

RIGHTS BASED ADVOCACY FOR DISADVANTAGED ELDERERS

AN INITIATIVE IN SOUTH INDIA

MAY 2008



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 **HelpAge India**

HelpAge India is grateful to the Canadian High Commission for financial support to this project. It would also like to thank its partners in four states of South India (Andhra Pradesh, Kerala, Karnataka and Tamilnadu) for carrying out the project activities with dedication and sincerity.

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FOREWORD

Advocacy for improving the quality of life of millions of poor elders in India is still in the evolving stage partly due to the low priority attached to the issues of the aged, but perhaps, more importantly, due to the insufficient amount of information and knowledge available on them. Over the years, HelpAge India has been observing these gaps and the growing need for sensitising the public, policy makers and planners, Civil Society Organizations and the corporate world on the growing complexity of the issues of the aged.

Traditionally, India is known for its values and positive attitudes towards care of the elders in the context of a family. However, the opening up of the market and the rapid changes that are triggered by globalization processes have resulted in erosion of some of these core familial values. As a result, the concept of nuclear families has gained a strong position and the joint family system has broken down. Essentially, the breakdown of joint family system has resulted in shattering the expectations of the elders other than just their food security.

Today, elders constitute only 6% of the total population. However, their proportion would change dramatically in just a little over 15 years; by 2026 their proportion would be more than 12%, more than double of what we have today. The figures are not easy to comprehend. They are indicative of a sound increase in the average life span wherein the proportion of aged in the age group of 80 plus would witness a five times increase and the proportion of the aged between 75 to 79 would also have a four fold increase. As committed citizens, we are responsible for making the lives of our elder persons consistently better by passing on to them a share of our advantages of progress in medicine, science and technology and economic growth. Sadly, this does not happen and elders (especially the economically weaker) are left to their fate towards the fag end of their lives!

HelpAge India is extremely grateful to Canadian High Commission for their financial support in evolving an innovative project around the broader issues of the aged. Their support has given us opportunities to research on the issues, engage with eight CSOs in Southern India on the variegated issues of the disadvantaged older persons. The project has touched on many important issues like the coverage of social pension, access of the aged to health and other services, need for collectivising them, creating exclusive platforms to work for the welfare of the aged, etc.

I do hope that the issues flagged as learning from this project, would help us develop the social advocacy initiatives to help the vast number of underprivileged older persons in our country.

Avinash Dutta
Head of Programmes

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GLOSSARY

AP	Andhra Pradesh
CBO	Community Based organisation
CHC	Canadian High Commission
CSO	Civil Society organisation
ESHG	Elderly Self Help Group
FGD	Focus Group Discussion
HI	Help Age India
IGP	Income Generation programme
KE	Kerala
NGOs	Non-Government Organisation
NOAPS	National Old Age Pension Scheme
OAP	Old Age Pension
PRI	Panchayati Raj Institution
SHG	Self Help Group
TN	Tamil Nadu

Partner NGOs

Name of the Agency	State	Name of the Agency	State
Share & Care Children's Welfare Society, Chennai	Tamilnadu	Navajyoti Youth Club, Medak	Andhra Pradesh
Welfare Association for the Rural Mass (WARM), Thiruvannamalai	Tamilnadu	Girijana Seema Welfare Association, Khammam	Andhra Pradesh
Abhivruddi Society for Social Development, Tumkur	Karnataka	Kottayam Social Service Society (KSSS), Kottayam	Kerala
Karwar Diocesan Development Council (KDDC), Karwar	Karnataka	Bodhana – Tiruvalla Social Service Society, Pathanamthitta	Kerala

BACKGROUND, OBJECTIVES AND METHODOLOGY

BACKGROUND

Indian society has been proud of its age-old tradition of caring for its elder community. It is proud of its culture of caring for its aged parents and grand parents. They were once respected and recognized. But that scenario has been changing drastically over the last one decade. The change is obviously due to the sweeping changes happening



at the basic structure of Indian society; the younger children are more entrepreneurial and subjected to long hours of work. Massive migration of uneducated rural youths to city slums in search of labour; educated rural youth search for new and better job opportunities leaving parents and grand-parents alone in their villages. The subsequent out migration to cities means adapting to new lifestyles and cultures. The globalization processes has brought in wide the choices, resulting in

tremendous increase in living cost. Slowly and gradually, the scenario is moving toward growing neglect and isolation of elders on the one hand and demonstrated lack of capacity and will of the government to reach out to them on the other. The main areas of concern of the aged people are health, nutrition and housing. The main aim of the project was to enhance and promote good governance, democratic development and respect for Human Rights for the disadvantaged older persons through an aggressive and advocacy initiative in four States in South India i.e. Andhra Pradesh, Kerala, Karnataka and Tamilnadu. The specific objectives were:

SPECIFIC OBJECTIVES OF THE PROJECT

- To increase awareness though advocacy and transparency on social security issues of elderly people and with opinion leaders.
- To increase transparency and thereby reduce corruption in Government delivery programmes for older persons, and

- Sensitize the society at large to the issues as related to the older persons.

Many believe that the current situation of the aged is due to the rapid changes that have happened at the level of family as a cohesive unit and the break-down of joint families into modern nuclear families. As said above, the reason for this are manifold: shift of the population from the agriculture sector to industrial or service sector, migration of large number of youths from their home villages to in and outside the state or other countries, changes in the attitude of the young generation and their increasing desire to live as nuclear family, and the lack of suitable living space in the urban slums and cities for the aged result in increasing insistence on the aged not to leave their traditional households, etc.

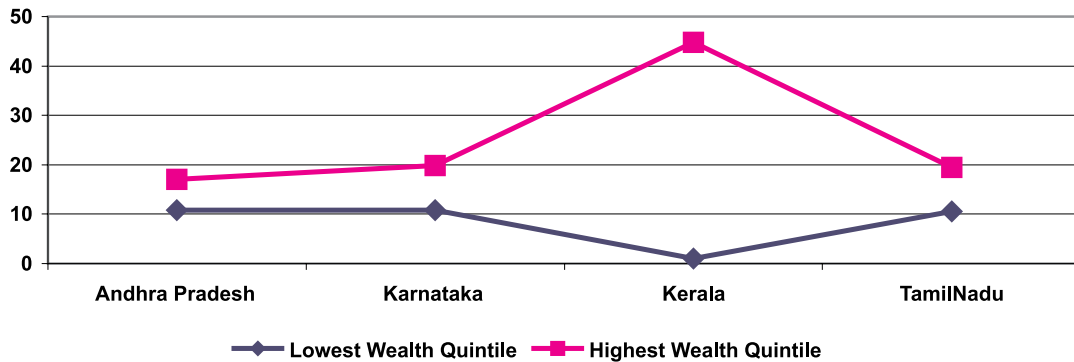
Huge differences exist in the proportion of rich and poor persons in India. The gap is very wide. The growing disparities in the distribution of wealth act as a major impediment for the poor in particularly taking care of the aged. The highest and lowest wealth quintiles show that between 5% to almost 50% of population live in extreme poverty and the average size of the highest wealth quintile vary from 28% to 8%. This is explained in figure 1 below.

Figure 1: Highest and lowest percentage wealth Quintiles in India



Source: National Family Health Survey-3

Globalization has brought in more choices for the people. A corresponding economic growth in income per family is hard to come by. The analysis of highest and lowest wealth quintiles of the southern states shows a bleak picture. The gap of proportion is very high. Figure2 clearly explains this.

Figure 2: Highest and lowest percentage wealth Quintiles in south India

Source: National Family Health Survey-3

Figure 2 shows that the over 10% of the poor in lowest quintiles across Andhra Pradesh, Karnataka and Tamilnadu is seen. Also the proportion of the highest wealth quintile is 18% in Andhra Pradesh, 20% in Karnataka and Tamilnadu whereas this is over 43% in Kerala.

METHODOLOGY ADOPTED FOR IMPLEMENTATION OF THE PROJECT

HelpAge India (HI) is the main implementing partner. It has entered into partnership with eight civil society organizations for eight project locations across four states, viz., Andhra Pradesh, Karnataka, Kerala and Tamil Nadu. For two civil society partners, it was their first project for working with the elders. The methodologies adopted for implementing the project included:

1. Partnership with Civil Society Organizations (CSOs)
2. Literature Review
3. Base-line Assessment or rapid studies
4. Field level implementation of project activities by CSO partners and advocacy

1. PARTNERSHIP WITH CSOS

The project gave unique opportunity for HI to initiate larger advocacy issue of the elders in the southern states of India. HelpAge being known for its pioneering work for alleviating the miseries of the aged mainly work in partnership with CSOs. It provides the technical advice and support to CSOs and other stakeholders for taking up the issues of the elderly. HI forged partnership with eight CSOs for initiating targeted interventions in eight locations. The details of CSOs partnered with are as given under:

Table 1 Name and location of partner CSOs

Sl. No	Name of the Agency	State	Project Districts
1	Share & Care Children's Welfare Society, Chennai	Tamilnadu	Tiruvallur
2	Welfare Association for the Rural Mass (WARM), Thiruvannamalai	Tamilnadu	Thiruvannamalai
3	Abhivruddi Society for Social Development, Tumkur	Karnataka	Bellary
4	Karwar Diocesan Development Council (KDDC), Karwar	Karnataka	Karwar
5	Navajyoti Youth Club, Medak	Andhra Pradesh	Medak
6	Girijana Seema Welfare Association, Khammam	Andhra Pradesh	Khammam
7	Kottayam Social Service Society (KSSS), Kottayam	Kerala	Wayanad
8	Bodhana – Tiruvalla Social Service Society, Pathanamthitta	Kerala	Pathanamthitta

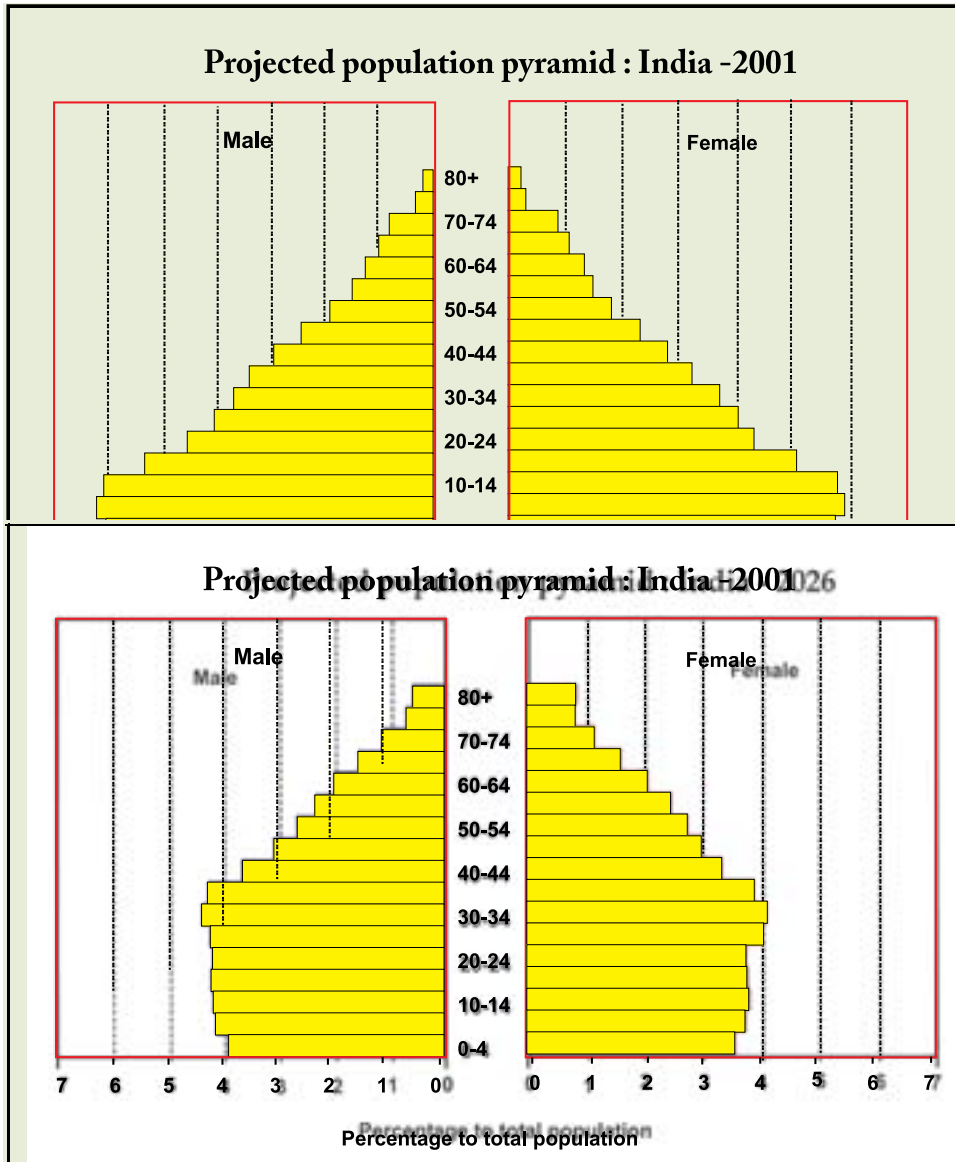
2. LITERATURE REVIEW

Though the project grant and duration was very small compared to the issues to be addressed, it gave significant opportunities in taking up the issues. The project has done extensive literature review on the extent, magnitude and growing trends of old age people in India.

THE NUMBER AND MAGNITUDE OF THE AGED IN INDIA

The number of elder persons is increasing phenomenally in India. Thanks to our achievements in fertility control and advancement in medical technology and care. It is estimated that the proportion of older ages (60- years and above) is set to increase significantly; from 71 million in 2001 to 173 million by 2026. This would bring the share of elder persons from 6.9 to 12.4. The projected population growth of elder persons is clearly visible from the population pyramid shown in figure 3.

Figure 3: Population pyramid 2001 and 2026



Source: Population projection for India and States - 2001-26, National Commission on Population

Not only is the elder population doubling, the number of older people in different age brackets would also increase considerably which requires different planning processes and social security measures. A standardized and uniform policy would not be able to respond to the variegated problems of the aged. This is evident in the tables and figures that follow.

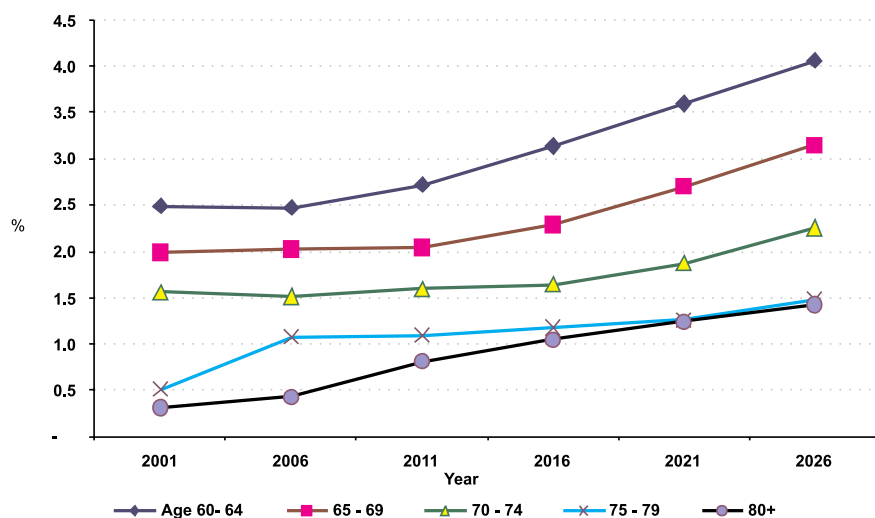
Table 2: Projected old age population for 2001 - 26, India

Year	Total Population	Age 60- 64	65 - 69	70 - 74	75 - 79	80+
2001	1,028,610,000	25,692,000	20,514,000	15,996,000	5,309,000	3,176,000
%	100	2.5	2.0	1.6	0.5	0.3
2006	1,112,187,000	27,442,000	22,506,000	16,860,000	12,012,000	4,760,000
%	100	2.5	2.0	1.5	1.1	0.4
2011	1,192,507,000	32,405,000	24,397,000	18,944,000	13,092,000	9,632,000
%	100	2.7	2.0	1.6	1.1	0.8
2016	1,268,961,000	39,886,000	29,098,000	20,851,000	15,025,000	13,239,000
%	100	3.1	2.3	1.6	1.2	1.0
2021	1,339,741,000	48,376,000	36,166,000	25,212,000	16,831,000	16,660,000
%	100	3.6	2.7	1.9	1.3	1.2
2026	1,399,838,000	56,919,000	44,167,000	31,639,000	20,581,000	19,877,000
%	100	4.1	3.2	2.3	1.5	1.4

Source: Population projection for India and States - 2001-26, National Commission on Population

From the above table it is evident that the proportion of older people above the age of 80 would grow more than five times by 2026. Similarly, the proportion of elder persons belonging to the age group of 75 to 79 would increase by three times. The different age groups and its projected growth rates are presented in figure 4 below.

Figure 4: Projection of elderly population in India 2001-26



Source: Population projection for India and States - 2001-26, National Commission on Population

The trend is almost similar in the four southern states also. Amongst the four states, the proportionate percentage of older people will be higher in Kerala. The higher advancement in medical technology, better economic status and high degree of fertility control has contributed in achieving higher life expectancy. The following table 3 and figure 5 would make it clear.

Table 3: Percentage projection of old age population for 2001 - 26, four southern states

Age Groups						
Years	States	60- 64	65 - 69	70 - 74	75 - 79	80+
2001	Andhra Pradesh	2.68	2.05	1.52	0.57	0.34
	Karnataka	2.54	1.99	1.59	0.71	0.43
	Tamil Nadu	3.11	2.35	1.81	1.10	0.66
	Kerala	3.22	2.71	2.29	1.45	0.89
2006	Andhra Pradesh	2.71	2.20	1.58	1.06	0.47
	Karnataka	2.65	2.13	1.56	1.15	0.60
	Tamil Nadu	3.30	2.61	1.85	1.29	0.93
	Kerala	3.33	2.77	2.18	1.68	1.24
2011	Andhra Pradesh	3.06	2.28	1.76	1.15	0.83
	Karnataka	3.09	2.26	1.72	1.17	0.96
	Tamil Nadu	3.73	2.83	2.11	1.36	1.21
	Kerala	3.88	2.91	2.28	1.65	1.59
2016	Andhra Pradesh	3.56	2.62	1.86	1.32	1.10
	Karnataka	3.63	2.67	1.86	1.32	1.19
	Tamil Nadu	4.26	3.25	2.33	1.60	1.43
	Kerala	4.50	3.44	2.45	1.77	1.81



Table 3 contd.

Age Groups						
Years	States	60- 64	65 - 69	70 - 74	75 - 79	80+
2021	Andhra Pradesh	4.10	3.10	2.18	1.44	1.37
	Karnataka	4.14	3.19	2.24	1.46	1.42
	Tamil Nadu	4.80	3.76	2.73	1.81	1.72
	Kerala	4.99	4.05	2.95	1.94	2.03
2026	Andhra Pradesh	4.66	3.63	2.63	1.72	1.61
	Karnataka	4.61	3.69	2.72	1.79	1.66
	Tamil Nadu	5.35	4.30	3.22	2.17	2.04
	Kerala	5.53	4.54	3.52	2.38	2.29

The state-wise picture is presented in the following figures for the years 2001 to 2026.

Figure 5: Inter-state comparison of elderly population in year 2001, 2006, 2011 & 2016 in four southern states.

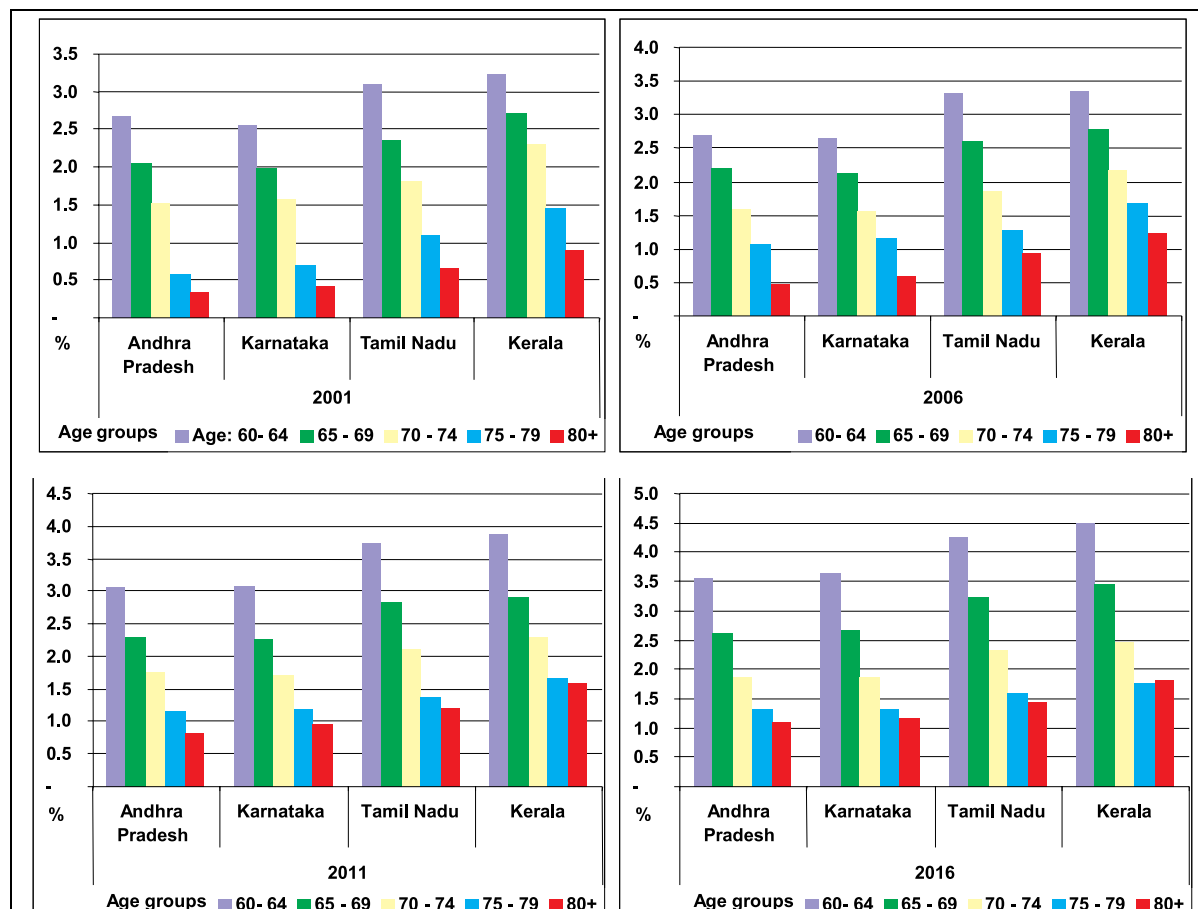
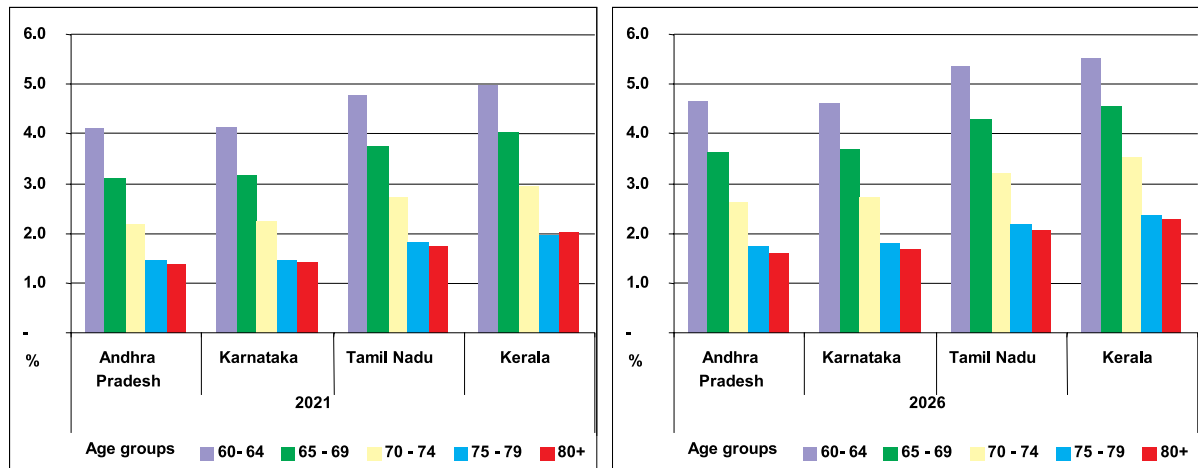


Figure 6: Inter-state comparison of elderly population in year 2021&2026 in four southern states.



This emerging situation is not being recognized adequately by the planners and administrators. The enormity of the problems is seen in increasing isolation and deprivation being faced by the aged: malnourishment, starvation, and increase in ailment and total decline in the quality of life. The chronic diseases have become chronic because of the patient not receiving treatment or the extended family neglecting to get proper treatment at the appropriate time, or because the health system is inadequate and specially because of its inability to provide geriatric facilities and free medicines.

Improving the quality of life of the aged is a critical challenge mainly due to the multiplicity of issues and the growing size of population. While improving the life expectancy is a great achievement, the challenge is to make the achievement qualitative rather than burdensome.

Not many organizations are involved in helping the aged in India. The agenda is yet to be one of the priorities of many of the national and international development agencies. The main actors in the current context include national and state government and HelpAge.

OLD AGE HOMES

As already described above, the proportion of the aged is rising and there are very few institutional



Tamaraiikulam elders's village: A HelpAge initiative for tsunami affected elders at Cuddalore district, Tamilnadu

mechanisms to cater to their special needs. The only available mechanism is “old age homes”.

POLICY FOR THE AGED

Article 41 of the Indian Constitution, has directed the States in India to make effective provision for safeguarding the rights of the aged. The United Nations Principles for Older Persons and various other resolutions encouraged Government to design its policies and programmes for the aged. Accordingly, Government of India came out with a National Policy on Older persons in January, 1999.

NATIONAL OLD AGE PENSION SCHEME

The National Old Age Pension Scheme (NOAPS) aims to provide social security support to the aged. Its value has been enhanced from time to time and currently it has been raised to Rs.400/- per month. Each state seemed to have a ceiling on the number of NOAPS pensions it can sanction, with the ceiling for the entire country being 6.9 million in 2003.

In 1999, the Central government also launched the Annapurna Programme, which is supposed to provide 10 kg of rice or wheat each month free to elderly destitute through the existing public distribution system. However various administrative issues have slowed the implementation of the programme and many deserving aged do not get this.

SUMMARY OF FACTS ON THE AGED

Old age population is the fastest growing segment in India. This is evident from the fact that:

- The elderly comprise 7% of the country's population.
- By 2020, the older population is expected to increase to 173 million (12.4%).
- More than 75% of the older people live in rural areas.
- 51 million live Below the Poverty Line.
- More than 70.3% of the aged are illiterate.
- Of the older people who work, approximately 92% are engaged in the unorganized sector and do not have any kind of social security schemes. Of this, only 40% of the elders earn wages and the remaining 60% receive in-kind compensation.

3. BASELINE ASSESSMENT OR RAPID STUDY

CSO partners in all the eight locations were asked to conduct a quick assessment of the situation of the aged in select villages. The primary purpose of this study was to sensitize the CSO partners on the variegated issues of the aged so that they get focused on the issues that need to be addressed differently. The additional aim was also to prioritize the issues.



A total of 1645 elders were interviewed across the eight locations. The base-line assessment was done using a pre-defined questionnaire developed by the HI in consultation with the CSO partners. Women were the major respondents: 965 against 691 males. The CSO partner staff were oriented on the survey methods.

“The Hindu” newspaper published the survey findings in its edition on September 1, 2007 and this proved to be an eye opener to many of its readers on the problems being faced by the disadvantaged older people in Thiruvannamalai District, Tamilnadu

Table 4: Distribution of surveyed elderly by gender

Sl. No	State	Name of the Agency	No. of old age people surveyed	Male	Female
1	KE	MASSS	200	92	108
2	TN	WARM	200	89	111
3	TN	Share & Care	200	80	120
4	AP	Navjyoti	200	83	117
5	AP	GSWA	200	66	134
6	KA	Abhivruddi	231	100	131
7	KA	KDDC	216	80	136
8	KE	TSSS	198	90	108
		Total	1645	691	965

More than 58% of the women respondents were widows. About 60% of the older people were not aware of the Government Welfare Scheme available for them and the process to access the same. About 80% of the elderly were not availing their entitlements. Hence, the partner organizations proposed to sensitize the government and make the process of getting old age pension at the ease of older people. Accordingly, sensitization workshops were proposed to be organized. The highlights of the based assessment are presented in table 5.

Table 5: Highlights of the rapid assessment study

Particulars	Percentage
Destitute	82
Not availing government old age pension	80
Suffering from various ailments	87
Forced to work despite poor health	40
Physically challenged	30
Living on streets (deserted by children)	52

Summary of survey activities and output

Activities	Impact
Youth voluntarily conducted the survey in Chatti village of Khammam. Volunteers trained and Base Line Survey conducted in four remote villages having more number of vulnerable older persons. Older People groups were involved for meetings and common issues concerning them were discussed.	Youth following up on the survey findings with the government in Khammam Identified households Making SHGs Follow-up Staff members visit households Required information collected was compiled and the outcome published. Level of awareness of the older people on their rights and entitlements were ascertained. Orientation was provided on the Rights and Entitlements to the older persons in the villages to increase their awareness levels.

4. FIELD LEVEL IMPLEMENTATION OF PROJECT ACTIVITIES BY CSO PARTNERS AND ADVOCACY

The project activities mainly focused on working with the elder persons in the target villages, developing suitable IEC materials, organizing awareness camps and rallies,

and bringing in relevant stakeholders for their participation and support. Besides the above block and district level seminars and meetings, media were involved in highlighting relevant issues, including publishing the highlights of the base-line assessment, etc. This was done to reach out the wider audience. Building linkages with the line department of the government and networking with other key stakeholders were crucial inputs to advocacy and social mobilization.

STRATEGY AND ACTIVITIES

PROJECT IMPLEMENTATION STRATEGY

HI works through constructive partnership with CSOs and other relevant stakeholders. Transforming the quality of life of the aged is central to all its field level implementation and policy advocacy. Learning from its experience, the project strategy was very consciously evolved to form the basis for its larger public advocacy for effecting major changes at the policy level.

Figure 7: Target group addressed by the project

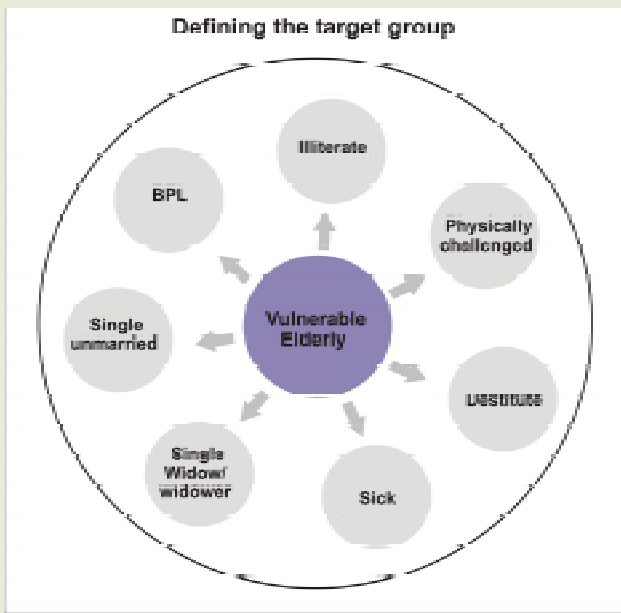
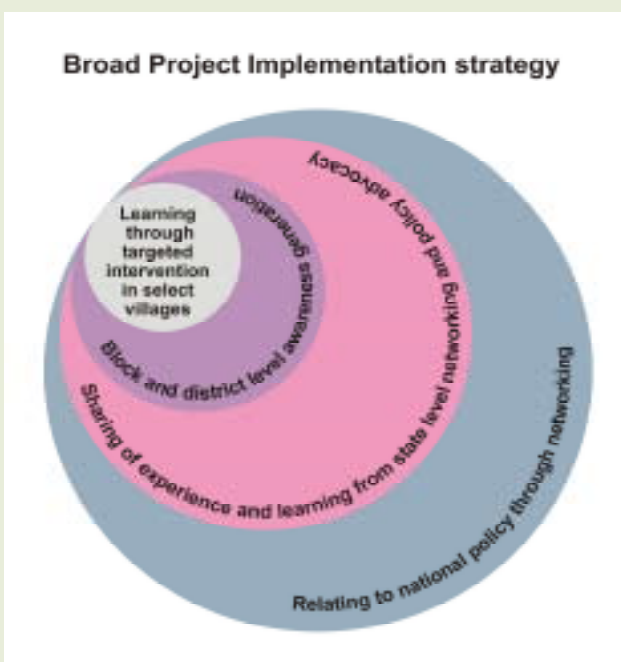


Figure 8: Project Implementation strategy



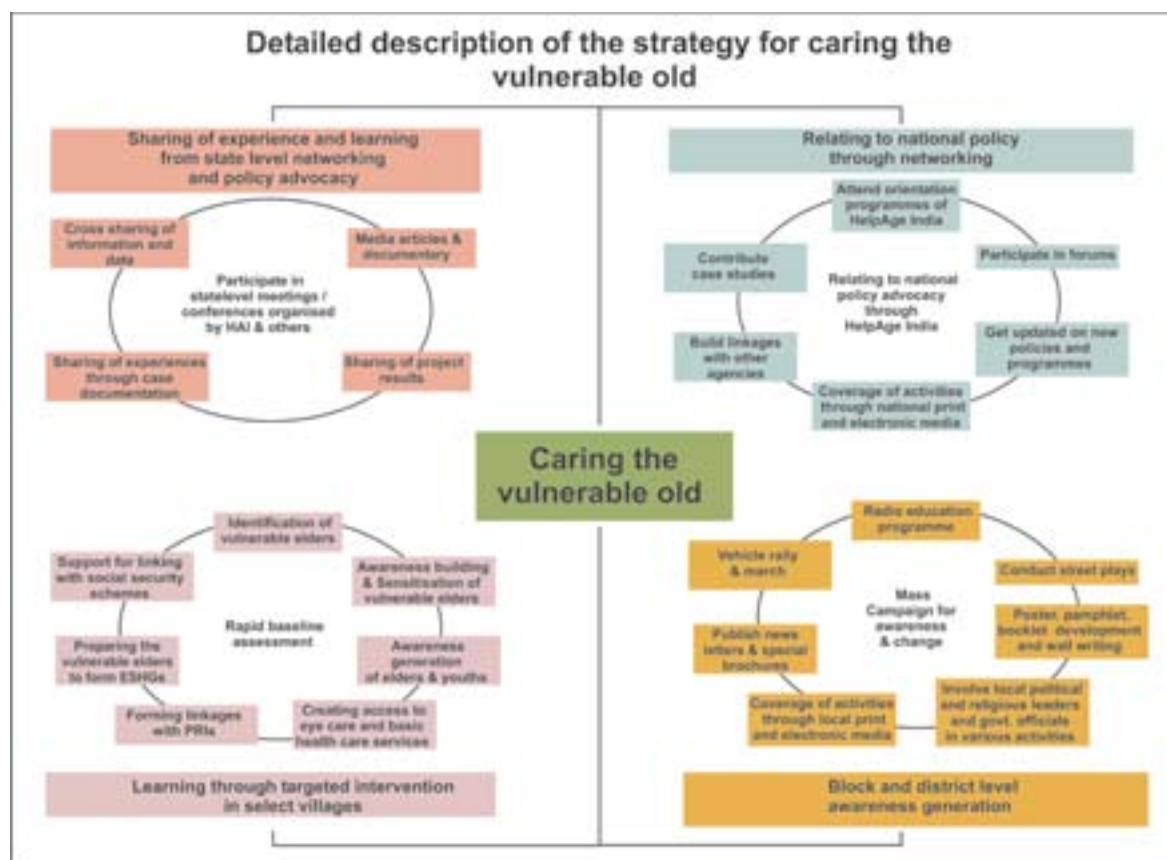
One of the key project strategies was to build the capacity of its CSO partners in understanding the key stakeholders and how their participation and support can give succour to the whole initiative. The stakeholder analysis helped to map the stakeholders as shown in figure 7. Interestingly, the stakeholder mapping helped the project partners to understand the wide spectrum of agencies whose participation and networking can be instrumental in accelerating the project results and evolving sustainable mechanisms.

The stakeholder mapping has immensely helped the project in understanding the wide spectrum that need to be taken into consideration while deciding on key project activities and the expected results, The project framework was evolved following the stakeholder mapping. The project imbibed a comprehensive spectrum to cover and bring about meaningful and lasting changes in the lives of the aged.

As per the design (see figure 8), the project activities were evolved based on the spectrum of issues to be covered. Accordingly a robust strategy was formulated covering the focused activities at the target project village level (immediate results as well as learning by doing) and project inputs that would cover block and district as the second important layer. Accordingly broad level (state and national) inputs were identified and implemented.

The key strategic inputs could be categorized into four. They are described adequately in figure 9.

Figure 9: Detailed description of the strategy for caring the vulnerable old



The project strategy thus helped to facilitate project inputs making a contribution at the field level, district, state and national level.

DESCRIPTION OF PROJECT ACTIVITIES AND RESULTS

A wide variety of project activities were implemented to initiate comprehensive processes in addressing the issues of the aged in the rapidly changing demographic, social and economic scenario of our country. The key activities are given in the table below:

KEY PROJECT INPUTS

Sensitization & training of elders & community members	Involvement with elderly
<ul style="list-style-type: none"> ● Interaction Meetings and FGDs 	<ul style="list-style-type: none"> ● Health checkup camps
<ul style="list-style-type: none"> ● Seminars and Sensitization Workshops 	<ul style="list-style-type: none"> ● Eye operations

● Awareness campaigns	● Special meetings and interactions for awareness creations
● Street plays	● Formation of ESHGs
● Legal Aid Trainings	● EDP/ IGA trainings
● Rallies	● Initiation of IGPs
● Padyatra	

Development of IEC materials	Networking and linkages with various stakeholders
● Brochure	● Panchayati Raj Institutions
● Placards	● Government departments
● Pamphlets and leaflets	● Educational institutions
● Posters	● Medical institutions
● Booklets	● Clubs etc
● Hoardings	● Other voluntary organisations
● Banners	

Involvement with mass media
● Print, Electronic
● Wall writing, Radio Education activities

SENSITIZATION AND TRAINING OF ELDERS AND COMMUNITY MEMBERS

Sensitization of the community was done through a series of meetings, workshops, awareness campaigns, street plays, rallies and padayatras



A street play in progress



The CSOs used most of the popular methods in reaching out to the immediate and extended communities. Over 2600 persons attended seminars and workshops across the project locations. The number of people sensitized through street plays would approximately be 6970. Approximately 450 elders were given legal aid awareness and 500 elders were familiarized with income generation activities. The detailed description of sensitization activities and results are as given under.

Table 6: Seminars, workshops, Street plays, IGP and Legal Aid Training, etc.

Sl.	Seminars and Workshops				Street Plays	Nos.	Trainings					
	Name of the agency	Who attended	Duration	No. of participants			IGP	Nos.	Legal aid	Nos.	EDP	Nos
1	GSWA	Lawyers, NGO rep., media, students, police, PRI	1 - 3 day 1 - 1 day	8520	2	80			Covered in sensitisation Workshop			
2	WARM	MLA, MP, PRI & BDO for inauguration, NGO heads, SHG members, elders,	6 - 1 day	1200	8 in diff. town panchayats	1600			Covered in sensitisation Workshop			
3	Share & Care	Elderly, WSHGs, youth, Govt. dept. District administration officers- PRI, WSHGs, Youths and other NGOs & teachers	2 WS & 2 Sem	43065	2 (1 in town and 1 in village)	540			Covered in sensitisation Workshop			
4	Nav Jyoti				4	1600						
5	KDDC	Elderly, SHGs, youth, PRI, Community leaders	2 Ws	400	2	400	2	250	2	450	2	239
6	MASSS	Lawyers, PRIs, SHG members, Aged, Community leaders	2 sem	115	2 in 2 vil-lages	350						
7	TSSS	PRIs, SHG members, Aged, Medical professionals	2 - 1/2 day	120 165	12villages, neraby GPs & town,2 colleges	2000						
8	Ab-hivru-dhi	Aged, Youth, Block of-ficials, PRIs, local media, Print & elect.	1 - 1 day 1-media adv. Prog.		2 in 2 vil-lages	400						
Total				2600		6970		250		450		239

DEVELOPMENT OF IEC MATERIALS

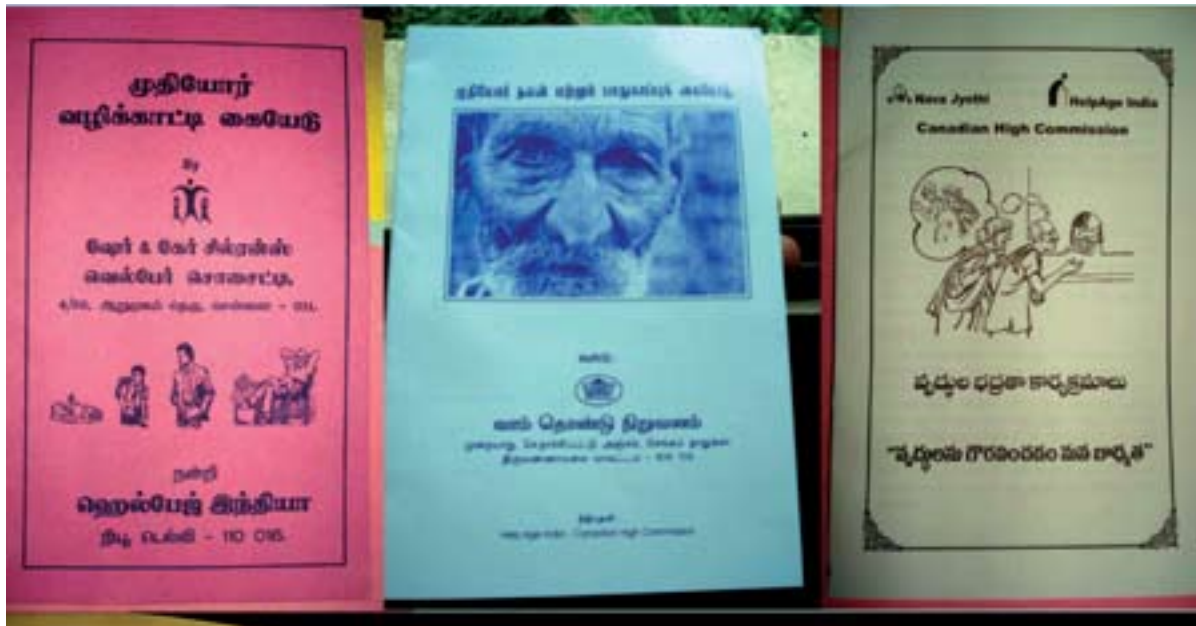
A wide variety of locally relevant IEC materials were produced and procured by the

CSO partners. The detailed descriptions of the IEC materials produced and procured are given in table 7.

Table 7: IEC materials produced and procured by the CSO partners

Sl.	Name of the agency	Post-ers	Nos.	Leaflets/ Pam- phlets	Nos	Bro- chure	Booklets	Ban- ners	Greet- ing cards	Plac- ards	Hoard- ing	Wall writ- ing
1	GSWA	10 types	@ 100 each	1	1000		Telugu 1000 English 10	Flex 21	0	40	0	0
2	WARM	1	1000	2	@ 2500 each		500 in Tamil	100	300	100	3	0
3	Share & Care	1	100	1	500		300	10	0	150	2	0
4	NavJyoti	1	500	1	500		600	6		100	0	0
5	KDDC	10	@ 10 each	1	5000		procured 300	25		50	0	0
6	MASSS	1	350	2	1250		1000	18		52		
7	TSSS	1	250	1	1500	0	1 = 300	20		50	0	0
8	Abhivrudhi	1	100	2	@ 500 each	1	1000					

Specific IEC materials of different types were produced. The mass awareness initiatives were adequately backed by the various types of materials in local language.





INVOLVEMENT WITH MASS MEDIA

The involvement of media in the project implementation was well thought out. Table 8 clearly depicts the variety of ways in which the media was involved.



Table 8: Communication and Media involvement

Sl.	Name of the agency	Type	How many	Sources for verification
1	GSWA	14 times in Telugu news paper 1 time in Cable TV	14	Press clippings available Advertised in local cables
2	WARM	Hindu + local press 8 times in TV channel Video + News clippings	8	Survey report was published by the Hindu
3	Share & Care	4 news paper coverage 6 times by local TV	6	video tapes + press cuttings available
4	Nav Jyoti	2 times covered by local press	2	Press cuttings available
5	KDDC	Radio Announcements Media coverage,	10	Press clippings available
6	MASSS	2 times covered by local press	2	Press clippings available
7	TSSS	Press meeting, 4 to 5 news coverage in print	5	1 press meeting Street paly covered Print + electronic video tape available
8	Abhivrudhi	News coverage Radio Messaging	1	Media seminar Press cutting available

The local media, local and state level news media were engaged to highlight the serious problems being faced by the elder community.

INVOLVEMENT WITH ELDERLY

The targeted interventions at the village level were particularly relevant in thoroughly understanding the difficulties of the aged and gain insight into their plight and struggle for dignified living. All CSO partners were actively involved in taking up the issue in a focused manner. As a result, collaboration with corporate and PRIs were facilitated. These new initiatives could be further strengthened to evoke responses from all stakeholders, including positive responses from family as a unit that cares for the elders.



Snapshots: Targeted interventions at the village level

The engagements of the CSOs were mainly in three forms, viz., through survey, house visits, FGDs and meetings. As a result, youths from the villages participated as volunteers for the survey and continue to be associated in following up with the major findings of the survey, in particular in enabling the elders to access social security schemes. The major initiatives are summarized below in a tabular form Table 9. House visits enabled the staff and community volunteers to know the problems of the aged very closely and motivated them to get involved in providing some basic services to them. For instance, the village volunteers and leaders of SHGs are providing essential support to select elder families in their own villages.

The various meetings and FGDs with the community resulted in mobilizing social security services for the aged. The total number of Old Age Pensions (OAP) mobilized



Health check-up camps for the elderly villagers

across the eight project locations so far came to 512. The unit value of OAP now comes to Rs.400/- per month. This has been one of the encouraging results of targeted efforts in select villages. Apart from mobilizing OAPs, tremendous efforts were put in by the partner CSOs and the community based organizations in mobilizing “Annapurna Scheme.”^{*} The facilitation of “Annapurna” Scheme though was not very successful, due to different norms in different states. The details of these activities have been given in table 9.

Table 9: Major activities and results of working with vulnerable old people across the target villages from eight project locations

What did we do	Example(s)	Direct Results	Indirect results
- Survey	Youth following up on the survey findings with the government in Khammam-Identified households, Making SHGs, Follow up, Staff members visit households	Gained better understanding of the issue of the aged.Exact data of the aged available for the target villages.	Youth voluntarily conducted the survey in Chatti village of Khammam.
- House visits	Community members incorporating this as a part of their routine tasks	Accompanying aged people for medical care to Hospital. Follow-up of pension and other entitlement. Dedicated community workers. House visits done regularly. Help to form ESHGs	Sensitizing the immediate community

^{*} “Annapurna scheme provides 10kg of rice to the destitute aged persons for ensuring their food security.

<p>Meetings, FGDs</p>	<p>Govt. Social security schemes & programmes, Organising the aged and making groups. Problems faced at family and community levels. Participation in meetings. Needs discussed and identified-Cooperation within the family. Exploitation from Middlemen reduced, processes made more transparent (15 people had given money (up to Rs. 2000/ per person) to middlemen to avail OAP and schemes before the project, Thiruvannamalai, T.N)</p>	<p>People started demanding their rights (i.e. pension in the target villages.76 people out of 152 received pension (4 villages, Meddak, A.P.) one day care centre has been initiated by peringara GP of PTA dist catering to the needs of 40 - 60 vulnerable old of 2 wards. One community centre at Akkavaram village, Khammam, A.P, was sanctioned by project officer, ITDA. One bore well was sanctioned in Chatti, Khammam, A.P.Fees for public address system was waived off by the police in Bhadrachalam, Khammam, A.P. Seventy five out of 200 applicants in 4 villages received OAP of Rs. 400/pm (WARM, Thiruvannamalai,T.N.)</p>	<p>They are relatively aware of SSS for the aged in Medak.Other agencies have taken up the issue of the aged in their areas. PRI from other neighbouring GPs had discussions with TSSS on the issue of the aged.Fans of Film actor Chiranjeevi have distributed food items to the aged in Old age centre run by GSWA.</p>
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Rallies was a critical advocacy tool.

Now: Political parties (Chintur of Khammam, A.P.) are compelled to come to the people and talk about their schemes and entitlements. Earlier: this was done without consulting the elders. Elders have demanded separate schemes from PRI institutions in the target village in PTA dist. of Kerala. (i.e. day care centres)

70 of 210 applicants were sanctioned OAP and 57 in process from 3 villages of Bellary (Abhivruddi). 86 OAP sanctioned out of 600 applicants in 3 villages, Thiruvallur, T.N. (Share & Care) 3 out of 6 day care centres received free drinking water supply from 3 Gram Panchayat. Thiruvallur, T.N. (Share & Care) 106 out of 200 applicants were sanctioned OAP in 2 GPs of Wayanad district. PRI providing Special Health kits to Vulnerable old aged in 2 GPs of Wayanad district. Union of the old aged people formed in 2 GPs of Wayanad district. 86 out of 216 of 2 villages have applied for OAP and are in the process of sanctioning (KDDC, Karwar, Karnataka). Eight ESHGs formed with 79 members in 2 villages in Karwar. Ten senior citizen leaders elected and capacitated in 5 villages (2 each from a village) to represent and take up the issues of the aged, Khammam. 58 out of 120 applicants were sanctioned OAP in 2 GPs of Wayanad district. PRI providing Special Health kits to Vulnerable old aged in 2 GPs of Wayanad district. Union of the old aged people formed in 2 GPs of Wayanad district.



Promoting a rights based approach

NETWORKING AND LINKAGES WITH VARIOUS STAKEHOLDERS

The networking, though at a minimal level, has been one of the key activities of the project. The CSO partners have networked with various stakeholders like political leaders, educational institutions, religious institutions, etc. The details are given in table 10 below.

Table 10: Network and linkages with various stakeholders

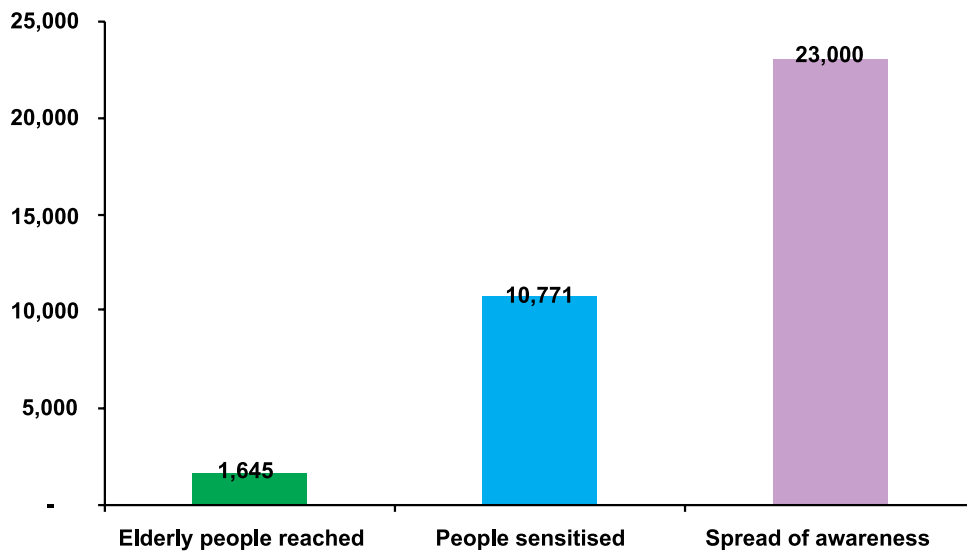
Sl.	Name of CSO	NGOs	Political leaders	Government	Educational Institutions	CBOs	Religious Institutions	PRIs	Corporates	Banks	Financial Institutions	Clubs	Hospitals
1	GSWA	y	y	y	y	y	Masjid committees.	y					Y
2	WARM	y	y	y	y	y		y		y		Lions	Y
3	Share & Care	y	y	y	y	y	Hindu, Christian, Muslim	y	Company's	y		Lions	Y
4	Nav Jyoti	Y	Y	Y	Y	Y		Y				Lions	Y
5	KDDC	Y	Y	Y	Y	Y	Church	Y	solaris champtech ltd	Y		LionsRotary	Y
6	MASSS	Y	Y	Y	Y	Y	Church	Y		Y		Rotary	Y
7	TSSS	Y	y	y	y	y	church, SNDP	Y				Rotary	Y
8	Abhivrudhi	Y	y	y	y	y		Y					Y

PROJECT RESULTS AND IMPACT

PROJECT RESULTS

More than 1645 elder families were reached directly through the project. These are specific family level inputs to the elders from eight project locations. It is very difficult to look at the project results in the wide spectrum of activities conducted by the project. However, a modest attempt has been made to estimate the reach. The total reach is depicted in Figure 10.

Figure 10: Intensive and extensive reach in project districts



The reach through sensitization covered more than 10,800 persons across the project area. However, the reach through awareness rally and other mass education programmes reached at least 23,000 persons. For instance, the details through awareness march/rally have been given in table 11.



Reacting out one to one

Table 11: People reached through Awareness March/ rally

		March	Rally	Pad-ayatra	Partici-pants	Direct			Indirect		
						March	rally	pad-ayatra	March	rally	pad-ayatra
1	GSWA	0	2	1	Aged		136	110	5000		
					Adults		60				
					Youths		17	18			
2	Share & care	1	2		Aged	60	490		3000		
					Adults	120	1360				
					Youths	0					
3	Warm	1	3		Aged	2000 mem-bers	1000		4000		
					Adults						
					Youths		450				
4	Ab-hivrudhi	1	2		Aged	250	1000		2000		
					Adults						
					Youths						
5	MASSS	0	1		Aged		83		2430		
					Adults		42				
					Youths		0				
6	TSSS	0	1		Aged		80		3000		
					Adults		440				
					Youths						
7	KDDC	4	1		Aged	1000	80		4000		
					Adults	1000	300				
					Youths						
8	Nav Jyoti		1		Aged		800		2000 in stages		
					Adults						
					Youths						
		7	13	1							

One of the key success levers for achieving good results and optimizing reach was the involvement of SHG members and leaders in the implementation of the project. The wide spectrum of support offered by the SHG members has been presented below. Also, involvement of SHGs has evolved as one of the strongest ways to work with the poor elders. All CSO partners have involved these set of vibrant CBOs to take the issues of the aged forward. Some of the project partners are also in the process of forming elder SHGs for collectivizing the aged. These are important results and learning of the project for dimensioning the future advocacy efforts of the aged. The robustness of the participation of the SHG leaders and members has been captured in the form of a matrix below.

Table 12: How SHGs helped the old people.

S. No	CSO Partners	House visits	Motivate	Accompany	Share IGP experience	Gave Items for IGP to old people	Kitchen garden
1	GSWA	✓					
2	Share & care	✓	✓	✓	✓		
3	Warm	✓	✓	✓		✓Petty shop	✓
4	Abhivrudhi	✓	✓	✓			
5	MASSS	✓	✓	✓			
6	TSSS	✓	✓	✓			
7	KDDC	✓	✓	✓	✓	✓ Poultry	✓ Seeds
8	Nav Jyoti	✓	✓	✓	✓		

The details of participation received by the project had been summarized project-wise in a tabular form and have been attached with this report as Annex-1.

ENTITLEMENTS MOBILIZED

The village level action and wider advocacy efforts have helped the project to access valuable services for the poor elderly persons. These mainly include access to OAPs, eye operations mobilized etc. The approximate yearly value of entitlements mobilized comes to two million rupees. The details are given in table 13.

Table 13: Details of old entitlements accessed and mobilized

Details	Units	Corresponding amount
Eye operations	132	198,000.00
Old Age Pension	552	1,513,920.00
Indira Awas Yojana	8	160,000.00
Health kits	200	10,000.00
Annapurna	96	20,736.00
Total	988	1,902,656.00

Entitlement mobilization has just begun only. It is expected that the mechanisms put in place by the partners would result in more and more number of entitlements being mobilized. A brief summary of the status has been given below.

Table 14: Status of various memorandum and application filed by the CSO partners

Sl. No	Name of the agency	Memorandum	Progress
1	GSWA	Coordinated attempts to include all tribal aged under the social pension programme	Political leaders and others are being involved for taking up the cause of the tribal old forward
2	WARM	Memorandum for 150 elders for pension submitted to Tahsildar of Chengam	75 received pension and the remaining applications are being followed up.
3	Share & Care	200 gave to Tahsildar 600 motivated	Motivated aged are being helped to apply for social security pension.
4	Nav Jyoti	Memorandum for 152 elders for pension submitted to MLA Dubbak Chengam	76 got and the remaining is in the process.
5	KDDC	216 to Tahsildar Karwar	5 received pension 80 under process 80 ID cards
6	MASSS	Memorandum for 120 old age people for pension submitted to Secretary Vellamunda & Thondarnadu Grama Panchayaths	58 received pension and the remaining are being followed up.
7	TSSS	Worked with PRIs to make special provisions for caring for the aged other than the central government sponsored programmes	An old age day care centre has been opened by the local PRI for the support of the aged in the villages.
8	Abhivrudhi	210 to tahsildar	70 received 57 under progress

RESOURCES MOBILIZED BY THE CSO PARTNERS FOR THE PROJECT

One of the significant shortcomings of the project was its low budget and eight project locations. The sanctioned project budget was too low so that the CSO partners were compelled to make own contributions as well as mobilize resources from other stakeholders. As a result substantial resources were mobilized from various sources. It is encouraging to note that the commitment and dedication shown by the CSO partners in taking the project activities forward was commendable. The resources mobilized by the CSOs to run the project has been estimated roughly and presented below in table 15.

The local contributions were mainly in the form of dedicated staff, coordinators and volunteers for implementing the project by the CSO partners. It has also become one of the significant learnings that a project of this kind would require dedicated field and managerial staff throughout the period of the project and one year is too short a period for demonstrating learning and results.

Table 15: Details of local contribution mobilized by the CSO partners for implementing the project

Description	Navjyoti	WARM	GSWA	TSSS	MASSS	KDDC	Abhivruddi	Share & Care	Total
	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount
Personnel									
Coordinator (part time)	12000	30000		4500	-	-	-	6000	52500
Volunteers	12000	20000	7800	4500	-	-	-	8000	52300
Experts		1300	5000		-	-	-		6300
Material									
									0
Conference rooms	3600	8500			-	-	-	1000	13100
Infrastructure and facilities used	-	-	-	-	-	-	-	3500	3500
Medical Camps	-	-	-	28000	-	-	-		28000
Sensitization programmes	-	-	-	4800	-	-	-		4800
Musical Instruments	-	3250	-	-	-	-	-		3250
Electricity	-	1300	-	-	-	-	-		1300
health kits	-	-	-	-	-	-	-		0
IEC	-	-	-		-	-	-	1300	1300

Stationery	-	-	-	800	-	-	-		800
Street plays	-	-	-	6800	-	-	-		6800
Awareness march	-	-	-	7200	-	-	-		7200
Hoardings and Mike announcement	-	-	-	3200	-	-	-	300	3500
Vehicles for publicity	-	-	15050	1500	-	-	-	5000	21550
Media Involvement	-	-	-	-	-	-	-		
Total Mobilization	27600	64350	27850	61300	-	-	-	25100	206200

OVERALL PROJECT IMPACT

- The major impact of the project has been significant degree of awareness generation amongst elders, community and stakeholders in understanding the importance of developing a community based system for the care of the vulnerable elders.
- This Advocacy Initiative Project has provided great motivation to all the eight CSO partners and is able to leverage critical resources to make the project a great success.
- Community and CBOs are central to the development of a caring system for the aged.
- CBOs can play catalytic role in working for the rights of the elderly.
- Old age rights need to go beyond social security pensions. The nature of problems and ageing need much more robust and dynamic systems that go beyond pensions schemes. The overall aim should be to improve the quality of life of the aged. The project has made initial efforts in mobilizing health care services, training in legal aid, and training in income - generation activities to holistically address the issue of caring for the aged.
- Linkage with government departments for old age pension, welfare schemes and helping the aged to get health and other services from the government are critical impact level learnings. Majority of the eligible older persons are deprived of the Government Schemes due to the inefficient bureaucratic practices and lack of voluntary support mechanisms in place.

FUTURE DIRECTIONS

- The project funding and duration was inadequate to address larger issue of advocacy like the increasing size of the aged, increase in life expectancy and the growing size of the aged in the age group of 70 and 80 plus. The literature review given at the beginning of this report throws adequate light on this aspect.
- The aged is going to be a significant proportion of our total population. This would essentially require a re-look at the existing social security mechanisms in place for the aged and make appropriate policies to cover the health and total well-being of the aged.
- Long-term sustained approaches are required to take care of aged people by putting in institutional mechanisms in place.
- Regular Age Demand Action Campaign had worked in accessing entitlements of the aged.
- The Gram Panchayats are critical local functionaries in place who could drastically improve the quality of life of the aged through innovative programmes. The PRIs opening a day care centre for the aged is a beginning in itself!
- Elders Self Help Groups to be formed to increase the collective strength, and voices of the elderly and also make them independent.
- In order to make the older people self-supportive, Income Generation Programs needs to be initiated. The able-bodied older persons could be provided with training and suitable business plan activity to enable them to make a decent income and live with respect and dignity.
- It is mandatory to sensitize the implementing authorities and the policy makers on the various issues faced by the older persons and the need to extend support to them.
- The issue of growing segment of aged population and their survival issues need to be researched thoroughly for facilitating appropriate policy level interventions based on empirical data.

IMPORTANT LEARNINGS FROM THE PROJECT: A SUMMARY

MOBILIZING SUPPORT FROM THE GOVERNMENT MACHINERY FOR SECURING RIGHTS OF THE ELDERLY?

- Attitude is difficult to change
- Create an online database and automated payment disbursement system
- Delays in payment of pension
- ANMs to cover the elderly
- PHCs to have the provisions for treating the elderly including the referral system
- Organise platform for the elderly required
- ESHGs to be made formal.

IMPROVING THE CAPACITY OF THE ELDERLY FOR ADVOCATING THEIR CAUSE?

- Organised platform for the elderly required
- SSS are desirable
- Youths and students need to be sensitised
- Sensitising the service providers.

STAKEHOLDER PERCEPTIONS

- Resistance to change in terms of recognising their rights
- Single grand parents need special orientation
- Aged people do not have easy access to loans
- Aged may have a banking system of their own
- Need special packages for elderly having grand children to look after
- Village elder care committees
- Elders cooperatives may be promoted.

FUTURE PROGRAMME DESIGN SHOULD INCLUDE:

- Improving Access to services
- Formation of ESHGs
- Improving access to credit – a separate FI for the aged
- Bank transfer of pension
- Village based volunteers/ staff for caring the aged for house-to-house visits.
- Making the schemes reach all eligible elders
- Day care centre for the aged
- District as a coverage (scale up area of coverage)
- Health services to be improved through linkages
- Skills training and entrepreneurship for young at village level
- Create linkages with SHGs
- Sensitise Govt., PRI, police and NGOs
- Promote convergence of schemes (ideas)
- Create space for the aged to work
- Giving training to PRIs on elder care
- Creating model project with PRIs
- Geriatric care training to families
- Media involvement: special programmes on old age care
- Promote research on eldercare by linking academic and research institutions
- Website on state specific programmes and schemes by HI
- Motivate elders on LIC pension plan
- Help them to work for themselves
- Micro-insurance for the aged
- Local resource mobilisation
- Evolve a policy framework to rehabilitate displaced elders.

More micro level suggestions are given in annex-1.

KARWAR DIOCESAN DEVELOPMENT COUNCIL

STAKE HOLDERS	WHAT DID WE DO	ACHIEVEMENT	FUTURE ACTION
NGOs(1)	<ul style="list-style-type: none"> <input type="radio"/> Narrated the cause of the CHC project <input type="radio"/> Sought resource assistance <input type="radio"/> Built linkage 	<ul style="list-style-type: none"> <input type="radio"/> Availed of printed materials 	<ul style="list-style-type: none"> <input type="radio"/> Tie-up for resource material development
Political leaders	<ul style="list-style-type: none"> <input type="radio"/> Narrated the cause of the CHC project <input type="radio"/> Sought support for the programmes <input type="radio"/> Routed the appeals and petitions of the elderly to be presented to the D.C. & Tahsildar <input type="radio"/> Invited for the public programmes 	<ul style="list-style-type: none"> <input type="radio"/> Extended their support by allowing the public community hall to use for programmes & trainings <input type="radio"/> Assured to followup the appeals with the D.C. & Tahsildar 	<ul style="list-style-type: none"> <input type="radio"/> Establish a cordial relationship
Govt.	<ul style="list-style-type: none"> <input type="radio"/> Contacted the women & child development department seeking information on various schemes for the senior citizens <input type="radio"/> Contacted Deputy Commissioner and sought cooperation for the advocacy programme and submitted appeals and petitions of the elderly <input type="radio"/> Contacted the Tahsildar for identity cards and old age pension <input type="radio"/> Contacted police dept. for using vehicle for announcements, use of loud speakers and police protection during rallies and awareness march <input type="radio"/> Contacted Municipality for displaying and putting up banners 	<ul style="list-style-type: none"> <input type="radio"/> Availed scheme information <input type="radio"/> Got the memorandum, appeals & petitions processed from the DC <input type="radio"/> DC extended wholehearted cooperation for the advocacy programme <input type="radio"/> Tahsildar himself attended the public programmes the assured his full support and prompt action on the appeals & petitions <input type="radio"/> Tahsildar also processed few of the applications for the old age pension whose documents were clear and arranged for prompt delivery of old age pension for 5 people <input type="radio"/> Police department granted free permission for the use of vehicle, loudspeakers and extended police protection during rallies & awareness march <input type="radio"/> Municipal commissioner granted free permission for putting up banners 	<ul style="list-style-type: none"> <input type="radio"/> Continue establishing a firm linkage <input type="radio"/> Invite DC & other officials for the programmes <input type="radio"/> Getting processed the appeals
Edn Inst	<ul style="list-style-type: none"> <input type="radio"/> Contacted a private education society to utilize their college auditorium for awareness programmes 	<ul style="list-style-type: none"> <input type="radio"/> The auditorium was given free of cost to conduct various programmes in Binaga 	<ul style="list-style-type: none"> <input type="radio"/> Continue establishing a cordial linkage and relationship

CBOs	<ul style="list-style-type: none"> <input type="radio"/> Sought the support of the local CBOs to identify, motivate the elderly <input type="radio"/> Sought support to organize public programmes <input type="radio"/> Sought support to motivate the elderly to form their own SHG <input type="radio"/> Sought support the income generating activities of few of the elderly <input type="radio"/> Local youth group was contacted to stage a street play with script and action 	<ul style="list-style-type: none"> <input type="radio"/> Motivated and facilitated KDDC Community Development Workers to motivate and identify the elderly <input type="radio"/> Organized public programmes, awareness march, rallies and other programmes <input type="radio"/> Some SHG members gave free chicks to the elderly to initiate income generating activity <input type="radio"/> Motivated the elderly to form their own SHG narrating their own experiences <input type="radio"/> Amdalli youth group staged the street play 	<ul style="list-style-type: none"> <input type="radio"/> Continue establishing a cordial linkage and relationship <input type="radio"/> Use these CBOs as a sustainability means to continue the advocacy programme for the elderly and other disadvantaged people
Rel. Inst	<ul style="list-style-type: none"> <input type="radio"/> Sought the support of local parish priest to lend the church hall for the programmes <input type="radio"/> Again sought his cooperation to address the people regarding the issues of the elderly and how they have to be respected 	<ul style="list-style-type: none"> <input type="radio"/> Gave the church hall free of charge to organize all the programmes those were held in Binaga village except the large public programmes due to lack of space <input type="radio"/> The local priest was in the forefront of all the activities guiding and directing the people including the organizers <input type="radio"/> Attended all the programmes and delivered speeches and extended whole hearted support 	<ul style="list-style-type: none"> <input type="radio"/> Continue establishing a cordial linkage and relationship
PRIs	<ul style="list-style-type: none"> <input type="radio"/> Contacted the PRIs for information about the village population <input type="radio"/> Contacted to narrate various schemes taken up. They are being the people's representatives at the local level they were requested to lead their people <input type="radio"/> Contacted PRI to for utilizing the GP hall for the programmes 	<ul style="list-style-type: none"> <input type="radio"/> Delivered the required information <input type="radio"/> Gave the GP hall free of charge for the programmes <input type="radio"/> PRI members attended all the programmes and guided and lead the people <input type="radio"/> Facilitated to identify the vulnerable elderly <input type="radio"/> Assured their full co-operation for furthering the noble cause and process and deliver all the required documents for the elderly to enable them to avail of the benefits 	<ul style="list-style-type: none"> <input type="radio"/> Continue establishing a cordial linkage and relationship <input type="radio"/> Use the PRIs as a sustainability means to continue the advocacy programme for the elderly and other disadvantaged people

Corporate	<input type="radio"/> Contacted SCL, Binaga for cost sharing of the advocacy programme and health related camps	<input type="radio"/> Extended financial support for conducting the activity	<input type="radio"/> Continue establishing a cordial linkage and relationship. Use the company as a sustainability means to continue the advocacy programme for the elderly and other disadvantaged people
Banks	<input type="radio"/> Contacted Syndicate Bank for cost sharing of the advocacy programme and health related camps	<input type="radio"/> Extended financial support for conducting the activity	<input type="radio"/> Continue establishing a cordial linkage and relationship <input type="radio"/> Use the bank as a sustainability means to continue the advocacy programme for the elderly and other disadvantaged people
Clubs	<input type="radio"/> Contacted the Lions & Rotary clubs to organize health checkup camps, eye checkup camps and eye operations in collaboration	<input type="radio"/> Partnered with KDDC to organize health checkup camps, eye checkup camps and eye operations in collaboration	<input type="radio"/> Continue establishing a cordial linkage and relationship <input type="radio"/> Use these clubs as a sustainability means to continue the advocacy programme for the elderly and other disadvantaged people
Hospitals	<input type="radio"/> Contacted to assist in organizing health checkup camps, eye checkup camps and eye operations in collaboration	<input type="radio"/> Provided the services of the doctors and nurses <input type="radio"/> Provided infrastructure and medicines	<input type="radio"/> Continue a strong and cordial relationship and linkage to help many more in the days to come
Lawyers	<input type="radio"/> Contacted to deliver legal services for the elderly	<input type="radio"/> Lawyer Sandhya took out time to come to the legal aid training and address the elderly	<input type="radio"/> Continue a strong and cordial relationship and linkage to help many more in the days to come

ABHIVRUDDI SOCIETY FOR SOCIAL DEVELOPMENT

stakeholder	What we did	Achieved	Future
NGOs	<ul style="list-style-type: none"> <input type="radio"/> Linkage with other NGOs helped in gathering good knowledge, utilizing the resources, and identification of vulnerable elderly 	<ul style="list-style-type: none"> <input type="radio"/> Involved 2 NGOs and they helped in providing trainings to the elderly and youth on various issues and also involved in street plays etc. 	<ul style="list-style-type: none"> <input type="radio"/> Promote linkages with more agencies.
Politicians	<ul style="list-style-type: none"> <input type="radio"/> Involved them in awareness campaigns and develop linkages 	<ul style="list-style-type: none"> <input type="radio"/> Helped in influencing the government officials in influencing the schemes and increasing the number of beneficiaries and helped in mobilizing local resources. 	<ul style="list-style-type: none"> <input type="radio"/> Mobilize more resources using the politicians to influence the government and community
Government	<ul style="list-style-type: none"> <input type="radio"/> Involved them in seminars and workshops as resource persons <input type="radio"/> Memorandum for OAP submitted to tahsilidar 	<ul style="list-style-type: none"> <input type="radio"/> Helped in accessing the entitlements (110 elders received OAP) <input type="radio"/> Received permissions for campaigns and mass meets 	<ul style="list-style-type: none"> <input type="radio"/> In future involve higher officials
Educational institutions	<ul style="list-style-type: none"> <input type="radio"/> Involved them in survey, awareness campaigns <input type="radio"/> Students, teachers etc. participated in various programmes 	<ul style="list-style-type: none"> <input type="radio"/> Helped in data collection, <input type="radio"/> Participated in campaigns 	<ul style="list-style-type: none"> <input type="radio"/> Involve them in campaign to create inter-generation bonding
CBOs	<ul style="list-style-type: none"> <input type="radio"/> Involved the CBO members in various activities 	<ul style="list-style-type: none"> <input type="radio"/> Helped in mobilizing facilities like conference halls for the meeting. <input type="radio"/> Helped in sensitizing the CBO members in issues of the elderly 	<ul style="list-style-type: none"> <input type="radio"/> Involve CBOs in programme implementation and monitoring
PRI	<ul style="list-style-type: none"> <input type="radio"/> Discussed the issues of the elderly and programme activities at the panchayat level 	<ul style="list-style-type: none"> <input type="radio"/> Received permission for meetings. PRI representatives participated and encouraged the activities. Recommended the applications for OAP 	<ul style="list-style-type: none"> <input type="radio"/> Involve more PRI representatives in future programmes
Hospitals	<ul style="list-style-type: none"> <input type="radio"/> Involved them in health awareness programme. Encouraged regular contact with the community regarding health issues. Utilizing the resources available with the govt. and private hospitalsInvited the doctors as resource persons 	<ul style="list-style-type: none"> <input type="radio"/> Conducted one health checkup camp and one health awareness camp 	<ul style="list-style-type: none"> <input type="radio"/> Get more support from these institutions for the elderly people.

GIRIJANA SEEMA WELFARE ASSOCIATION

stakeholder	What we did	Achieved	Future
Voluntary organisations	<ul style="list-style-type: none"> <input type="radio"/> Jointly organised Padayatra. <input type="radio"/> All jointly planned, human resources shared and now and then infrastructure/material resources shared. <input type="radio"/> HelpAge funded/facilitated. 	<ul style="list-style-type: none"> <input type="radio"/> Increased success and Solidarity. <input type="radio"/> Confidence <input type="radio"/> Effective planning. Details, logistics <input type="radio"/> Ideas/resource mobilisation. 	<ul style="list-style-type: none"> <input type="radio"/> Planning larger broadcasting 100% coverage in the Eastern Ghats. <input type="radio"/> Together we are strong and success is sure.
Political Leaders	<ul style="list-style-type: none"> <input type="radio"/> Invited all programs, Trg and workshop. 	<ul style="list-style-type: none"> <input type="radio"/> Processing of applications. <input type="radio"/> Influencing without conflict, officials. <input type="radio"/> Negative turned positive, convergence of political leaders for a cause. 	<ul style="list-style-type: none"> <input type="radio"/> Reverse Osmosis. We live with them for their convergence.
Govrnt/Officials	<ul style="list-style-type: none"> <input type="radio"/> ...do... <input type="radio"/> Got positive recommendations from higher ups, without antagonizing lower rung. 	<ul style="list-style-type: none"> <input type="radio"/> Got pensions, day care shed, anapurna and housing schemes, <input type="radio"/> We could influence them to counsel family members and learn better handling of Government procedures. 	<ul style="list-style-type: none"> <input type="radio"/> We can now slowly influence them to improve their policies and eliminate inherent contradictions.
Edn Institution.	<ul style="list-style-type: none"> <input type="radio"/> Met the College students in Bhadrachalam soughts help. 	<ul style="list-style-type: none"> <input type="radio"/> They fully helped as Volunteers in the trg, workshop, helping Elderly to go around their nature calls, scouting etc Students Volunteered and scouted Elderly patients. 	<ul style="list-style-type: none"> <input type="radio"/> Resource mobilisation and volunteerism
CBO	<ul style="list-style-type: none"> <input type="radio"/> Involving SHGs through VELUGU 	<ul style="list-style-type: none"> <input type="radio"/> Got material resources in kind. 	<ul style="list-style-type: none"> <input type="radio"/> Involve them to converge at Panchayath level under Youth Leadership.
Religious bodies.	<ul style="list-style-type: none"> <input type="radio"/> Local Muslim Masjid committee is active contributor. 	<ul style="list-style-type: none"> <input type="radio"/> Resources 	<ul style="list-style-type: none"> <input type="radio"/> Religious harmony and elders lead.

NAVAJYOTHI YOUTH CLUB

Stakeholder	What we did	Achieved	Future
NGOs	<ul style="list-style-type: none"> Invited for the rally 	<ul style="list-style-type: none"> Rally was organized well with their participation. More elderly people participated. They came to know about the advocacy issues of the older people. 	<ul style="list-style-type: none"> They also wanted to implement similar programmes in their field areas.
Politicians	<ul style="list-style-type: none"> Invited for awareness march and mass meet (MLA as chief guest). Memorandum was submitted to MLA for OAP and reduction of age from 65 to 60 for OAP eligibility. 	<ul style="list-style-type: none"> 76 out of 152 applicants were sanctioned OAP. 	<ul style="list-style-type: none"> Plan to get more OAP sanctioned to eligible elderly. Advocacy for age reduction from 65 to 60 for OAP eligibility criteria.
Government	<ul style="list-style-type: none"> MRO, Police Officials and Bank Officials were invited for the mass meet. 	<ul style="list-style-type: none"> MRO showed interest in sanctioning of houses under IAY. Police dept. promised to protect the rights of the elderly in their area. 	<ul style="list-style-type: none"> Follow up is needed.
Educational institutions	<ul style="list-style-type: none"> Invited in programmes like rally, mass meet, street play and in publicity vans. 	<ul style="list-style-type: none"> Participating students got aware on elderly rights. They promised to take care of their grand parents rights and sentiments. 	<ul style="list-style-type: none"> To conduct awareness campaigns and workshops on elderly rights with students and youth.
CBOs	<ul style="list-style-type: none"> Invited to participate in rallies, house visits and awareness meets. 	<ul style="list-style-type: none"> CBOs helped in identification of vulnerable elders. They got aware on elderly rights. It helped them to reduce the issues faced by the elderly in their families. 	<ul style="list-style-type: none"> Train the CBO leaders on the rights of the elderly. Dissemination of information through CBOs initiating IGA for elderly with the support of the CBOs.
PRIs	<ul style="list-style-type: none"> Invited the PRI representatives to participate in rally and mass meet. 	<ul style="list-style-type: none"> Received the support of the PRIs. Elders got a platform to demand their rights. 	<ul style="list-style-type: none"> Establish good rapport with them to our programmes. Make them sensitive to elders so as to utilize the various govt. schemes. Advocate meetings.
Clubs	<ul style="list-style-type: none"> Meetings were conducted on old age issues and health problems. Involved them in rally. 	<ul style="list-style-type: none"> 96 elders underwent eye operations. 	<ul style="list-style-type: none"> They said that they will focus more on the elderly.
Hospitals	<ul style="list-style-type: none"> One to one meetings were organized with the support of nursing homes. Invited to seminars to talk on old age health issues. 	<ul style="list-style-type: none"> Free services were provided to elders in Dubak. Doctors participated in health awareness meetings. 	<ul style="list-style-type: none"> Maintain similar linkages in future also.

WELFARE ASSOCIATION FOR THE RURAL MASS (WARM)

Stakeholders	What did we do	What did we achieve	Future prospects
NGOs 3 NGOs contacted	<ul style="list-style-type: none"> ○ Organized Meeting to discuss about issues of older persons 	<ul style="list-style-type: none"> ○ Sensitized the agencies on the various programmes available for the older persons 	<ul style="list-style-type: none"> ○ Follow up will be done and these agencies will be motivated to take up projects for older persons in their areas
Political Leaders	<ul style="list-style-type: none"> ○ Invited them to awareness march and rallies and sensitization workshop 	<ul style="list-style-type: none"> ○ They were able to interact with the older persons and know about their problems. ○ They had given assurance to address the issues of the poor older persons ○ Good publicity was created due to their participation 	<ul style="list-style-type: none"> ○ Continue to follow up on the OAP application form for processing. Involve them more frequently in the programmes. Request them to raise the issues of elderly in the meetings.
Government	<ul style="list-style-type: none"> ○ Invited the government officials (Assistant Collector), BDOs and Project Officers of Women Development Corporation to the programmes 	<ul style="list-style-type: none"> ○ They were sensitized on the issues of the elderly. ○ Memorandum was submitted seeking for Social Security Schemes. ○ Sanctioned OAP to 75 elders. 	<ul style="list-style-type: none"> ○ Regular follow up (WARM staff and CBO leaders) on getting OAP for the remaining applications pending. Request them to increase allocation for elderly in the budget and obtain projects
Educational Institutions	<ul style="list-style-type: none"> ○ Motivated students to participate in the rallies and marches. ○ Addressed the students on the inter generational bonding ○ Teachers from different schools participated in providing training to SHG members on taking care of the elderly. 	<ul style="list-style-type: none"> ○ Increased awareness on the importance of the older persons in the families. ○ Students themselves came forward to participate in the programs organized for the elderly. 	<ul style="list-style-type: none"> ○ Frequent interaction between the students and the elders. ○ Intergenerational programmes to be organized in the schools.
CBOs	<ul style="list-style-type: none"> ○ Orientation to the community members on the problems and issues of elderly was discussed 	<ul style="list-style-type: none"> ○ Elders are being given better care and not neglected. 	<ul style="list-style-type: none"> ○ Joint family system will be promoted through trainings and street plays.

PRI's	<ul style="list-style-type: none"> ○ Counselors and Panchayat President were invited for the rallies and marches. 	<ul style="list-style-type: none"> ○ They were able to recommend the OAP application form to higher officials. ○ The Panchayat President came forward to offer the community hall for organizing programmes for the older persons 	<ul style="list-style-type: none"> ○ They will be involved in the programmes organized for older persons.
Banks	<ul style="list-style-type: none"> ○ Managers of Indian Bank and Primary Agriculture Cooperative Banks were invited for the training and sensitization workshops 	<ul style="list-style-type: none"> ○ They were sensitized on the plight of the elders. ○ They were also oriented that older persons can form into groups, save, avail credit and repay. 	<ul style="list-style-type: none"> ○ Elders Self Help groups would be formed and linkages with the banks would be worked out
Clubs	<ul style="list-style-type: none"> ○ President of Lions Club (Chengam) was invited to the orientation programme 	<ul style="list-style-type: none"> ○ 13 cataract surgeries were performed sponsored by the Lions club ○ Lions club had agreed to organize eye screening camps in the target villages 	<ul style="list-style-type: none"> ○ This would be followed up and more eye camps will be organized and surgeries performed. ○ Wherever possible other forms of donations would be raised for elders.
Hospitals	<ul style="list-style-type: none"> ○ Facilitated two general health camps and elders in the target community were encouraged to participate 	<ul style="list-style-type: none"> ○ Increased awareness on the healthy living and hygiene ○ Free medicines were distributed 	<ul style="list-style-type: none"> ○ Facilitate in organizing Multi Specialty camps in the Chengam Block to cover more older persons. ○ Donations will be raised for distributing disability aids (walking sticks, walkers, hearing aid)

SHARE AND CARE CHILDREN'S WELFARE SOCIETY

Stakeholders	What did we do	What did we achieve	Future prospects
NGOs: 6 NGOs contacted	<ul style="list-style-type: none"> ○ Had meeting on advocacy for elders ○ Discussed various methods used ○ Sought their participation 	<ul style="list-style-type: none"> ○ Participated in seminars, workshops and rallies ○ Informed their staff – villages brought old people for various programmes ○ One NGO provided food to 150 elders 	<ul style="list-style-type: none"> ○ Joint action to form elders groups – 6 groups formed – co-operated in applying for pension – to start old age home for the destitutes.
Political Leaders	<ul style="list-style-type: none"> ○ Contacted them – 5 major parties – invited ruling party leader to address meeting – represent to government and taluk and collector office to speed up the sanction of SSS 	<ul style="list-style-type: none"> ○ They participated in seminars, rallies, and workshops. ○ Met govt officials. 	<ul style="list-style-type: none"> ○ Political leaders will be in regular contact to influence Panchayat leaders for its care of elders to get help for new old age home and IGP
Government	<ul style="list-style-type: none"> ○ Contacted revenue department for pension ○ Explained the prevailing of corruption ○ Police department to treat the aged in humanistic way ○ Transport department to treat aged to get seat in bus ○ Health to give priority in treating elders and Postal ○ To avoid taking money from pension amount. 	<ul style="list-style-type: none"> ○ Speeded up in processing pension applications ○ Granted pension in shorter period (within 3 months) ○ Middle men under vigilance – police started changing their attitude towards elderly – hospital ○ Elders waiting time reduced, good care is provided and in postal a few refused to accept tips from pension amount. 	<ul style="list-style-type: none"> ○ Regular tie up with revenue department for securing schemes ○ Hospitals to come forward and provide cataract surgeries.
Educational Institutions	<ul style="list-style-type: none"> ○ Contacted schools (higher medium) to conduct meeting for students regarding their duties for the aged ○ Participation of students in rallies – to form students club for aged – to depute teachers for the seminars. 	<ul style="list-style-type: none"> ○ 3 schools had meeting regarding age care – 4 schools permitted students to participate in workshops and rallies – 1 school formed students club for age care 	<ul style="list-style-type: none"> ○ To start students club for age care – to conduct competitions for students to highlight their duties and responsibilities for the aged.

CBOs	<ul style="list-style-type: none"> <input type="radio"/> Contacted CBOs for their cooperation to identify the aged, vulnerable aged – their participation in workshops and seminars. 	<ul style="list-style-type: none"> <input type="radio"/> Extended cooperation – referred the aged for health care – participated in seminars. 	<ul style="list-style-type: none"> <input type="radio"/> To make use of them for future age care programmes.
Religious Leaders	<ul style="list-style-type: none"> <input type="radio"/> Met the church priest, temple and mosque – make them give more messages on care of the aged 	<ul style="list-style-type: none"> <input type="radio"/> They spoke about the rights and duties towards elders in their places of workshops – participated in seminar and rallies 	<ul style="list-style-type: none"> <input type="radio"/> Regular contact to discuss on the elders problems and support to be provided.
PRI's	<ul style="list-style-type: none"> <input type="radio"/> Contacted 12 panchayats, 2 chairmans of Panchayat unions and BDOs to identify the elderly application for pension – participation in rallies. 	<ul style="list-style-type: none"> <input type="radio"/> The community participated in rallies and workshop 	<ul style="list-style-type: none"> <input type="radio"/> Follow up to be made on the demands placed.
Corporates	<ul style="list-style-type: none"> <input type="radio"/> Contacted 3 companies for sponsorship 	<ul style="list-style-type: none"> <input type="radio"/> One company sponsored lunch for 300 OP 	<ul style="list-style-type: none"> <input type="radio"/> To get sponsorship for elders programme.
Banks	<ul style="list-style-type: none"> <input type="radio"/> To participate in the formation of 5 SHG for IGP linkages 	<ul style="list-style-type: none"> <input type="radio"/> 5 SHG opened bank account 	<ul style="list-style-type: none"> <input type="radio"/> To form more SHG
Clubs	<ul style="list-style-type: none"> <input type="radio"/> Lions Club – to conduct eye camp, cataract surgeries. 	<ul style="list-style-type: none"> <input type="radio"/> Consented to help. 	<ul style="list-style-type: none"> <input type="radio"/> To conduct two eye camps and medical camps in a year.
Hospitals	<ul style="list-style-type: none"> <input type="radio"/> To participate in seminars and workshop. <input type="radio"/> Health to old people to be given priority. 	<ul style="list-style-type: none"> <input type="radio"/> Participated in seminars and workshop. <input type="radio"/> 17 cataract surgeries done. <input type="radio"/> Priority given to old people. 	<ul style="list-style-type: none"> <input type="radio"/> To have regular medical check up for the aged.

BODHANA – TIRUVALLA SOCIAL SERVICE SOCIETY

Stakeholders	What did we do	What did we achieve	Future prospects
Political Leaders	<ul style="list-style-type: none"> <input type="radio"/> Participation in programmes, discussed the issue and need to them. 	<ul style="list-style-type: none"> <input type="radio"/> Advocacy support. 	<ul style="list-style-type: none"> <input type="radio"/> Advocacy and policy level support.
Government	<ul style="list-style-type: none"> <input type="radio"/> Sought the support to fill the gaps in old age pension. 	<ul style="list-style-type: none"> <input type="radio"/> Got 10 OAP 	<ul style="list-style-type: none"> <input type="radio"/> Utilising all possible schemes for the elderly..
Educational Institutions	<ul style="list-style-type: none"> <input type="radio"/> Street plays organized for them. 	<ul style="list-style-type: none"> <input type="radio"/> Institution has supported the programme by participation. 	<ul style="list-style-type: none"> <input type="radio"/> Participation of students, institutions – sponsorship programmes etc.
CBOs	<ul style="list-style-type: none"> <input type="radio"/> Ensured participation in survey, house visits, support in organizing medical camps, street play, rally, seminars etc. 	<ul style="list-style-type: none"> <input type="radio"/> Ownership of the programme. Positive change in attitude towards elderly in the community. 	<ul style="list-style-type: none"> <input type="radio"/> Participatory, community based rehabilitation programme.
Religious Leaders	<ul style="list-style-type: none"> <input type="radio"/> Sought support for the programme. 	<ul style="list-style-type: none"> <input type="radio"/> Logistic support to organise the programme, religious SHG participation. 	<ul style="list-style-type: none"> <input type="radio"/> Making them active stakeholders.
PRI's	<ul style="list-style-type: none"> <input type="radio"/> Advocacy for including programmes for the aged. Invited them for the programmes. 	<ul style="list-style-type: none"> <input type="radio"/> One Day Care Centre is sanctioned. 	<ul style="list-style-type: none"> <input type="radio"/> Laisoning more projects, programmes. Support of Kudumbasree through PRIs
Clubs	<ul style="list-style-type: none"> <input type="radio"/> Invited Rotary club to seminars and programmes. 	<ul style="list-style-type: none"> <input type="radio"/> Assured IGP support to the aged. 	<ul style="list-style-type: none"> <input type="radio"/> To grab IGP support and other programmes.
Hospitals	<ul style="list-style-type: none"> <input type="radio"/> Sought the support of Pushpagiri Medical College, District Ayurveda Medical Office. 	<ul style="list-style-type: none"> <input type="radio"/> Concurrent health check up support by the medical college assured. 2 Ayurveda medical camps conducted. 	<ul style="list-style-type: none"> <input type="radio"/> Utilising the rural medical team of Pushpagiri Medical College to cater to the health needs of the older people. More Ayurveda medical camps..