



# PODIUM

A Quarterly Newsletter by Prakhyata Abhinand Charitable Trust



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## FROM THE FOUNDER'S DESK

Reuban Daniel Chandrasekaran

Greetings to you from PACT India. In the last quarter, we lost many dear ones to COVID. Through the panic, we strived to sustain our core services to support those impacted the most.

The rise in the number of orphaned children in the last 1.5 years has created a need for trauma management and related services. We have joined hands with Hopeworks Foundation to provide physical and psychosocial support to children who have lost their parents to the COVID pandemic.

We are happy to share that we are now pre-incubated under IIMB's NSRCEL program. Our consistent efforts to partner with the government of Karnataka have also paid off. Our first collaboration is a COVID teleconsultation program for orphaned, abandoned, and surrendered children (OAS) children that covers 950 Child Care Institutes (CCI) across Karnataka. The government will also be our financial and strategic partner for the work with 5 Special Adoption Agencies (SAA).

We will also continue our work with the 6 CCIs identified earlier in Tamil Nadu and Karnataka.

Many thanks to the philanthropist who granted us ₹2.5 lakh to cover our operational and program costs of this year and 50% of the last year. This support has helped us sustain our mission. I also thank our individual donors, well-wishers, and volunteers for their support in the last quarter.

Recently, I lost my father, my strength in life. While many people supported me at this time, the pain of being an orphan was inescapable. The realization connected me even more deeply with the suffering of the OAS children. I am now more committed than ever to address their special needs, trauma, and care through PACT. With your blessings and support, we will make a difference in their lives.

# FEATURE ARTICLE

## Out of Sight - Orphaned, Abandoned and Surrendered (OAS) Children with Special Needs (CwSN)

Working at PACT has given me a glimpse into the lives of OAS children. Every day, their hope of getting adopted fades a little more. The OAS CwSN are affected the worst, as they are very aware and sensitive to their plight, the last pick for any adoption.

### **OAS children and OAS CwSN**

OAS CwSN do not receive much attention from prospective parents, a sad reality the children do not miss. It is estimated that out of 100 million OAS children globally, 1 in 20 children under 14 years suffers from moderate to severe disability.

These children grow to suppress their real emotions, believing themselves to be defective by birth and hence, different. Some are in denial which has its own behavioural outcomes. A few hide from judging eyes, thereby limiting their exposure to the outside world. Some give up and fall into depression. Very few believe in a silver lining.

### **Disability versus special needs**

All the children get labelled "disabled." Care homes provide limited aid for lack of awareness and the escalating cost of rehabilitative services. Eventually, the homes and the children accept the situation as "fate," unaware that most of their problems can be resolved to some degree if not completely.

Not every child with a special need is disabled. That perspective must change. An impairment that is a loss of a physiological or anatomical structure or part of the body, becomes a "disability" only when the person is not able to function in a range that is considered normal. For instance, if a child has a defective ankle, it is an impairment. It becomes a disability only when he/she is unable to stand or walk because of it.

Handicap is different. It is a situation when the disability or the impairment inhibits a person from fulfilling a role (Individual/ societal/ cultural) that is considered normal based on his/her gender and age. For example, not being able to go to school or play with other children.

It is often noted that the interchangeable use of these

terms affect perception. This perception can limit the person's potential, be it an opportunity to get treated or adopted.

### **Special needs management**

Management of impairment, disability, and handicap depends on the intensity of the condition. Children with slight impairments who do not face a high risk of developing secondary complications need no intervention. Other impairments can be surgically stabilized or corrected using simple assistive technology for the child to achieve normalcy. Children who are disabled or handicapped might need short- or long-term rehabilitation.

Childcare homes and prospective parents are not aware of the options available for these children. Disability itself is of varying types and severity and the treatment is not always complicated. Much can be corrected if identified early. Some children just require simple training or an exercise regimen to be followed religiously. Some however might require lifelong rehabilitation.

Being born with a severe disability is not the end of the world. Structured rehabilitation can maximize independence in daily activities. The key is how fast the children are identified and intervention sought. Screening camps are a great way of early identification.

Basic knowledge about disability can do wonders for both caregivers and parents. CwSN are not a burden. They just need a helping hand. Will you give it?

**Heavenna Babu, Sr. Consultant**



# PROGRESS UPDATES

Received approval on the program proposed to the Government of Karnataka. The ROOTS program for the rehabilitation of OAS children's trauma & special needs and the free doctor's teleconsultation services through specialist doctors to cover 950 CCIs across Karnataka are underway.

Reached out to donors and individuals to mobilize funds for our funding gaps of ₹2.85 L for the next 3 months for program and operational expenses.

Facilitated support for 6 childcare homes with ration kits, medicines, etc. as COVID relief

Supported 2 childcare homes with household articles such as fans, dining tables, and other furniture via the End Mile Connect program.

Signed an MOU with Hopeworks Foundation to address the physical and psychosocial needs of the OAS children due to COVID deaths of single or both parents.

Provided telerehabilitation services to 2 childcare homes.

Facilitated fitment of assistive devices such as calipers, crutches, and wheelchairs for 3 childcare homes.

Inducted into a pre-incubation social cohort program of IIM-Bangalore's NSRCEL.

Facilitated India Care Foundation's disinfection drive (as part of COVID Care initiatives) for over 10 childcare homes within Bangalore.

## OUR IMPACT

- Served 18 childcare homes.
- Provided rehab care support to 6 childcare homes.
- Sensitized 63 stakeholders on OAS CWSN Rehab.
- Screened 150+ children.
- Rehabilitated 28 CWSN in childcare homes, providing 272 services directly each month and indirect service during the lockdown.

## KNOW OUR PARTNER

PACT has been working with the Infant Jesus Child Care Home (IJCH), a CCI, since 2020. We conduct screening programs, provide rehabilitation services for CWSN, and organize training programs for the caregivers and children.

As part of our End Mile Connect (EMC) program, we also try to connect them to donors and service providers for consultations, assistive device referrals, and other essential needs.

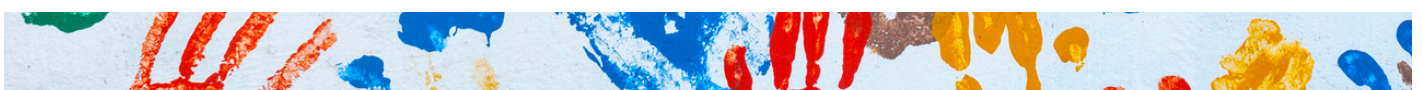
IJCH is a wing of Deena Seva Charitable Trust that was founded in 1969 by Mother Petra Monnigmann. ICJH located in Kothanur, Bangalore was established two decades back by Mother Willigard Dinasevika. The home offers individual, psychological, and moral support to OAS HIV infected children.

A dedicated team of Deena Seva sisters welcome such children and shelters around 70 HIV infected school-going children and around 20 adults who also suffer from various forms of mental illnesses.

ICJH is committed to providing education, food, shelter, and an emotionally healthy environment to all its beneficiaries.

Apart from helping children, the home supports the relatives and friends to face the shock and stigma associated with AIDS.

Utmost importance is given to the children, their aspirations and future and they are encouraged to become independent and confident as they grow up.





# PACT ACTIVITIES

## OAS Rehab Sessions, 14 and 16 April'21

Rehabilitation sessions were conducted for children in Infant Jesus Children's Home and Shishu Mandir. Activities included early intervention sessions, physiotherapy sessions and caregiver capacity building. The children's progress, in terms of mobility and achieving developmental milestones, was assessed by Ms Merlyn H and Ms Heavenna Babu of PACT.



### Distribution of Essential Medicines for CCIs, 17 June'21

Essential prescribed medicines were distributed for 20 inhabitants of Liza Home in collaboration with Mr. Pavan, Gather Life for paraplegics.



### Sanitization Drive for CCIs, May-June 2021

Sanitization of the CCI premises and surroundings were conducted at Shishu Mandir, Infant Jesus Children Home, Sneha Jyothi Ashraya and 8 other childcare institutes using a disinfectant called Virex in collaboration with India Cares Foundation and Urban Company. This was a critical need currently.

A big thank you for the support.



India Cares™  
Foundation

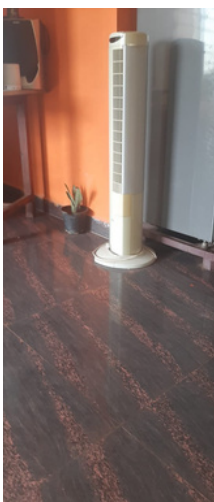


Urban  
Company



### Capacity Building of CCIs on Tele-consultation, 29 June'21

A capacity building program was conducted for the coordinators and staff of CCIs in and around Karnataka in collaboration with ICPS, Karnataka.



### Individual Donations to Childcare Homes, 30 June'21

One CCI was connected to a donor who donated a Sony 32-inch 3D TV with Amazon Fire TV stick, gas stove and one juice maker, standing air cooler (small and big), Samsung oven, baby pushing cycle, toys, vacuum cleaner, 3 used pairs of kids' shoes and 2 pairs of sandals for kids, used notebooks, used small diaries, a bundle of white sheets, one used handbag and used kids clothes.



### Covid 19 Sensitization Session to CCIs, 25 June'21

An awareness session on Covid-19 and its prevention was attended by the children and teenagers at Infant Jesus Children's Home. Conducted by Dr Reuban, the topics covered Covid-19 early signs and symptoms, and preventive measures while at school.

# JULY-SEPTEMBER PLANS

- 1) Operationalize and implement the ROOTS program through the Govt. of Karnataka.
- 2) Participate in the pitching program of NSRCEL.
- 3) Identify potential partners and cater to children in transition care homes from COVID affected families.
- 4) Develop and implement Covid surveillance programs for our partnered childcare homes.
- 5) Continue the special needs rehab program for the OAS children in the existing 6 childcare homes.
- 6) Run 3 capacity building training for caregivers of childcare homes as a part of the rehabilitation program.
- 7) Draft a program plan for inclusive education for OAS CwSN.



## Welcome, Ms. Yuvashree

We welcome Ms. Yuvashree Ganesh, an intern at PACT. While waiting for COVID restrictions to allow her travel to Uppasala University, Sweden where she will pursue her post-graduation in Public Health,

Ms. Yuvashree is volunteering at PACT. She has already contributed with an incubation application that got PACT into the second round of life skills training for OAS CwSN.

An M S Ramaiah Medical College graduate in Physiotherapy, Ms Yuvashree is interested in sports physiotherapy and evidence-based research.

We are honored to nurture this young talent and wish her a bright future.

## VOLUNTEER AT PACT



# SUPPORT PACT

## In-kind Needs

Dry rations for 3 CCI and 1 transition home for children from COVID affected families.

Sparingly used clothes, toys, and furniture to our partner CCI with transport support. We also need these for the children from slums who are part of the inclusive teaching program.

A laptop (used or new) with a minimum configuration of Intel 11th generation i5 processor, SSD, 4-8GB RAM, genuine Windows 10 to conduct our free doctor's teleconsultation services and to facilitate other operational support to our childcare homes. We request the recent configuration as we work with cloud-based teleconsultation platforms and need technical support for as long as possible (without risk of outdated configuration).

## Financial Needs

Sponsor 1 child's rehab support at ₹150 for 35 children for one session. Each child needs approximately 8-10 sessions per month.

Sponsor 1 child's assistive device ranging between ₹1800-5000 as part cost.

Support our center cost at ₹250 per day.

Sponsor our visit cost to childcare homes at ₹225 per visit. We visit 12 care homes, twice a month each.

Support one empathetic caregiver at ₹100/day who would serve 2 CwSN. We support 6 caregivers.

Sponsor 1 child's inclusive education cost at ₹2500 per month.

# FEATURED DONOR



Our regular donor, Mr. Trivikram Annamalai, helped us serve two children through our rehabilitation services.

We thank him for his mindful giving despite knowing that his contribution is not tax exempt. His trust makes us responsible to assure our best to the OAS CwSN. Thank you, Mr. Trivikram.

## CONTACT US

### **VOLUNTEER, DONATE, INVEST, ADOPT & NURTURE**

Please email your inquiry to [info@pactindia.org](mailto:info@pactindia.org).

Call us at +91-9379741933.

Visit [www.pactindia.org](http://www.pactindia.org).



## HOW TO DONATE

### **For online donations:**

<https://rzp.io/l/pactindia>

### **For NEFT donations:**

Account Name: Prakhayata Abhinand Charitable Trust

A/C No.: 0486073000000945

Bank: South Indian Bank

Branch: Kothanur

IFSC Code: SIBL0000486

Account type: Current

**Note:** Donations to PACT are currently NOT eligible for tax exemption under Section 80G of the Income Tax Act, India. Govt policy mandates an NGO's existence for at least 3 years for eligibility (we launched in 2019). However, our audited reports will be shared for transparency.