong in its commitment to share the aspirations and struggles of the poor and permanent in time but flexible to adapt to the changing needs of people.

DHARMA



Concern for the poor and needy

Work beyond duty



Pursuit of excellence in work

Reaching as many poor as possible



APPROACH

The rural poor of low socio-economic status constitute our target group. This includes Dalits, Tribes, Backward Castes. Persons with disabilities, Persons with HIV/AIDS, and women and children. In case of ecology, RDT adopts a whole-village approach covering small and marginal farmers and landless agricultural labourers.

RDT considers people the main actors in the process of their own development. Community organization and gender constitutes the base of its work with people. Major emphasis is on strengthening Community based organizations (CBOs) so that they play a major role in identifying and dealing with social and developmental issues apart from mobilizing and accessing government resources and participating in and managing programmes of development and welfare initiated by the organization.



JOURNEY



1969

Father Vicente Ferrer and Sister Anne Ferrer founded Rural Development Trust



1970-75

Implemented Food-for-work programme with funding from CASA



1978

Started Community Organisation. Health and Land Development programmes



1982

Initiated Sponsorship programme with Action-Aid, Began Education and Cultural programmes



1982

Launched Women Sector



1985

Collaborated with Aid et Accion (AeA) sponsorship programme



1993

Constituted women's core team. Origin of CBR Institutions



1995

Launched Fundacion Vicente Ferrer (FVF) in Spain



2002

Inaugurated Sports Village and upgraded sports programmes



2010

Set up base in Srisailam region to work with Chenchu Tribes



2012

Launched resource mobilization centre in Mumbai and initiated hundies as a part of India for India



2015

Launched Washington office, USA. Started 3 new areas in Kurnool District



REACH

Anna Ferrer received the prestigious Jamnabal Bajaj award for the year 2015 from Jamnabal Bajaj Foundation in recognition of the work done by RDT for the welfare and development of women and children. This award was presented by Rajmohan Gandhi, veteran journalist and public administrator on 2nd December 2015. Rajmohan Gandhi is none other than the grandson of Mahatma Gandhi, Father of the nation and man of 20th century.

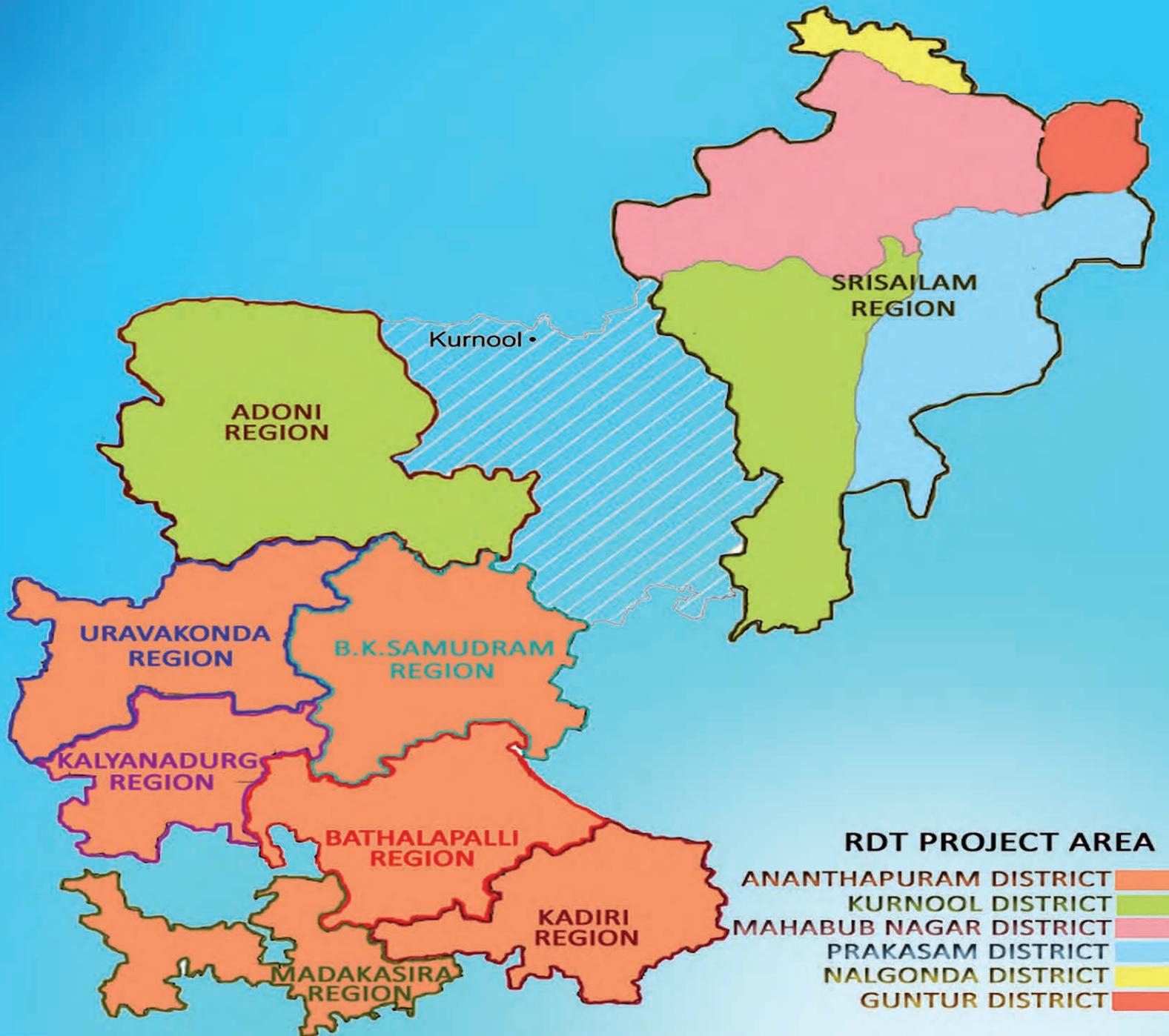
Ananthapuram is located in the Indian state of Andhra Pradesh. This district is one of the poorest in the country, receives the second lowest rainfall, and is a rain-shadow region. With Ananthapuram as headquarters, RDT's work extends to 3,589 villages in 8 districts of Andhra Pradesh and Telangana across 38 operational areas covering 8 regions, namely BK Samudram, Bathalapalli, Kadiri, Kalyandurg, Uravakonda, Madakasira, Adoni and Srisailam.



Andhra Pradesh & Telangana
8 regions
6 districts
3589 villages
111 mandals
6,61,186 families
26.70 million people
34,168 sq. kilometers

Districts covered by RDT

- Ananthapuram • Kurnool
- Prakasam • Guntur
- Mahaboob Nagar • Nalgonda



Bathalapalli
415 Villages
Kalyandurg
266 Villages
Srisailam
260 Villages
B.K.Samudram
429 Villages
Uravakonda
598 Villages
Kadiri
773 Villages
Madakasira
558 Villages
Adoni
290 Villages



EDUCATION

Education -something many of us take for granted -was beyond the dreams of most of Ananthapuram's rural poor. In many cases, parents were disinterested in education, particularly for girls. To them a child represented an extra pair of hands in the struggle for existence. Government schools enrolments were poor and attendance was sporadic when at all. RDT has worked to raise awareness about the

importance of education. The rural poor now understand that education is their inalienable right, and with committed support from the government and the communities, almost 99% of poor boys and girls from 3,589 villages in the project area are enrolled in primary school.

Accessible Education

In the 70s, the enrolment rate among boys and girls was less than 10% and 5% respectively. Thus, RDT started its supplementary schools-intended as centres where children could be primed about the benefits of education. Parents were encouraged to take interest in their child's progress and eventually, the reins of management of the schools were handed over to them through community Development Committees (CDCs).

Special education / Scholarship programme

In 2004, RDT set up a screening procedure to handpick the most deserving students impaired by poverty, and help them with their higher studies, enabling admission to good colleges and improving employability. Since 2009, RDT has instituted its own exam, the RDT-CET as a selection criterion.

Language and Communication Education

The professional School was established by RDT to train educated youth in English, computers, and either French, German or Spanish language. Over the course of one year, students are

exposed to other cultures and customs. The school opens avenues for employment with reputable MNCs and better remuneration.

A vehicle for girls education

To ensure that all girls completed their high school education, covering the distances to reach the high schools from their villages, bicycles were provided to them from 2007-08. So far, 14,257 girls received bicycles from RDT. As a result, completion of girls' high school education rose from 40% to 91% in the last 8 years.

HIGHLIGHTS

- * Quarterly workshops were organized for 23,252 members in CDCs.
- * The boys-girls ratio in primary and secondary schools is 1:1, a significant achievement in gender parity.
- * 99.6% of eligible children were enrolled in primary schools and 99.55% in secondary schools
- * Six persons who came through the special education program, are employed in prestigious companies and earning monthly salaries of not less than Rs.35,000.

- * 979 (506 & 473) students are pursuing higher or technical or professional education under special education / scholarship program. Another 923 (556 & 367) have completed such education. Another 329 (213 & 116) have secured jobs.
- * Under the 'India for India' program 583 (319 & 264) orphan students have been sponsored for their education.

- * Including 176 (80 & 96) new admissions, 228 (80 & 148) students are studying in Professional School of languages & communications. Another 118 (80 & 38) completed their courses and another 114 (78 & 36) secured jobs.

CASE STUDY

"I was born into a family of 9 children and my parents were landless labourers working for a daily wage of not more than 80 rupees. Even as I was growing up, my father passed away. Although tragedy struck, I had an ambition in my heart to become a government officer. I had a hat-trick of opportunities from RDT, first to study in government residential school, then in a corporate college and later, in an engineering college. Now I am a probationary officer in Canara bank. I wish to help my family and poor children like me in future."

M. nagaraju,
Pedda Mustur Village.

WOMEN

In 1982, RDT started a development programme for women to strengthen their role in society through education and awareness building. Initial women groups, now functioning as Self-Help Groups (SHGs) and popularly known as mahila sanghams, comprise of rural women as active participators and propagators of gender equality. Today there are 1,11,157 women in 8,187 SHGs across 1,675 villages.

Self Help Groups and Women's Networks

In 1982, sanghams were envisioned for sustained conversations among women regarding the importance of education, general hygiene, etc. they were later reorganised into SHGs. SHGs functioned as groups for socio-economic and gender development. Besides inculcating leadership abilities, self-empowerment and economic confidence, substantial savings have been mobilised, and today SHGs are on their way to becoming self-reliant and agents of social change. There are 1222 networks with 10,493 leaders moving in this direction.

Mini-banks and Women's Development Fund

SHGs provide greater access to finance for women and decrease their dependence on families and exploitative traditional money-lending sources. In 1992, via mini-banks' accounts and later, the Women Development Fund (WDF), monthly savings were pooled towards rotating loans for domestic requirements and income-generating activities. A total of 24,271 women have



Conditioned by years of subservience, women subscribed to the notion that being confined to their home was their only option. Girls' participation in schooling was less than that of boys. Women were also victim to superstitions and sexist practices such as child marriage, trafficking and quarantine during menstruation.

availed credit from WDF for a variety of entrepreneurial endeavours.

Vocational Training

Providing vocational training was needed to alleviate poverty and overcome the inherent exploitation of women worsened by poor literacy levels. In 1993 vocational training in tailoring, making incense-sticks and assorted handicrafts was started, providing for small-scale enterprise and supplemental income creation. RDT is also committed to work with female PWDs who

are doubly discriminated against. As of today, 8280 women have been trained in various vocational skills.

Curbing discrimination and Violence against women

Mitigating early marriage by discouraging parents to wed minor children was an early crusade. Since 2010, counseling centres and shelter homes have been established for women and girls in distress who are rejected by their husbands or abused. A total of 1216 Social Action Teams (SAT) members - men, women and PWDs are being trained to identify women facing violence and extending necessary support to solve their problems with counseling, medical aid and if needed, also legal action.

HIGHLIGHTS

- * 6 women's counseling centres are functioning at Dharmavaram, kalyandurg, BK Samudram, Uravakonda, Ganglapenta and Kokkanti cross. These centres have counselled 1938 women on various social issues.
- * The anti-violence team staff strength has increased to 31 members.
- * 97 early marriages were stopped and 685 calls were received by childline for action on various child issues .
- * Awareness and capacity building trainings were given to 22, 151 women and 8172 men.
- * Women to women sponsorship for IGP (Spain & USA) was provided to 20,241 women in 459 villages with an amount of Rs. 2,92,24,278.

CASE STUDY

"we used to suffer whenever we were approaching higher caste people for a small cup of milk for our small kids. They used to tell us that their calves will die just because of giving a little milk to our tiny tots. This hurt us a lot. There was no milche cattle in our colony and such dependence gave advantage to them and pain to us. We wondered whether milk knew caste and whether it makes a difference to its taste if we drink it. Anyhow, we put these bitter experiences behind us. RDT and our mahila sangham gave me 3 milche cattle. I am selling milk and earning Rs. 9,000 every month. Higher caste women also buy milk from me. They have no complaints now and nor do I. We are both doing it with a smile."

Swarnalatha, Maruvapalli Village.



and opportunities in all areas of development, including access to special education, rehabilitative aids and treatment, liquidity-bank accounts of their own, owned housing and self-sustained sources of income.

Facilitating SHGs and Federation of PWDs

RDT supported the setting up of self-help Groups spanning different castes and communities to promote unity and understanding among PWDs. These groups meet periodically to discuss social and financial issues, legal rights, and mobilize resources, services and opportunities for the PWDs. SHGs also work towards building homes for abandoned PWDs, running mini-bank savings schemes and Income Generation Programmes (IGPs) to fund livelihood options.

Providing access to special Education

RDT works with children with visual impairment (VI), speech and hearing impairment and loco-motor impairment, children with intellectual disability (ID), cerebral palsy (CP). It also collaborates with government schools for further outreach. RDT also offers additional training on specific topics such as Braille, sign language or speech therapy and conducts awareness programmes for families and teachers. All PWD schools teachers are specialized professionals.

Access to rehabilitation

Medical rehabilitation is one of the strongest ways of equipping persons with disability with appliances or medical support, allowing them to lead independent, auto-

nous lives. In certain cases, where corrective treatment is an option, medical surgeries are availed. In others, use of suitable devices like hearing aids, calipers, crutches, orthopaedic support etc. is provided.

RDT actively supports government immunization program in the primary health centres and particularly in its own hospitals. RDT also conducts cultural, art and quiz festivals and organizes sports training that have led to its athletes winning in the Special Olympics.

Life - skills enhancement Programme

There are 7 women's handicraft centres operating for the last 13 years, in which numerous women and adolescent girls with disabilities have received training in job-skills such as tailoring, incense-stick and jewellery - making. They now merit respect, recognition and acceptance. RDT also offers pregnancy counseling for women with disabilities.

HIGHLIGHTS

- * As of March 2016, RDT is working with 27,723 PWDs, from 2631 SHGs.
- * 2784 PWDs have accessed loans to the amount of Rs. 58,09,291.
- * 2631 children are pursuing primary and secondary education. Another 772 are in higher education and another 252 in professional and technical education.
- * Awareness and capacity building trainings were given to 18,798 PWDs.
- * 1131 therapeutic and 2038 surgical interventions were done and 56,234

PWDs received appliances.

- * 455 PWDs are engaged in handicrafts and 222 PWDs are in home - based production (Total =677)
- * 58 Mandal federations work on government resource mobilization, protection of rights and violence / discrimination against PWDs.

CASE STUDY

Lakshmidevi
from Kadarakunta

village was struck by polio in both legs when she was 3 years old. Her parents enrolled her in the school when she completed 5 years. Unable to walk, she used to go crawling to school on a rough road. Her arms and knees had frequent injuries and her clothes used to get torn. Many children made fun of her. In 1992, her parents joined the sangham for PWDs. She went to RDT ortho workshop and was able to walk with calipers and crutches. Later, she also had surgery to both her legs. Meanwhile, she completed her primary education. She received from RDT a tricycle. With it, she did her high school education. After her intermediate, she learnt embroidery at BK Samudram. Now she is doing embroidery work in her village. She gets raw material from BK Samudram and gives the finished work back. She also got a bank loan of Rs. 40,000 and is also doing saree business. With her earnings so far, she managed to buy 40 grams of gold." In my school days, I faced so much humiliation. But the sangham gave me confidence and courage to develop myself. Today I am supporting my family also and earning everyone's respect," says.

Lakshmidevi.

In the semi-arid districts of Kurnool, Prakasam and Mahaboob Nagar in general and, Ananthapuram District in particular, low sporadic rainfall meant that the risk of drought was inevitable. Ananthapuram District is distinctly the second driest in India and on the brink of desertification. In an area in which agriculture is the main source of subsistence, factors such as soil erosion, poor moisture conservation, mono-cropping, the over-dependence on traditional rain-fed agriculture practices, and excess use of fertilizers and pesticides, led to farmland becoming unproductive. RDT's ecology sector works to transform the project area from an arid, unyielding landscape into one of plenty of green cover --> grasslands, crops and forests.

Water Harvesting

RDT has built or maintained tanks, bunds and percolation tanks. It also builds new dams, and pickup anicut channels to ensure reliable storage and redistribution of water for irrigation.

Land Development Activities

RDT initiated various measures of land development using both manual and mechanical power with a view to bringing additional land belonging to the rural poor under cultivation

and thereby, increasing land value and productivity.

Promotion of Micro-Irrigation Systems

With the depletion of ground water resources and irregular rains, the need was felt for less intensive and optimized water usage. RDT's efforts were known by the banner of 'Sustainable Diversified Horticulture.' Through Drip and Solar Irrigation, bore-wells were dug to move from purely rain-fed, open-well-based irrigation to micro-irrigation.

Diversification of crops and Horticulture

Farmers were made aware of alternative and mixed cropping in place of traditional water-thirsty mono-cropping, and its optimizing effect on the water resources. they were introduced to the big potential of horticulture, finding a fine balance between food crops and commercial crops with reasonably manageable crop investments.

Promotion of livestock

Improved means of land management, irrigation and agriculture have opened up avenues of alternate incomes from livestock, thereby lessening people's sole dependence on agriculture and hedging against possible crop failures and fluctuating market of agricultural products.

Aforestation

RDT and the villagers partnered in an afforestation drive and 1467 hectares of barren hillocks have been covered and social forestry has

been applied to 241.7 hectares of land. 150 hectares were developed as fodder plots. 28,515 kgs of hamata seed was distributed under farm forestry.

Organic Farming

Excessive chemicalization of agriculture is causing health hazards. Therefore, RDT is encouraging farmers to try out organic farming through natural fertilizers like vermicompost and 269 farmers have positively responded.

Alternative Energy

Ananthapuram required a boost of electricity for irrigation of crops. Addressing this concern, RDT introduced solar-powered pump sets, and drip irrigation systems. RDT also promoted the usage of bio-gas units and smokeless stoves.

HIGHLIGHTS

- * 773 water bodies received 34,104 TCUM water through rain and canal in the district. Around these water bodies there is plenty of water and farmers are raising 2 to 3 crops an year.
- * 3110 rain water harvesting structures were constructed.
- * Horticulture was promoted further by planting 3,42,363 fruit plants in 2015-16 in addition to 81,00,746 planted earlier making it a total of 84,43,109.
- * 2775.25 hectares covering 2432 farmers was brought under micro irrigation systems (drip:2540.76. sprinkler :234.49)

* In addition to 405 solar systems already installed, 43 more were installed this year in 173.33 hectares of 51 farmers making it a total of 448 systems in 1978.09 hectares of 1059 farmers.

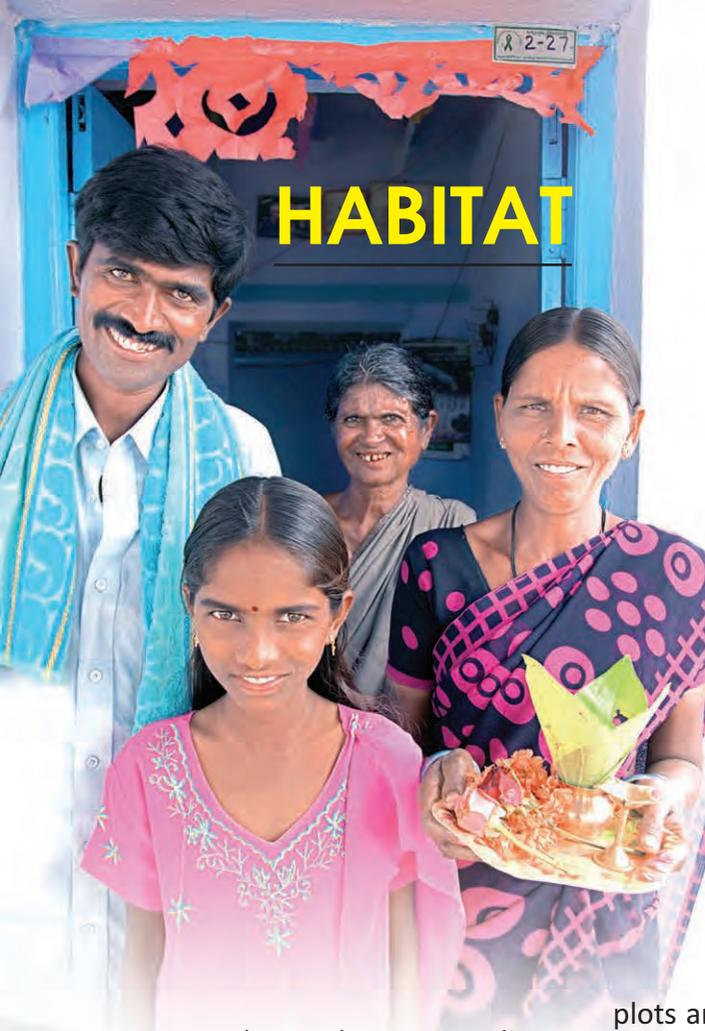
* 104 bio-gas units and 6484 mobile smokeless stoves were set up.

* Sustainable livelihood programme was extended by promoting 847 improved varieties of milche-cattle this year in addition to 6323 upto now (Total :7170).

CASE STUDY

" Fifteen years ago, my husband and I had 9 acres of land. Like all farmers of Ananthapuram District, we used to grow groundnut, sunflower in rain-fed condition and, dreaming to make our dry land into wetland, we borrowed 2 lakhs of rupees. With the bore well, the crop investment went up and to make it worse, my husband fell seriously ill and died. I leased out our entire land to repay our debts and went away to Settur, my native village. After a few years, I came back to my husband's village. Determined to do my own cultivation, I made the same mistake of irrigated groundnut cropping. RDT then convinced me that horticulture under drip irrigation is a great option and that Banana had good market. Many discouraged me saying that it is too much of a risk for a single woman like me. Just in 2 acres of land, I produced 46 tonnes of banana and buyers came to my field and bought it for Rs. 3,68,000. I am confident that my children and I will live well from now on"

V.Gangamma, Virupapalli



HABITAT

houses with proper ventilation, drainage facilities, electricity connection and easy access to water. Apart from houses, RDT also provides the rural poor, access to school-cum-community halls, additional classrooms in government schools, hostels, libraries, hospitals, rural clinics, vocational training centres and residential schools. As an additional mandate, the sector also conducts rehabilitation programme after natural emergencies when feasible.

Housing Programme

The Habitat sector builds structurally sound dwelling units with provisions for electrification and drainage connectivity. It involves the community and the beneficiary to make them stakeholders in their own development. By campaigning for women's ownership of plots and homes, RDT's housing work is also a powerful component of its women's empowerment initiatives.

Building community and education infrastructure

The habitat sector works towards inclusive growth in villages by constructing supplementary school buildings cum community centres, or by improving existing government school buildings. It constructs additional classrooms, libraries, laboratories and toilet blocks (especially for girls) and provides drinking water and

laying out the school grounds for sports.

Rural Infrastructure Programme

Initiatives like water supply and purification, building bore-wells, reservoirs and RO plants, ties into the objectives of the ecology sector. Similarly, solar power supply and lamps for Chenchus tie into the work being done in Srisailam region. Besides, the sector has also built roads, causeways and bridges in areas where access was difficult, and the people were in dire need of connectivity.

RDT Infrastructure Programme

RDT's habitat sector also builds and improves infrastructure for other RDT sectors. The sector has built health clinics, hospitals, orphanages, residential schools, orthopaedic workshops for PWDs, sports infrastructure like hockey, cricket and football grounds, a 6 court tennis academy, dormitories, vocational centres and a shelter home for women. Last but not the least, is its work

for RDT's own staff and premises, housing, auditoriums and halls, canteens, and dining halls.

HIGHLIGHTS

" 4821 houses were built for villagers, 82 for PWDs, 400 in collaboration with government, making it a total of 5303.

" 63 school buildings cum community centres were built.

" 6116 bathrooms-cum toilets were built in collaboration with government as part of Swachh Bharat Mission.

" 42 additional rooms were constructed in 16 government educational institutions.

" Rural electrification was done in 5 villages.

" Drinking water schemes were done in 4 villages (2 cisterns/sumps & 2 water purification plants) and 1 rural community library was built.

CASE STUDY

Chirumanudoddi is a remote village in Kurnool district. As part of Swachh Bharat Mission, government invited RDT to construct sanitary bathrooms-cum-latrines in this village. In coordination with government officers and village panchayat, RDT constructed 144 bathrooms for SC, BC and minority families. Lakshmi, Chalapathi and Chinna Anjinaiah are among those who participated in and benefited from these constructions. They say, "we used to go out for defecation early in the mornings, or late in the evenings. Light being poor at that time, we were sometimes bitten by snakes and scorpions. In rainy season, children and old people could not go far enough. This resulted in the surroundings being polluted and we were falling sick often due to food and water contamination. Now women, children and old people or for that matter, everyone is using bathroom-cum-latrines at our homes. We are able to keep also our streets and colony clean." RDT's collaboration with the government in this program has enabled closer relationship between people and the government. That will help in mobilizing many more government resources.

The rural poor in India are comprised mostly of marginalized communities such as dalits, scheduled tribes, backward communities and PWDs. Social and cultural taboos have alienated them from the wave of development that the country is riding. A pucca house, i.e. brick and mortar house - as opposed to a mud and thatched grass hut- represents permanence, and accords the owner a higher degree of respectability.

RDT started by constructing

HEALTH



In the early 1970s, health care facilities in Ananthapuram region were almost inadequate, unaffordable and most of all, inaccessible. Illiteracy and local custom further added to the

problem especially on the reproductive health and hygiene front. Homes which were mostly huts did not have facilities and water was scarce. Malnourishment, undernourishment, high Mother and Infant Mortality rates, gross anaemia and diarrhoea were the prevailing health issues of the time. Now RDT

has extended its work also to Kurnool, Prakasam, Mahaboob Nagar, Nalgonda and Guntur Districts.

Community Health Workers

Given the poor accessibility of health care, RDT started training young village women (CHWs) to make them capable of extending health support, identifying complex cases for escalation and onward referral of such cases. They treat minor ailments, diarrhoea, identify cases of malnutrition, conduct ante-natal checkups and even conduct aseptic deliveries besides identifying pregnancy risks. Wherever people's capacity to access government health care increased, the number of CHWs reduced.

Capacity Building through Awareness

RDT works extensively in building awareness for Adolescent Girls' health care through counseling centres and workshops in order to reverse the trend of anaemia. Pregnancy care is also an area of focus. Future mothers are given information about baby hygiene, diet, care and the importance of breastfeeding in their first six months. People are also given information about general and communicable diseases such as HIV/AIDS and TB.

Nutrition

Nutrition is one of the key determinants of good health. RDT operates nutrition centres that provide foods such as eggs, ragi and jaggery - based beverages to impoverished villagers. The programme covers children in the age group of 0 to 4 years, ante-natal and post-natal mothers, senior citizens without any family support, and children or adults suffering from chronic health problems such as tuberculosis.

Providing Health Care Access through Rural and Mobile Clinics

Rural health clinics and mobile clinics were started to provide quality treatment to the most remote villages, and to spread awareness on health and hygiene, safe deliveries, child care and nutrition support. There are 4 health clinics run by doctors with the help of Auxiliary Nurse Midwives (ANMs). The School Health Programme helps in early detection of health problems in school children.

Conducting Referrals and Follow-up

The reach and capability of CHWs and the Rural and Mobile Health Clinics have come a long way, but with limitations. That is where RDT's own hospitals and referral system come in for advanced treatments and recovery. RDT also provides financial assistance in referral cases so that affordability need not come in the way of timely quality health care.

HIGHLIGHTS

* 905 community health workers (CHWs) are spread across 879 villages.

* Nutrition has been provided to 41,152 persons (17,707 Male & 23,445 Female).

* 4762 awareness workshops were organized during 2015-16 which were attended by 1,52,670 members.

* 1434 training workshops were organized exclusively for adolescent girls with 51,528 participants.

* 3458 aseptic & institutional deliveries were conducted (in government & private health centres) including 778 risk pregnancies which were identified and referred by RDT health organizers.

* 8353 chronic/acute cases were referred and treated.

* 39,610 cases (16,794 Male & 22,816 Female) were treated in 4 Rural Clinics (2 mobile, 2 stationary) of RDT.

* 580 HIV infected/affected persons (230 children & 350 widows) were supported through medical/ educational/ economic/ community home care/ nutrition support.

* 19 cases of tuberculosis were screened/ diagnosed and treated under RNTCP (Revised National Tuberculosis Control Program).

CASE STUDY

"My husband Nagendra worked as a Jeep driver for a private owner. My daughter Niharika was 3 years old when she suddenly developed pain in her left leg. We took her to an orthopaedic hospital in Ananthapuram. Two surgeries were done on her leg, but to no avail. Instead, her situation became worse. By now we already spent Rs. 1lakh. They advised us to go to Kurnool Government hospital. They told us she had bone cancer. Then our neighbours advised us to go to RDT. RDT referred us to Sparsh hospital, Bengaluru. There the doctors detected and diagnosed her problem as tuberculosis of the bone. Having diagnosed the exact problem, they did the right surgery this time. RDT spent Rs. 2,50,000 for our daughter. Because of RDT's timely intervention, our daughter is still alive. Now Niharika is 5 years old. She is healthy and going to school. Thanks to RDT's referral system, many parents like us can save our children's lives."

Nagasudha, Kuntimaddi Village



HOSPITALS

70% of the population lives in India's rural areas but more than 70% of quality medical facilities and professionals are in the cities. Over 40 years RDT has tried to build up and improve its medical services in the rural areas.

People in villages live on their daily wages and if they have to leave the vil-

lage and travel when they are sick, they will lose many days wage. Therefore, efficient good quality health and medical services for rural people is absolutely essential.

For the last 20 years RDT has built up 3 rural based general hospitals with the following basic and important departments:

- * Medicine
 - * General Surgery
 - * Obstetrics & Gynaecology
 - * Traumatology
 - * Pediatrics
 - * Anesthesia
 - * Emergency
 - * Intensive care for adults, children & neonates
 - * Pain & Palliative care
- RDT hospitals also have essential supporting departments such as Blood bank, Radiology, Laboratory, Microbiology and Physiotherapy.

RDT has also built up a specialized hospital for HIV/AIDS patients where the patients and their families come from far and wide to reach this hospital.

This hospital carries out all essential testing for HIV positive persons including CD4 count and Viral load. It is also a hospital for infectious diseases and specializes in the care of Tuberculosis patients. There is extensive collaboration with the Government in this area of work. And RDT runs an ART unit of the Government in this hospital. It also has Government permission to prescribe and treat patients with 2nd line treatment. All treatment (ART drugs)

is free from Government.

RDT Bathalapalli hospital has government approval to run post graduation courses in Surgery, Gynaecology and Obstetrics under the Diploma of National Board. RDT hospitals conduct many conferences to continue medical education in the different specialties attended by specialists from all over the country.

HIGHLIGHTS

* There are 3 rural hospitals and 7 rural clinics attached to rural hospitals.

* There were 50,750 inpatient visits and 8,47,437 outpatient visits in our hospitals and clinics.

* 1,20,756 general surgeries, 99,180 family planning surgeries, 777 Orthopaedic surgeries and 279 urology surgeries were done in our hospitals.

* There were 1,14,236 institutional deliveries.

* 1682 persons with HIV/AIDS received anti-retroviral therapy (ART) in our hospitals.

* 1186 patients were referred to higher medical institutions.

* There were 2666 users of neo-natal intensive care unit (NICU) and 2873 users of neo-natal mothers ward.

* In the cancer detection program, 2247 persons were screened, 429 persons were detected and 409 persons were provided support for treatment and follow-up.

* 9887 child inpatients and 1,97,551 child outpatients received our paediatric care services.

CASE STUDY

Manjunatha is a 3 years old boy who came to RDT hospital, Kalyandurg with fever, cough and rapid breathing. His case was evaluated and initially diagnosed as pneumonia. He was admitted to the paediatric ward and started on antibiotics and supportive therapy. But as his symptoms and signs were worsening, he was re-evaluated and found to be having Empyoma on the right side. Ultra-sound chest confirmed it. Pus was taken out from his chest and sent for analysis. Subsequently, antibiotics were changed and the child gradually improved. After 7 days, a second ultra-sound chest was done and showed that the pus was minimal. The treatment continued. By the 15th day his chest drain tube was removed and he was free from the symptoms. After 19 days, he was discharged on stable condition. Dr. Balasubbaiah says, "The availability of bedside ultra-sound facility and the training in it, gave the advantage to manage the child improvement. If the child's condition worsened, we would have been forced to go for surgical drainage. Thankfully, that was not required." Lingamaiah and Maruthamma, Manjunatha's parents are agricultural labourers from Adavi Gollapalli village. They breathed a sigh of relief that their child was saved from this serious disease.

SPORTS



Sports has been RDT's focus area right from 1978 as part of its work in education. Sports were given equal importance because these activities gave self-confidence, fostered a sense of inclusion and inculcated leadership qualities that ultimately led to positive personality formation.

The goal is to instill a sports culture at the grass-root level by recognizing and utilizing sports as an important and sustainable tool for the holistic development and social integration of all underprivileged and marginalized youth in rural India.

Grass-roots Program

Sports culture at the grass-roots level means that rural schools are provided with quality sports equipment and basic sports infrastructure so that all boys and girls have the opportunity to participate in

sporting activities. Besides this, RDT is running 12 cricket coaching sub-centres and 2 hockey coaching centres in Ananthapuram district.

Middle-level Development Centres

Better infrastructure and systematic coaching with computer classes and nutritional supplements are provided in Bathalapalli and Atmakur. Football, Kabaddi and Kho-kho are the sports promoted.

Ananthapuram Sports Village (ASV), The centre of excellence

Started in 2000, Ananthapuram sports village (ASV) gradually developed into a centre of excellence. Four residential academies are running in hockey, cricket, football and Judo. Along with coaching, the students are undergoing formal education. Rafa Nadal Foundation launched an educational and tennis school in 2010, to give equal opportunity to disadvantaged children from the suburbs and villages around Ananthapuram to have enjoyable childhood and education through Tennis, English and computer classes. Softball also is having its daily coaching centre. ASV is open to all children and youth to be coached in all the six sports.

CASE STUDY

From his childhood, Shaik Moulali's parents always told him that he should become an engineer, but he had other ideas. He wanted to become a footballer. At the primary level, his education went through many ups and downs due to constant changes of schools and he thought that he may have to give up the sport that he loved so much. Then came his selection to RDT football academy. His coaches say that he is one of the best footballers of the academy. In the academy, he completed his secondary education and under-graduation. His teachers told the academy director that he also studied well and to top it all, that he behaved very well. He played for Fateh Hyderabad football club and second division I-league. His coach Miquel Llado says, "Moulali has an understanding of complex and modern footballing concepts and amazing temperament. His balance of education and sport has been the secret of his development I am thinking of appointing him as the mentor of the U-12 academy football team." Moulali is a student of civil engineering now and needless to say, his parents are not only not complaining, but they are delighted.

Special Olympic Program

RDT started organizing groups of PWDs in 1993. Through its special schools, PWDs receive assistance and help with daily living skills, communication and social skills, apart from regular classroom learning. Since 2011, RDT's special athletes have won medals for India in Special Olympics at Athens (2011), South Korea (2013), New Castle (2013), Barcelona (2013) and Los Angeles (2015) and made us all proud. A dedicated and excellent Special Olympic coaching program is run by CBR sector at Bathalapalli.

HIGHLIGHTS

- * 433 students (134 residential & 299 day scholars) are undergoing coaching in Ananthapuram Sport Village.
- * In the various coaching centres in the district, 888 students are participating in various sports.
- * 13 special athletes participated in Los Angeles World Summer Games in July -August 2015 and 11 of them won 17 medals for India and after that, 34 special athletes are taking coaching for the Austria winter games (2017).
- * 372 girls participated in the central level rural athletics meet and 2976 girls participated in the area level meets in 31 areas.
- * Judo academy with the recognition of Judo Federation of India (JFI) was inaugurated on 31st May 2015, with 13 girls and 12 boys.

* 4 softball players from the district represented India Junior team in the Asian Championship at Singapore where India finished 3rd.

* Juan Manuel, a Spanish marathon runner, ran an ultra-marathon of 125 kms from Muddinayanapalli to Bathalapalli on 1st & 2nd February 2016 for the cause of child sponsorship.



When RDT began its interactions in Ananthapuram, they found settlements whose inhabitants expressed themselves richly, and every event was marked with song and dance. However, with caste lines being what they were in those days, all these performances were held only in their own settlements. The hope of RDT's Culture sector is to set children and youth off on a path of confident self-expression. Performance is promoted as a tool for personal development and social uplift.

Special Cultural Schools

For ensuring primary level cultural education, schools from each area are selected and full-fledged cultural skills are imparted throughout the academic year at their local supplementary school. From music, dance to drama, magic and mimicry, the students have gone beyond village festivity performances to such platforms as national festivals and, internal as well as prestigious outside

competitions.

Cultural Training for PWDs

As part of its extensive work on the community based rehabilitation sector, RDT has cultural organizers to train the children throughout the year at all of its various special education centres. The high point in the cultural calendar is the biennial Srujana Festival. Orchestra and mimicry by visually-impaired children, group

CASE STUDY

Somasekhar was born in a poor dalit family in Buchaiahgaripalli village in Ananthapuram district. As a high school student and later during his under-graduation, he was a talented 'dappu' (a local percussion instrument) player. RDT recognized his talent and sent him to learn tabla in Hindustani music college at Gadag in Karnataka. It is an ashram college in the ancient 'Gurukula' tradition of India. He followed the college discipline impeccably. He was so studious that he completed 6 years tabla diploma course in just 3 years. He joined his 'guru' Mr. Vithal in concerts. Within a short period of time, he attained fame and at the age of 23, he was already felicitated by Gedda Basaveswara Samithi in Karnataka and was given a title, 'Tabla Chathura'. His parents Narasimhudu and Sanjamma say, "we were worried about his education at one time. But now we are proud of him." Somasekhar is now doing his degree in tabla.

rhyme recitations by intellectually disabled, mine and magic by hearing impaired children form the key highlights.

Higher Cultural Education

Children who are extremely talented and interested to become professional performing artistes are selected to go to colleges and universities of music & dance. So far, 18 have completed such education and became professional artistes. 15 students are pursuing diploma or degree in music or dance at present.

Sensitization Through Cultural Campaigns

The sector spreads awareness about social issues via its activities. Lyrics, music, dialogues and drama forms encapsulating issues such as violence against women, ecological preservation, untouchability and migration of labour are crafted by RDT's staff and trained rural youth and performed in the villages. 715 performances were performed this

year to bring about change and development in the communities.

Other initiatives

The following are a few other initiatives taken up by the cultural sector:

- * Children's coaching camps in vacations.
- * Magic training.
- * Clowns training.
- * Make-up training.
- * Dance & Vocal Music training.
- * Instrumentalists training.
- * Ram Lakhans drums training.
- * Digital media capture of performances.

HIGHLIGHTS

- * 6281 children were trained in various cultural aspects (2151 in camps & trainings and 4130 in special cultural schools).
- * 5403 children took part in various cultural events/performances (900 for visitors, 100 in public functions, 86 in RDT festivals, 3215 in villages and 1102 in the Vikasam Cultural Festival).
- * So far, 33 were enrolled in colleges of music & dance. 18 have completed the course and 15 are continuing. 18 are earning their livelihood through music or dance.
- * 195 youth were trained in Ram Lakhans drums this year and 1976 youth in 152 villages are earning livelihood through Ram Lakhans drums.
- * 'Valasa Pakshulu', a feature film on migration was produced and released to be projected in the villages.
- * The second batch of 8 rural women completed make-up training in 2015-16.
- * 11 cultural staff were trained in Kuchipudi dance, 14 in modern theatre and 20 in musical instruments.



The Chenchus are a designated scheduled tribe in the Indian states of Andhra Pradesh, Telangana, Karnataka and Odisha. They are classified as one of the primitive tribal groups that are still dependent on forests and do not cultivate land but hunt for a living. Many live in the dense Nallamala forest region around Srisailem in Kurnool, Prakasam, Guntur districts of Andhra Pradesh and, Mahaboob Nagar and Nalgonda districts in Telangana.

RDT has been working with this community since 2010 through family visits and formation of Community Based Organisations (CBOs). Owing to their dire poverty and backwardness in all social indicators of progress, RDT has initiated the following programmes in all these areas with the community.

CHENCHUS

Government

Resource Mobilization

RDT workers help villagers gain awareness about various government programmes, schemes and acts such as Recognition of Forest Rights Act (RoFR Act), housing schemes and I.D. documents. Delivery is carried out through

CASE STUDY

130 Chenchu families are living in Palutla Chenchugudem in Prakasam district. They used to live by collecting and selling forest products like honey, gum and roots by barter system and fetch rice, dhal and salt for themselves. The government distributed agricultural lands to them. Each one got 2 to 5 acres. But as they did not know cultivation, they used to lease these lands to the sugalis and be content with whatever amount they got from the sugalis. RDT got all the Chenchus' lands to be re-surveyed and approached the government agricultural officers to train the Chenchus in everything about cultivation. 30 families came forward to cultivate. RDT provided these 30 families with agricultural implements, bullocks and oil engines. Now these 30 families are cultivating 120 acres of land. They also approached the government agricultural officers and learnt about seeds, fertilizers and pesticides and have become real farmers. They say, "we were just hunters and collectors of forest products. Now, we have become farmers who are well known to the agricultural scientists. We are educating our children now. We wish that other Chenchu families also come forward and have a better life like us."

workshops to ensure they access their rights and are equal recipients of developmental schemes.

Health Program

RDT has facilitated CBOs to run 226 nutrition centres, train Chenchu women to serve at the grassroots level as CHWs. 2 mobile clinics are also stationed in the districts. Any ailments beyond the purview of these families are escalated via RDT's referral service network.

Ecology Program

RDT has been educating tribals about their rights and training them in agriculture. This includes mobilizing arable land and demonstrating the means for optimal cropping and irrigation.

Housing program

With the mobilization of land, RDT helps villagers with sanitary permanent homes enabling them to move out of their hutments.

Livelihood Program for women

Leadership workshops, a women's development fund and vocational skills trainings help Chenchu women become active stakeholders in the development of their families and communities.

Education Program

As with the rest of education sector, RDT has established enrolment drives, coaching camps, CDCs, savings grants and scholarships. Quizzes, art classes and special education initiatives are also being held for Chenchu children.

Cultural Program

Over 400 children receive arts and cultural trainings, and 100 young Chenchus are co-performing cultural performances with RDT. The Ram Lakhn Drums Program has been especially successful in polishing their innate talent at percussion and opening a viable income avenue to over 120 youth.

HIGHLIGHTS

- * 8907 persons participated in 283 leadership trainings, and 2032 adolescent girls participated in special workshops.
- * 209 CHWs are working in 205 villages.
- * 2 mobile rural health clinics are functioning.
- * Nutrition was provided to 4066 children (2028 boys & 2038 girls), 1448 ante-natal and post-natal mothers, 1062 senior citizens (454 male & 608 Female) and 590 chronic cases (311 Male & 279 Female), totally 7166 persons.
- * 813 ante-natal mothers were registered and were regular to the health check-ups. 220 aseptic and institutional deliveries were conducted (in government & private health centres), including 77 risk pregnancies identified and referred.
- * 6324 (2922 boys & 3402 girls) children were examined in mobile school health clinics and 2671 (1231 boys & 1440 girls) were treated. Out of them, 790 chronic/acute cases were treated and followed-up.
- * 279 persons (147 Male & 132 Female) were referred to higher medical institutions.



decides on the kind of community development activity it should be used for. Building of compound walls for schools, family bathroom-cum-toilets or buying house sites for needy families are some of the activities. Thus every year a useful work of the community is done by the community and for the community.

Land Development

Although many dalit and tribal farmers received lands with pattas from the government, some of those lands were not cultivated for many years as they were filled with boulders and bushes. Then RDT came to the rescue of these farmers by engaging proclainers to clear those boulders and bushes and finally, acres of lands which were barren, became cultivable and productive.

Support to families in distress

There are families in distress for various reasons such as sudden death or serious illness of the breadwinner. Women deserted by husbands are left alone to take care of their children. Their daily wages will not suffice even for their subsistence and, health and education needs cannot be met. Such families are provided with monthly provisions. Orphan children are admitted in good schools and RDT pays for their education. These assistances are given as long as they remain in such distress.

CASE STUDY

There are 26 families in Peddavaduguru village owning 52.63 acres of black soil lands. Each family has just about 2 acres of land. As the lands were having boulders and bushes, they kept them barren for the last 10 years. They approached RDT for help in 2015 and RDT immediately responded. Within a week in July, 40,800 square feet of boulders and bushes were removed by proclainers and 16.48 acres of additional land was brought under cultivation. A little more land will help in a little more crop which means a little more food to feed their stomachs.

"I am B.N. Vijaykumar from R.Ananthapuram vil-

Skills training for livelihood

Lands are fragmented with increasing population and the younger sons and daughters who did not manage to have any employable education, are stranded without any employment. Such young people are given financial assistance for learning skills such as driving, tailoring and computers. Apart from the above, drinking water schemes are executed in some needy villages (which cannot be reached by the government) with drilling of bore-wells, building of cisterns and, setting up water purification units. Similarly, some rural high schools are helped with ground leveling for making playgrounds.

HIGHLIGHTS

- * 65,341 families in 984 villages are having Rs.130,72,03,280 as Gram Swarajya Nidhi for the last 10 years.
- * 4692 poor farmers had land development work in their fields and, 1773.57 acres of additional land was brought under cultivation this year.
- * 3365 families were given support during conditions of distress.
- * 141 youth were assisted for training in skills such as driving, computers and tailoring this year.
- * 40 drinking water bore-wells were dug, 01 cistern was built and 18 water purification units were set up in 2015-16.
- * 10 rural high schools were helped with ground leveling works to make playgrounds in 2015-16.

AREA DEVELOPMENT

RDT always followed Vicente Ferrer's philosophy that if people have any pressing problem or need, we need to respond to it in a timely and appropriate manner. For this, if necessary, we have to go beyond our structured plans and programs. In response to the needs of specific families or villages or areas, RDT has been implementing activities beyond the purview of its sectors. They have come to be known as Area Development activities.

Gram Swarajya Nidhi/Small Republics

In line with RDT's mission of creating self-supporting communities, Father Ferrer envisioned poor communities having their own assets (lands, buildings, funds). Thus Gram Swarajya Nidhi or Small Republic was born from his mind and heart. A community gets an amount according to the number of families as a fixed deposit in the bank. The interest earned annually on that deposit is withdrawn and the community deliberates and

lage. After I completed my high school education, I joined in a junior college 30 kilometres away from my village. But I failed in my 1st year intermediate examination. I was disappointed and dropped out from the college. I started assisting my parents in their agricultural labour work. Then I came to know about the possibility of learning driving with RDT's assistance. I joined in a driving school at Hindupur in 2011. Within 45 days, I completed the course successfully and obtained driving license. I joined as a tractor driver for a farmer called Ramanjaneyulu. He paid me Rs 4500 per month. Later, I got an opportunity to work as RDT driver. I am getting a monthly salary of Rs 6000 now. Without this skill, I would have remained an agricultural labourer."

The Human Resource Development team at RDT creates, coordinates and oversees capacity building trainings for members and leaders of community based organizations (CBO) on one side and various staff on the other side. Large-scale interactive programs for members and leaders of CBOs focusing on mobilization of government resources have lion's share of people's trainings this year. Overall, 1821 people were trained in 13 trainings. Staff trainings include basic trainings, value trainings and development

MONITORING & EVALUATION

Monitoring & Evaluation is one of the support departments that works in liaison with all the sectors including Finance, Projects, IT and Communications. Its overall goal is to provide easy access to quality information needed for publicity, communication, fundraising and, evaluation of projects and programs.

Major accomplishments of Monitoring & Evaluation

- * Compilation of village/Mandal



In India, the fundraising team based at Ananthapuram and Vijayawada mobilizes resources from individuals, public and private organizations. Additionally RDT also has a resource mobilization centre in Mumbai. Some of its programs that tie-in-directly with State Government initiatives are government funded. Recently, an office of Vincent Ferrer Foundation (VFF) was opened in Washington in USA.

Following are a few key RDT initiatives

mation from sectors for annual reports/ brochures and Father's exhibition hall.

- * Collating Mandal data in existing and new Mandals (totally 111 Mandals) covered under RDT program interventions.

- * Conducted a sample study on the utility of bicycles in girls' education.

- * Conducted a sample study on the utilization of women's development fund (WDF) and its impact on socio-economic conditions of rural women.

- * Developed integrated family survey format for baseline purpose.

RESOURCE MOBILIZATION

RDT's primary source of funds is its own sister organization, Fundacion Vicente Ferrer (FVF), in Spain.

- * The existing successful seva hundi movement as part of 'India for India' initiatives were replicated across towns & cities both within and outside RDT's project area. More than 2429 urban citizens have adopted seva hundi to help people who need support.

- * 495 individuals are sending in their contributions online on a regular basis.

- * New corporate companies and trusts or PSUs have committed support to specific projects or programs.

- * Over 5000 people are connected to RDT's online social networks.

- * Various awareness programs have been held at schools and colleges with an objective to connect future citizens with the challenges of rural people and making them aware of RDT's work towards equitable resource distribution and development.

" RDT received in Mumbai the popular UBM-CSR & NGO award for its extraordinary contribution to the uplift of people with disability.



orientations. 15 such trainings were conducted for 327 staff in 2015-16. HRD department is well equipped to respond to human resource development needs of the people and staff on any aspect at any time and delivers its services efficiently.

directory and documentation of housing directory.

- * In liaison with IT section, developed new software for community health sector.

- * Compilation of statistics/infor



WAY FORWARD

A third of the world's poorest are in India. Over 354 million people, most of them belong to marginalized communities, and many are women. While India has seen remarkable economic growth, its inequalities are still many. Addressing these challenges calls for identifying key issues to be addressed, set objectives accordingly and redefine goals.

RDT's strategic plans were made by its teams in 2014, with the participation of 540 staff members, external consultants and over 600 community members. It articulated how the organization will move people forward in the next 10 years and the changes to be made to facilitate that progress.

RDT's overall goal is to see that all discriminated persons & communities most particularly women and persons with disabilities, become empowered and make a giant leap forward in their ability to exercise their rights and in their quality of life.

By sector, RDT has set the following broad goals for itself.

Women will speak up to claim gender equality and social justice, and will lead a life free of discrimination &

violence, with self-respect, dignity and improved socio-economic status. Chenchu tribes will be able to ascertain their rights, protect their values & cultural heritage, access all resources and services they are entitled to, and ultimately lead quality lives. Persons with disabilities will ascertain equal rights & opportunities, overcome social stigma & discrimination and lead quality lives with human dignity and economic stability.

The rural poor will be aware of healthy food & nutrition, maintain sanitation to prevent diseases and, have access to quality health care at affordable costs. Children from marginalized communities & especially girls, will complete secondary & pre-university education and have a life of fulfillment with a social purpose.

The rural poor will improve their quality of life through access to human -worthy habitat and basic community infrastructure to cater to their socio-economic, educational and developmental needs.

The farmers will implement eco efficient agriculture, ensure sustainable livelihood and harmony between humans and nature. Children and youth will exhibit cultural skills & professionalism and people change & develop by witnessing cultural performances. Children and youth will also be instrumental in promoting sports culture in society and achieve complete development and social harmony.

Common three- fold approach A Community

Empowerment Approach

RDT will facilitate communities to become stronger and more self-sufficient. It will promote leadership and organizational abilities among organized groups and encourage them to engage with government and other actors who will play a role in their development.

A gender Approach

A gender approach that will cut across all sectors to ensure that concerns of women & girls are taken care in all RDT's endeavours.

A Disability Approach

RDT will apply a disability lens to all its programs to ensure that persons with disabilities will have equal opportunities in all aspects of their life.



RURAL DEVELOPMENT TRUST :: ANANTHAPURAMU
RECEIPTS AND PAYMENTS ACCOUNT FOR THE PERIOD 1st APRIL 2015 to 31st MARCH 2016.

RECEIPTS	SCHEDULE Nos	AMOUNT ₹.	PAYMENTS	SCHEDULE Nos	AMOUNT ₹.
Opening Balance:					
Cash	SCH - I	4,82,087.00	Education Programme	SCH - X - A	40,40,14,996.91
Bank			Ecology Programme	SCH - X - B	31,03,89,499.49
Field / Area Offices	SCH - IA	7,87,35,805.76	Community Health Programme	SCH - X - C	11,69,69,988.31
		3,88,84,585.90	Hospitals Programme	SCH - X - D	46,01,57,414.87
Grants Received:			Women Programme	SCH - X - E	8,70,14,602.68
Foreign Grants		208,58,02,043.11	Community Habitat Programme	SCH - X - F	71,18,95,189.61
Foreign Grants - Specific - Ecology Program	SCH - II	20,20,000.00	Community Based Rehabilitation Programme	SCH - X - G	12,58,37,778.74
CBR Institutions Corpus Foreign Grant from WDF		10,50,00,000.00	Sponsorship Programme	SCH - X - H	3,45,56,102.97
Projects Corpus Foreign Grant from WDF		12,50,00,000.00	Area Development Program	SCH - X - I	15,84,22,713.83
Specific Grants		8,86,58,377.00	Rural Sports Programme	SCH - X - J	47,47,613.00
Donations		11,99,23,419.00	Central Offices and Campuses Departments	SCH - X - K	13,16,34,142.73
		252,64,03,839.11	Monitoring & Evaluation Department	SCH - X - L	82,95,937.92
Other Receipts / Income:			Revenue Expenditure - Charities	SCH - X - M	4,13,38,282.00
Interest		54,01,37,422.86			
Dividends		12,18,500.76			
Income on Investments	SCH - III	15,98,830.03			
Other Receipts - Insurance Claims/Other Income		14,20,920.00			
Hospital Income		17,57,12,359.00			
Sale of Scrap		2,85,388.00			
		72,03,73,420.65			
Sale of Fixed Assets:					
Sale of Fixed Assets	SCH - IV	8,03,516.00			
Current Liabilities:					
Gratuity & Welfare (Gratuity & Health Subsidy)	SCH - V	3,04,67,110.07			
TOTAL ₹.		367,58,98,947.78	TOTAL ₹.		367,58,98,947.78



M/s. V.K. Madhava Rao & Co.,
Chartered Accountants
SECUNDERABAD.

RECEIPTS	SCHEDULE Nos	AMOUNT ₹.	PAYMENTS	SCHEDULE Nos	AMOUNT ₹.
Realization of Current Assets:					
Realization of Telephone & Gas Deposit	SCH - VI	44,185.00	Capital Expenditure	SCH - X - N	15,75,52,656.50
Advances:			Revenue Expenditure - Payment against Current Liabilities	SCH - X - O	2,50,56,445.00
Advances from Other Programs		10,75,00,000.00	Advances:		
Repayments from other Projects [Advances]	SCH - VII	60,05,181.00	Advances to Other Programs		10,75,00,000.00
Repayment from Staff and Others [Advances]		34,07,925.00	Advances to Other Projects		5,00,000.00
Refund of TDS-from Income Tax [Advances]		2,54,74,221.87	Advances to Staff & Others	VII	1,47,15,803.00
		14,23,87,327.87	Advance from Govt. Settled (BHHT Project)		4,12,610.00
Realization of Fixed Deposits / Investments:	SCH - VIII	13,73,17,070.42	TDS on Interest Receivable from Income Tax		5,16,81,089.32
Bank Investments [Fixed Deposits]			Bank Investments / Fixed Deposits:	SCH - VIII	
			Bank Investments / Fixed Deposits:		60,20,83,013.48
			Other Deposits:	NI	
			Other Deposits [Gas & Electricity]		10,13,860.00
			Current Liabilities - EMD:	SCH - XII	
			Repayment of Earnest Money Deposit		
			Closing Balances:		86,365.00
			Cash:	SCH - I	4,97,375.00
			Bank:		9,41,01,280.54
			Field / Area Offices	SCH - IA	2,54,22,186.88
TOTAL ₹.		367,58,98,947.78	TOTAL ₹.		367,58,98,947.78



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SECUNDERABAD.

RURAL DEVELOPMENT TRUST :: ANANTHAPURAMU

INCOME AND EXPENDITURE/UTILIZATION ACCOUNT FOR THE PERIOD 1st APRIL 2015 to 31st MARCH 2016.

EXPENDITURE / UTILIZATION	SCHEDULE Nos.	AMOUNT ₹	INCOME	SCHEDULE Nos.	AMOUNT ₹
Education Programme	SCH - X - A	40,35,14,996.91	Grants Received:		
Ecology Programme	SCH - X - B	31,03,89,499.49	Foreign Grants - Specific - Ecology Program	Foreign Grants	208,58,02,043.11
Community Health Programme	SCH - X - C	11,69,69,988.31	C.B.R. Institutions Corpus Foreign Grant from W.D.T. Projects Corpus Foreign Grant from W.D.T.	SCH - II - A	31,45,273.00
Hospitals Programme	SCH - X - D	46,01,57,414.87	Specific Grants		10,50,00,000.00
Women Programme	SCH - X - E	8,70,14,602.68	Donations		12,50,00,000.00
Community Habitat Programme	SCH - X - F	61,75,79,642.61	Other Receipts/Income:		8,15,93,378.00
Community Based Rehabilitation Programme	SCH - X - G	12,58,37,778.74	Interest		11,99,23,419.00
Sponsorship Programme	SCH - X - H	3,45,56,102.97	Dividends		54,01,37,422.86
Area Development Program	SCH - X - I	15,84,22,713.83	Income on Investments	SCH - III	12,18,500.76
Rural Sports Programme	SCH - X - J	47,47,613.00	Other Receipts - Insurance Claims / Other Income		15,98,830.03
Central Offices and Campuses Departments	SCH - X - K	13,16,34,142.73	Hospital Income		14,20,930.00
Monitoring & Evaluation Department	SCH - X - L	82,95,937.92	Sale of Scrap		17,57,12,359.00
Revenue Expenditure - Charities	SCH - X - M	4,13,38,282.00	Income on sale of fixed assets	IX	2,85,388.00
Depreciation	SCH - XIII	9,15,14,772.90			6,08,087.00
Excess of Income over Expenditure transfer to Balance Sheet	SCH - XV - A	64,94,72,131.80			
TOTAL ₹		324,14,45,620.76	TOTAL ₹		324,14,45,620.76



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RURAL DEVELOPMENT TRUST :: ANANTHAPURAMU BALANCE SHEET AS AT 31.03.2016.

LIABILITIES	SCHEDULE Nos.	AMOUNT (₹)	TOTAL AMOUNT (₹)	ASSETS	SCHEDULE Nos.	AMOUNT (₹)	TOTAL AMOUNT (₹)
FUND ACCOUNT :				FIXED ASSETS :			
Capital Fund/Account		152,31,77,239.74		Fixed Assets	SCH - XIII		152,31,77,239.74
General Fund/Account		31,86,11,865.95		FIXED DEPOSITS / INVESTMENTS :			
				CORPUS :			
Health Corpus Fund Account [For Sustainability of Hospitals]		346,85,04,673.06		Health Corpus Fund Investments		346,85,04,673.06	
Projects Corpus Fund Account [For Sustainability of programs]		89,35,00,441.83		Projects Corpus Fund Investments		89,35,00,441.83	
C.B.R Institutions Corpus Fund Account [For Sustainability of Disability Schools and Institutions]	SCH - XV - A	86,43,12,208.45		C.B.R Institutions Corpus - Investments		86,43,12,208.45	
Corpus Fund Sub Total : ₹		522,61,17,323.34		Sub Total : ₹	SCH - XIV - A	522,61,17,323.34	
FORM - 10 :				FORM - 10 :			
Housing Program Fund [to be utilised within 5 Years]		79,80,00,000.00		Housing Program Fund		79,80,00,000.00	
Ecology Program Fund [to be utilised within 5 Years]		22,00,00,000.00		Ecology Program Fund		22,00,00,000.00	
Education Program Fund [to be utilised within 5 Years]		5,00,00,000.00					
Health Program Fund [to be utilised within 5 Years]		5,00,00,000.00					
OTHER LIABILITIES (Staff Welfare Fund):		5,00,00,000.00		GENERAL FUND / OTHERS:			
Gratuity & Welfare		9,65,94,356.13		Other Security Deposits		41,00,775.89	
Staff Health Benefits		7,15,45,848.10		General Fund Investments		14,88,02,735.14	
Sub Total :	SCH - XIV - B	16,81,40,204.23		STAFF WELFARE FUND - INVESTMENTS :			
OTHER LIABILITIES - EMD :				Staff Welfare Fund Investments		16,76,94,189.13	
Earnest Money Deposit		38,05,908.00		ADVANCES - RECEIVABLE :			
GOVERNMENT RECEIPTS AND PROB. GOVERNMENT ASSISTANCES				Advances to Other Programs		12,06,35,061.00	
Advances from Government & Other Institutions		50,91,439.00		Advances to Other Projects	SCH - XIV - B	5,00,000.00	
				Advances to staff & others		2,16,75,383.00	
				TDS receivable from Income Tax Department		13,27,77,233.58	
				Amount receivable from Government & Banks		10,20,60,328.00	
ADVANCES - PAYABLE :	SCH - XV - C			CURRENT ASSETS :			
Advances from Other Programs				CLOSING BALANCE			
				Cash	SCH - I	4,97,375.00	
				Bank	SCH - I - A	9,41,01,280.51	
				Field / Area Offices		2,54,22,186.88	
TOTAL : ₹		848,55,79,101.24		TOTAL : ₹		848,55,79,101.24	



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"We have to invoke the basic human goodness hidden in every person. When this is done, Indians are no less in their generosity to any others in this world."

Vicente Ferrer

INDIA for **INDIA**



In 2015-16, the number of hundis reached 1,17,566 and the amount collected reached Rs. 4,03,,91,539. 701 orphan children were educated for which Rs. 1,93,33,351 has been utilized. Another Rs. 57,82,295 was used for providing nutrition to 5,500 chenchus in Srirsailam region.

RDT introduced the seva hundi concept initially in a few project villages in 2012, with the slogan 'spandichu sayam andichu' (Let your ears respond and hands help). It follows the common custom of depositing small amounts on a regular basis to a hundi,

a collection box, usually for offerings to God. RDT adapted the practice to pool together small donations from and around project areas to support the common cause. RDT has established the tradition of collecting all the proceeds from these hundis on April 9, Father Ferrer's birthday.

The goal is sensitizing individuals and institutions across the country to help those in need by sharing and spreading the message to be a part of the larger social movement creating a new hope and paving the way for transformation of millions of lives.



VicenteFerrer



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