

ENLIGHTENING  
ENRICHING  
and  
EMPOWERING

*lives...*



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20 WAY FORWARD

At present RDT's welfare and integrated programmes of development cover 3,244 villages in Andhra Pradesh and Telengana.

91% of students have successfully completed primary school. This is more than the National average



06

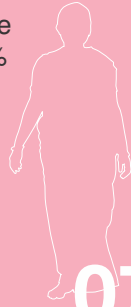
13 special athletes from RDT have been trained to represent India at Los Angeles summer Special Olympics

3,719 houses built for villagers and 48 for PWDs.



10

Men's attendance increased to 60% for participation in International Women's Day



07

RDT responded to Cyclone Hudhud which affected Vishakhapatnam and other coastal areas

44,212 people are benefitted from supplementary nutrition through 1,553 nutrition centres in 1,421 villages.



11

The number of Seva Hundis reached more than 85,542 while raising an amount of ₹1.86 crores

'Spandinchu – Saayamandinchu' a short feature film enacted by children, motivating people to join in the 'India for India' movement.

Five PWDs elected as village Presidents/Vice President



08

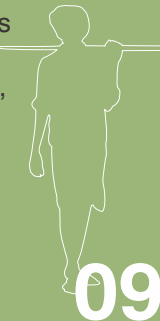
The 10-year strategy plan was defined with the participation of 540 staff members.

A 29-bedded pediatric ward was opened at Kalyanadurg Hospital for sick children.



12

2,38,000 saplings were distributed in the district viz., Mango, Jamun, Lime, Coconut etc.



09

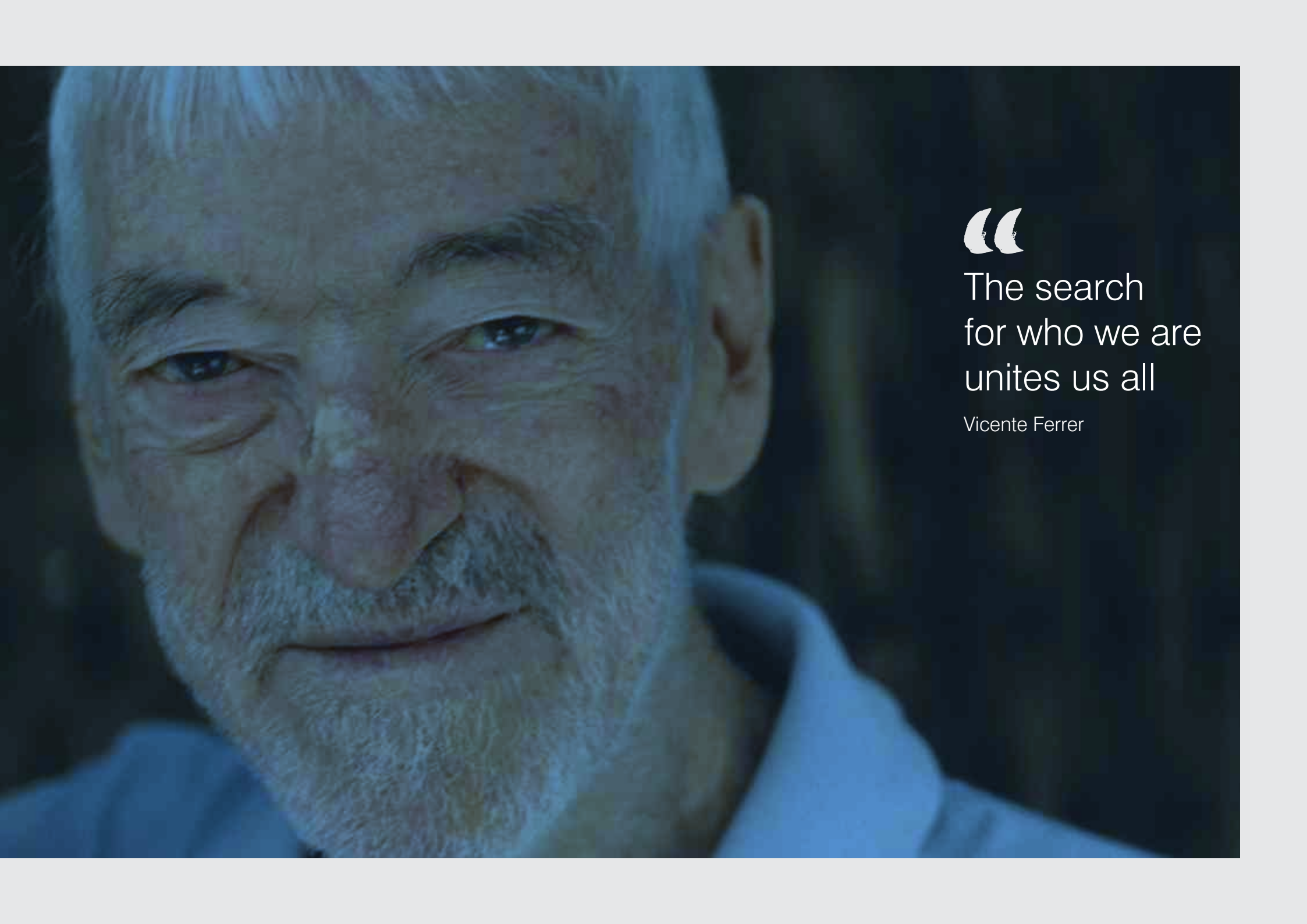
RDT will implement Swachchh Bharat Mission for more than 40,000 beneficiaries in about 400 habitats with the financial support of Govt. of Andhra Pradesh

RDT students won 20 out of 24 gold medals, at the state championship in Judo at Tirupathi.



13

RDT has initiated a survey of 300 villages of Kurnool District to add it as a new target region.



“

The search  
for who we are  
unites us all

Vicente Ferrer

“

If we join  
hands  
we will  
transform  
this  
world

Anna Ferrer



## FOUNDERS' STORY

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

### **Vicente Ferrer**

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

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

### **Anna Ferrer**

*(Essex, England, 1947)*

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

### **Credits**

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Photo: RDT Staff and Volunteers

# THE EVOLUTION OF RURAL DEVELOPMENT TRUST

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

Since its inception in 1969, RDT has endeavoured to improve the quality of life of the rural poor, especially among marginalised and underprivileged communities among Scheduled Castes (SC), Scheduled Tribes (ST), Backward Castes (BC), and Persons with Disabilities (PWDs).

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

The main challenge faced by the rural poor in those years was a lack of basic

nutrition, and when they did eat, the meal would be of poor quality. So RDT's early work was in the area of food provision and nutritional awareness. From then onward, RDT engaged more and more with the rural poor of Ananthapuram, Kurnool and Srisailem districts, till its work fell clearly into the 10 sectoral divisions it has today.

Today it conducts robust, well-entrenched and widely-appreciated programmes in Education, Women's Empowerment, Community-Based Rehabilitation, Hospitals,

Community Health, Habitat, Ecology, Sports, Culture, and Chenchu Tribal Welfare. Each of these is headed by a Programme Director and is a fully-formed and well-staffed set of initiatives into its sector.

Dedicated to holistic development, RDT focuses not only on the primary aspects of community well-being like nutrition, health and hospitals but also the underlying indicators like education, sanitary habitats, cultural development, sports, ecology and the well-being of traditionally marginalised members like girls and persons with disabilities.



## RDT, India

A team of nearly 2,400 people (99% locals) manages the organisation's work across various sectors covering 3,200 villages, and almost three million people. Since 2012, RDT's also has a Resource Mobilisation Office in Mumbai, Maharashtra.

## FVF, Spain

In 1996, the organisation opened its first office in Spain - Fundación Vicente Ferrer, to ensure stable funding, and help sustain its projects in India.

## FVF, USA

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

## Legal Identity

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

# VISION

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



# MISSION

To eradicate extreme poverty and human suffering.

To work towards implementing eco-efficient agriculture that ensures the sustainability of livelihoods and encourages a harmony between human beings and natural resources.

To ensure that educated youth from poor families have diversified job opportunities fetching a decent salary and are accorded an improved status in society.

To ensure that Persons with Disabilities have access to equal opportunities and are the main actors in their efforts to lead a life of quality and dignity.

To work towards the empowerment of women by helping improve their socio-economic status and sensitizing both men and women to deal with such issues as gender discrimination and violence.

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

# DHARMA



**Concern** for the poor and needy



**Work** beyond duty



**Reaching** as many poor as possible



Pursuit of **excellence** in work

# APPROACH

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

**RDT considers people the main actors in the process of their own development.**

Community organisation and gender constitutes the base of its work with people. Major emphasis is on strengthening Community based Organisations (CBOs) so that they play a major role in identifying and dealing with social and developmental issues apart from mobilizing and accessing government resources and getting involved in programmes of development and welfare initiated by the organisation.





1969

Father Vicente Ferrer and Sister Anne Ferrer founded Rural Development Trust

Implemented Food-for-Work Programme with funding from CASA

1970-75



1978

Started Community Organisation, Health and Land Development programmes

Initiated sponsorship programme with Action Aid; began Education and Cultural programmes

1982



1982

Launched Women sector

Collaborated with Aide et Accion (AeA); sponsorship programme

1985



1993

Constituted Women's core team; origin of CBR institutions

Launched Fundacion Vicente Ferrer (FVF) in Spain

1995

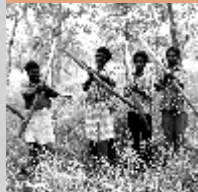


2002

Inaugurated Sports Village and upgraded sports programmes

Set up base in Srisaillam Region to work with Chenchu Tribes

2010



2012

Launched the Resource Mobilisation Centre in Mumbai and initiated 'Hundis as part of 'INDIA for India'

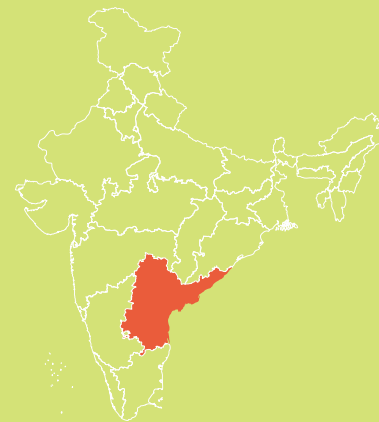
Reinitiated strategic planning

2014



## REACH

Ananthapuram is located in the Indian state of Andhra Pradesh. This district is one of the poorest in the country, receives the second-lowest rainfall, and is a rain-shadow region. RDT's activities extend to 3,244 villages in 6 districts of Andhra Pradesh and Telangana across 35 operational areas covering 7 regions, namely **B.K. Samudram, Bathalapalli, Kadiri, Kalyandurg, Uravakonda, Madakasira and Srisaillam.**



### Andhra Pradesh / Telangana



7 regions



6 districts



3,244 villages



102 revenue mandals



6,54,201 families



26,50,997 population\*

\* 2011 Census



## AWARDS THIS YEAR



Anna Ferrer received the Hamsa Award of Andhra Pradesh - The award was presented by the Chief Minister Chandrababu Naidu, and recognizes the "outstanding social service" of RDT



RDT was awarded the Graama Pragathi Puraskaram given by the Dr. Pinnamaneni & Smt. Seethadevi Foundation, Vijayawada



The Spoorthi Award instituted by the Bommidala Sri Krishna Murthy Foundation was awarded for pioneering efforts to improve the quality of life of the rural poor.



## EDUCATION

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

RDT has worked to raise awareness about the importance of education. The rural poor now understand that education is their inalienable right, and with committed support from the government and the communities, almost 99% of poor boys and girls from 3,200 villages in the Ananthapuram District are enrolled in primary school.

### Accessible Education

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

### Scholarship Programme

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

### Language and Communication-Skills Education

The Professional School was established by RDT to train educated youth in English, computers, and either French, German or Spanish as an additional language. Over the course of one year, students are exposed to other cultures and customs. The School opens avenues for employment with reputable MNCs and better remuneration.

### Quality Education for Orphans

RDT introduced the *Seva Hundi* concept in a few project villages in 2012. It adapts an age old practice of actively maintaining a '*Hundi*' as an offering to God. These savings are of many small donations which are pooled annually towards educating orphaned children.

## HIGHLIGHTS

- Quarterly workshops were organized for 22,178 members in CDCs
- The ratio of boys to girls in primary and also secondary schools is now 1:1, a significant achievement in gender-parity
- 99% of eligible children were enrolled in primary and secondary schools
- 1,751 students (717 boys and 1,034 girls) were admitted in to class VI in various residential schools
- 91% of students have successfully completed primary school. This is more than the National average
- 13,843 students (8,577 boys and 5,266 girls) have received incentives for higher/professional/technical education
- Under the 'INDIA for India' Programme 413 students (220 boys and 193 girls) have been sponsored for their education

### CASE STUDY

*"I belong to a Backward Community (Dudekula) I achieved a degree in B. Com., but in my village many advised my father to get me married. I could not get job due to lack of communication skills and fluency in English. One day, a staff member at RDT told me about Professional Language School. I wrote the exam, and was selected. Since we couldn't afford the course fees, RDT arranged for me to be sponsored. I studied Spanish and computer skills. Upon graduating, I applied and got selected as a Customer Service Translator for a multinational company in Pune."*

- D. Jubeda Begum, Raketla village.





# WOMEN

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

In 1982, RDT started a development programme for women to strengthen their role in society through education and awareness workshops. Initial women groups, now functioning as Self-Help Groups (SHGs) and popularly known as *Sanghams*, comprise of rural women as active participators and propagators of change. Today there are over 1,00,000 women in 8,122 SHGs across 1,675 villages.

### Self-Help Groups and Women's Networks

In 1982, *Sanghams* were envisioned for sustained conversations with women regarding the importance of education, general hygiene, etc., they were later reorganised into SHGs. Aside from inculcating leadership abilities, self-empowerment and economic confidence, substantial savings have been mobilised, and today, SHGs are

on their way to becoming self-managed.

### Mini-Banks and Women's Development Fund

SHGs provide greater access to finance for women and decrease their dependence on families and exploitative traditional money-lending sources. In 1992, via 'Mini-Banks' accounts and later, the Women Development Fund (WDF), monthly savings were pooled towards rotating loans for income-generating activities and domestic requirements. A total of 17,291 women have availed credit from WDF for a variety of entrepreneurial endeavours.

### Vocational Training

Providing vocational training was needed to alleviate poverty and overcome the inherent exploitation of women worsened by poor literacy levels. In 1993 vocational training in tailoring, making incense-sticks, and assorted handicrafts was started, proving beneficial for small-scale enterprise and supplemental-income creation. RDT is also committed to work with PWDs, especially with females who are doubly discriminated against. As of today, over 8,000 women have been trained in various vocational skills.

### Curbing Discrimination and Violence against Women

Mitigating early marriage by discouraging parents to wed minor children was an early crusade. Since 2010, counselling centres and shelter homes have been established for women and girls in distress who are rejected by their husbands or abused. A total of 1,216 Social Action Team (SAT) members – men, women and PWDs are being trained to identify women facing violence and extending necessary support to solve their problems with the help of RDT.

### HIGHLIGHTS

- 4 more women's counselling centres have been started at Dharmavaram, Kalyandurg, B.K. Samudram and Uravakonda
- The anti-violence team staff-strength has increased to 30 members, a sharp change in the earlier resistant attitudes by staff members to engage
- 76 early marriages were stopped in 70 villages
- Women are able to earn a monthly income of 5,000-7,000 by making 'Scented Agarbatti'

#### CASE STUDY

*"I have been mentally and physically abused by my drunkard husband. He would take away the wages I earned by working as a coolie. I have four daughters. Two of them are married and the other two are studying. I went through a lot of hardships to bring them up. One day, I poured kerosene on my body and set myself on fire. I was rescued by my neighbours and taken to RDT. RDT's counselling centre was a boon because I could finally talk about my problems. I want my husband to go through counselling. I don't want to be a victim and being a woman cannot limit me. Counselling changed my life."* - Sakamma, Tenagallu Village



There was a near-total lack of affordable rehabilitation and medical services in rural areas for PWDs. Despite government efforts, their education levels were low and their economic independency limited. Women with disabilities were especially vulnerable to violence, harassment, and other forms of discrimination.

The CBR programme works to ensure that PWDs have equal rights and opportunities in all areas of development, including access to special education, rehabilitative aids and treatment, liquidity- bank accounts of their own, owned housing and self-sustained sources of income.

#### Facilitating SHGs and Federation of PWDs

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

#### Providing Access to Special Education

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

#### Access to Rehabilitation

Medical rehabilitation is one of the strongest ways of equipping the Persons with Disability with aids or medical support, allowing them to lead independent, autonomous lives. In certain cases, where corrective treatment is an option, medical surgeries are availed. In others, use of suitable devices like hearing aids, crutches, orthopaedic support etc. is provided. RDT runs a vaccination programmes, offers children's sponsorships, conducts cultural, art and quiz festivals and organises sports training that have led to its athletes going to the Special Olympics.

#### Life-skills Enhancement Programme

There are 7 women's handicraft centres operating since 12 years, in which numerous women and adolescent girls with disabilities have received training in job-skills such as tailoring, incense-stick and jewellery-making. They now merit respect, recognition and acceptance. RDT also offers pregnancy counselling for Women with Disabilities.

#### HIGHLIGHTS

- As of March 2015, RDT is working with 26,116 PWDs, from 2,122 SHGs spread across 2,570 project villages
- SHGs have accessed loans to the amount of ₹ 35,11,21,245
- 58 Mandal federations work on government resource mobilization, protection of rights and violence/discrimination against PWDs
- 18 out of 49 elected *Gram Panchayat* members in 2014-15 are PWDs, the remaining 31 are family members of PWDs

#### CASE STUDY

Lavanya of NSP Kottala, Mudigubba Mandal met with a road traffic accident when she was 3 years old in which her legs had to be amputated at Government Hospital, Kurnool. On her third visit to RDT's Ortho-workshop, Lavanya was provided with a below-knee prosthesis for the right leg and an above-knee prosthesis for her left leg along with crutches. Her restored mobility resulted in her continuing her education and enabled her to function independently. She is studying in Class VI, and is happy to be able to walk like other children. Her parents too are elated that her horrific accident did not mean an end to her childhood, or hamper a bright future for their child.



## ECOLOGY

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

### Water Harvesting

RDT has built or maintained tanks, bunds and percolation tanks, renovated older check dams and tanks. It also builds new dams, and pick-up anicut channels to ensure reliable storage and redistribution of water for irrigation.

### Land Development Activities

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

### Promotion of Micro-Irrigation Systems

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

### Diversification of Crops, and Horticulture

Farmers were made aware of mixed cropping in place of traditional water-thirsty mono-cropping, and its optimising effect on the water reserves. They were introduced to the idea of trying out horticulture. In parallel, farmers were also sensitised about water conservation and optimal cropping.

### Promotion of Livestock and Pisciculture

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

### Afforestation

RDT and the villagers partnered in an afforestation drive and 1,305 hectares of barren hillocks have been covered and social forestry has been applied to 197 hectares of land.

### Alternative Energy

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

### HIGHLIGHTS

- 624 water bodies received 15,462 TCUM water through rain and canal in the district
- 2,38,000 saplings were distributed in the district viz., Mango, Jamun, Lime, Coconut etc.
- Total 3,174 ha belonging to 2,343 farmers across 667 villages covered under micro-irrigation systems

#### CASE STUDY

Ms. Kavitha, 26, has been growing groundnut in 0.65 ha. of land, but the crop yields were insufficient. She approached RDT for help in getting a graded Murrah buffalo, which would cost nearly ₹40,000. In 2014, with an investment of ₹15,000 as her share and the remaining ₹25,000 interest-free from RDT, she was able to do so. In 0.20 cents of land she grew green fodder for the buffalo to graze upon. Ms. Kavitha got 10 litres of milk per day, a gross income of ₹79,200 and a net income of ₹60,000 per year. The incremental income from milking and cow-dung has helped her overcome her financial difficulties. Now she is planning to purchase another buffalo with the support of RDT.



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

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

#### Housing Programme

The Habitat sector builds structurally sound dwelling-units with provisions for electrification and drainage connectivity. It involves the community and the beneficiary to make them stakeholders

in their development. By campaigning for women's ownership of plots and homes, RDT's housing work is also a powerful component of its women's empowerment initiatives.

#### Building Community and Education Infrastructure

The habitat sector works towards inclusive growth in villages by constructing Supplementary School buildings cum community centres, or by improving existing government school buildings. It constructs additional classrooms, libraries, laboratories and toilet blocks- especially for girls, provides drinking water and laying out the school grounds for sports.

#### Rural Infrastructure Programme

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

#### RDT Infrastructure Programme

RDT's Habitat sector also builds and improves infrastructure for other RDT sectors. The sector has built health clinics, hospitals and orphanages; residential schools and orthopaedic workshops for PWDs; sports infrastructure like hockey and cricket grounds, a 6-court tennis academy and dormitories; construction of vocational centres and a shelter home for women. Last but not least is its work for RDT's own staff and premises, housing, auditoriums and halls, canteens and dining halls.

#### HIGHLIGHTS

- 3,719 houses built for villagers and 48 for PWDs
- 79 community halls cum Supplementary Schools, and 14 buildings constructed to function as government schools
- 20 R.O. water-purifying systems and 6 water storage tanks built through the year
- Rural health clinic constructed at Mannanur, Srisailam Region for Chenchu forest dwellers

#### CASE STUDY

Jogulu is a backward community in Rayalseema, Ananthapuram. Even though they lived in the Enumula Doddi village, they did not possess any land. As a result, they wandered through the Rayalseema region, performing and begging in order to sustain themselves. Children missed out on schooling, and the entire community was illiterate and looked down upon as beggars. As soon as the government recognized their plight and assigned them the land, RDT spearheaded their development by building houses with water supply and a school building cum community hall for 35 homeless families. The colony, named Sree Rama Jogula Colony, was completed on 20th May, 2014.



## HEALTH

In the early 1970's, healthcare facilities in the Ananthapuram region were almost inadequate, unaffordable and most of all, inaccessible. Illiteracy and local custom further added to the problem especially on the reproductive health and hygiene front, homes which were mostly huts did not have facilities and water was scarce. Malnourishment, undernourishment, high Mother and Infant Mortality Rates, Gross Anaemia and Diarrhoea were the prevailing health issues of the time. RDT's network of Community Health Workers is the frontline of RDT's health programmes.

### Community Health Workers

Given the poor accessibility of healthcare, RDT started training young village women as Community Health Workers (CHWs) to make them capable of extending health support, identifying complex cases for escalation and onward referral of such cases. They treat minor ailments, diarrhoea, identify cases of malnutrition, conduct antenatal check-ups and even conduct aseptic deliveries besides identifying pregnancy risks.

### Capacity-Building through Awareness

RDT works extensively in building

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

### Nutrition

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

### Providing Healthcare Access through Rural and Mobile Clinics

Rural health clinics and mobile clinics were started to provide quality treatment to the most remote villages, and to spread awareness on health and hygiene, safe deliveries, child-care and nutrition support. There are 12 health clinics run by doctors with the help of

Auxiliary Nurse Midwives (ANMs). The School Health Programme helps in early detection of health problems in children.

### Conducting Referrals and Follow-ups

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

### HIGHLIGHTS

- 975 Community Health Workers (CHWs) spread across 959 villages
- 6,798 antenatal check-ups conducted and 257 high-risk pregnancies were referred to RDT hospitals
- 5,075 awareness-workshops were organized during 2014-15 which were attended by 1,43,399 members
- 1,896 training workshops organised exclusively for adolescent girls with 49,294 participants

#### CASE STUDY

*"Within a year of diagnosis, my husband died of AIDS. We're already ousted from our joint family, and I had no support structure. I decided to approach a hospital to get my HIV status tested and was shocked to know that even I and my child were HIV positive. I then learnt about support services of RDT, and the outreach workers helped me get medical treatment and join a Self Help Group (SHG). With the support of other members, I raised a loan and utilized it for my child's education. I got an opportunity to work as an outreach worker and I lead a near-normal life today."*

- Nagarajakumari, Ananthapuram



# HOSPITALS

In the 70's, the rural poor had no access to quality healthcare and government hospitals. Transportation was lacking, and medical services in rural towns were far-off and inadequate. The prevailing issues at the time were diarrhoea, snake-bite related issues, Polio, Measles, Malaria and Encephalitis. Good practices in gynaecology and obstetrics were also particularly lacking.

RDTs work began in the mid-70s with training young men in the basics of hygiene, nutrition, sanitation, preventive practices and general health to work as CHWs. Today RDT has 4 major hospitals, 6 rural clinics, 2 mobile clinics and other special-care centres to administer treatment for basic to advanced ailments and infectious diseases.

### Services Provided by RDT's Hospital Network

The rural poor of the district have now got unfettered access to a full range of treatment facilities. Over and above this, our hospitals also offer alternative therapies in Homeopathy, Unani and Acupuncture. Our services include:

### Medical & Surgical Departments

- Extensive obstetrics and gynaecology

services – This includes an NICU with an early detection programme and stimulation therapy to combat possible growth defects.

- General & Minimal-access Surgery
- Anaesthetics
- Infectious Disease Management –TB & AIDS
- Traumatology & Orthopaedics
- Diabetes management–Collectively, RDT is capable of managing the whole spectrum of diabetic complications including, Type I DM, Type II DM, and Gestational Diabetes.
- Pain & Palliative Care Management
- Support Services- Blood Bank with component facility, Labs, Ambulances, X-ray, ICU, Emergency/casualty, Micro-Biology, Histopathology, Cancer Screening, Dietician services, Tele-medicine, Isolation Rooms, etc.
- Extension Services- Rural clinics, mobile clinics, ambulance network, and nursing school.

### Medical Education

Doctors are kept abreast of latest techniques and advancements in their field. RDT has a medical library, and an education-sponsorship programme for its paramedic staff and all of RDTs doctors, nurses and administrators. Some of the continuing education

initiatives include Diploma of National Board (DNB) post-graduation courses, rural placements for skills refreshment, Tele-medicine modules, CME (Continuing Medical Education) and workshops by expert speakers.

### HIGHLIGHTS

- RDT's hospital network has the only MGIT Liquid culture machine for the culture of TB in Andhra Pradesh
- RDT's Anti-Retroviral Centre is the only centre in AP after Hyderabad to have the facility of screening viral load of HIV patients
- Health education for diabetic patients commenced with simple literature on diet-management in Telugu
- Glucometers given to chronic diabetes patients to monitor sugar levels at home
- Conducted 7 dental-health camps in a perimeter of 25 kilometres covering 414 patients
- Twice-yearly health check-ups conducted for children with Cerebral Palsy and Intellectual Disabilities in Kuderu hospital

### CASE STUDY

Padmavathi, aged 25 years, of Bramhasamudram Mandal in Ananthapuram became pregnant for the third time, and came for regular antenatal check-ups. The condition of both mother and child was normal. For delivery she was brought to RDT hospital, Kalyandurg and horrified to find by then, that she had a ruptured uterus and bladder. Being grossly anaemic, six bottles of blood were infused, and she was operated upon on an emergency basis. She lost her baby, and her uterus was removed as it was irreparable, but her bladder was mended through surgery. *"I never thought that she would survive, and her case is among the most challenging ones I have worked on"*-Dr. Balasubbaiah



# SPORTS

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

In the first phase of sports promotion, it supplied sports equipment to schools, to allow for opportunities to participate in sports. In the second phase, the organisation opened up avenues for promising students to join coaching academies from the early age. Along with coaching, the students are also provided with formal education.

### Ananthapuram Sports Village

Started in 2000, ASV is the feather in RDT's sports infrastructure and is still growing. ASV organises annual events and organises special mass coaching camps, and has 3 cricket grounds, an 8-lane race-track, 2 volleyball courts, 5 tennis courts under the Rafa Nadal Tennis Academy, a football ground, 2 hockey grounds, a gymnasium, player dormitories, a recently-started archery range, a Judo Federation of India Training centre and an auditorium.

### Special Olympics Programme

RDT started organising groups of PWDs in 1993. Through its special schools, PWDs receive assistance and help with daily living skills, communication and social skills, apart from regular classroom learning. In 2000, RDT sent a contingent of children to the 'Special Olympics Bharat', a national-level athletics meet for children with disabilities. -

### Educational & Sports School – Rafa Nadal Foundation

The Rafa Nadal Foundation approached RDT in 2009 to launch a tennis academy for disadvantaged children to give them equal opportunity along with enjoyable education & childhood. Training in Tennis is provided on a non-residential basis through professional coaching, materials, computer classes, nutritious food, competitive exposure and English lessons for students from 1st standard to graduation.

### Rural Sports Coaching Centres

Even before RDT developed its own sports-training infrastructure, it was involved in sports training at government schools. While the state government was making excellent inroads into establishing schools, RDT complemented their work by starting

coaching centres for hockey, cricket and the traditional Indian games like *Kho-kho* and *Kabaddi*.

### HIGHLIGHTS

- National Sports Day celebrations – Enrolments were opened to all children in six sports taught at RDTs sports centres namely hockey, cricket, football, tennis, judo, softball
- Rural Cricket tournaments - 360 boys' teams and 84 girls' teams participated in 31 Area-level tournaments and 32 went on to the Central-level
- RDT cricket players represented AP State in the U-23, U-19 and U-16 divisions
- Nadal tennis students in All India Tennis Association tournaments: Pallavi won her first singles title in the South India AITA tournament at Ananthapuram, and 7 other students from RDT's academy participated in AITA tournaments
- State Championship in Judo. RDT students won 20 out of 24 gold medals, at the state championship in Tirupathi in September

#### CASE STUDY

Aged 25, Naresh Kumar hails from an underprivileged family in Bhatthalapalli village, Ananthapuram. A skilled cricketer, training at the Ananthapuram Sports Village (ASV) run by RDT was a big boon for Naresh, as he got the much needed exposure and experience needed to polish his cricketing skills. He has already played for the Andhra U-19, U-22 and U-25 teams, and has also attended a BCCI specialist training camp for fast bowlers held at Mohali, Punjab in 2011, which helped him improve his game. He now has his eyes firmly set on making his Ranji-trophy debut for the Andhra Pradesh state team, which he says will be a pivotal moment in his entire cricket career so far. He is an inspiration to other young cricketers of the academy.



## CULTURAL

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

### Special Cultural Schools

For ensuring primary-level cultural education, schools from each area are selected and full-fledged cultural skills are imparted throughout the academic year at their local Supplementary School. From music, art and dance to drama and mimicry, the students have gone beyond village festivity performances, to such platforms as Andhra Pradesh Day celebrations and state and national level events.

### Cultural Training for PWDs

As a part of its extensive work on the Community-Based Rehabilitation sector, RDT has cultural organisers to train teachers and the children the year-round at all of its various Special Education centres. The high point in the

cultural calendar is the biennial Srujana Festival. Orchestra by visually-impaired children, group rhyme recitations by intellectually-disabled, mime by hearing and speech impaired children, and magic acts form the key highlights.

### Sensitization through Cultural Campaigns

The sector spreads awareness about social issues via its activities. Lyrics, music, dialogues and dance forms encapsulating issues such as violence against women, ecological preservation, untouchability and migration of labour are crafted by RDT's staff and outside performers to be performed by its students and the villagers. Around 600 performances every year draw attention toward, galvanise and sensitize the community.

### Other Initiatives

The following are few other initiatives taken up by the Cultural Sector.

- Holiday hobby classes
- Magic Training
- Clown Training
- Makeup Training
- Dance & Vocal Music training
- Instrumentalists Training
- Ram Lakhan Drums programme
- Digital media capture of performances

## HIGHLIGHTS

- The second batch of 9 rural women started 'Make-up' training in 2014-15
- RDT's Children emerged victorious in the Kala Nilayam competitions held at Chilakaluripeta. They won two first prizes, one third prize and one consolation prize in dances, and first and second prizes in singing
- 'Spandinchu – Saayamandinchu' a short feature film enacted by children, motivating people to join in the 'India for India' movement, was made and is being projected in the villages
- 4,720 children in 118 villages learnt cultural activities regularly and performed in their own villages, RDT's festivals, public functions and internal and external competitions
- 681 cultural performances to create awareness about social issues, development programs and HIV/AIDS
- Youth of 33 villages learnt to play 'Ram Lakhan' drums, thus acquiring an additional income-generating cultural skill

### CASE STUDY

Since his childhood Vannurswamy had a fascination for playing Dappu (an indigenous drum) and used to take part in RDT's cultural programmes. Gauging his aptitude, RDT encouraged him to undertake the 5-year diploma course in *Mrudangam* (a classical percussion instrument), at S.V. Music College, Tirupathi. *"It is a rare for a Dalit to train in Mrudangam, which is traditionally learned by higher-caste men. I trained hard to achieve excellence, and stood first in my college. I now earn between ₹10,000 to ₹15,000 from various programmes. Now, I also go on cultural tours along with other artists."* - Vannurswamy, *Mrudangam* artiste





# CHENCHUS

The Chenchus are a designated Scheduled Tribe in the Indian states of Andhra Pradesh, Telangana, Karnataka and Odisha. They are classified as one of the Primitive Tribal Groups that are still dependent on forests and do not cultivate land but hunt for a living. Many live in the dense Nallamala forest region in Srisailam district of Andhra Pradesh.

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

### Government Resource Mobilization

RDT workers help villagers gain awareness about various government programmes, schemes and acts such as Recognition of Forest Rights Act (RoFR Act), housing schemes and I.D. documents. Delivery is carried out through workshops to ensure they access their rights and are equal recipients of developmental schemes.

### Health Programme

RDT has facilitated CBOs to run 155 Nutrition Centres, train Chenchu women to serve at the grassroots

level as CHWs. 2 Mobile Clinics are also stationed in the district. Any ailments beyond the purview of these facilities are escalated via RDT's referral service network.

### Ecology Programme

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

### Housing Programme

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

### Livelihood Programme for Women

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

### Education Programme

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

### Cultural Programme

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

### HIGHLIGHTS

- 768 women across 384 women groups underwent leadership training, and over 150 sewing machines were given to as many trained Chenchu girls
- 97 bicycles were given to persons belonging 4 villages for the purpose of collecting forest products
- 31 pairs of bullocks, diesel engines and agricultural implements were provided to various families to improve their prospects from agriculture
- 65 youth from 18 villages received training in masonry since there is lot of demand for skilled masons in the region

### CASE STUDY

Ours is a tribal settlement where 18 Chenchu families owned uncultivable wet land and wanted to take up vegetable cultivation. In 2000, with help, few irrigation bores were drilled, but they remained unused for the absence of electricity supply and regular funds. RDT facilitated a grant of ₹5,000 per family to take up cultivation of leafy greens and vegetables. Each family now having a regular income is paying back their loan. *"We are eating well, clothed well and educating our children. We are now confident of improving our economic conditions and leading a quality life"*  
- Nagamani and Ankanna, Pedda Nagalavaram Village



## HUMAN RESOURCES

The HRD team at RDT creates, coordinates and oversees activities such as leadership trainings, cadre development, sector-specific large-scale-interactive reviews, basic training modules for group organisers and socio-technical workers, exposure visits, gender-sensitizations workshops and team-building exercises. They are also key participants in RDT's internal core strategic reviews to monitor its own performance and measure deviations from set targets.



## MONITORING & EVALUATION

Monitoring & Evaluation is one of the support departments that works in liaison with all the sectors including Finance, Personnel and HR. Its overall goal is to provide easy access to quality information needed for publicity and communication, fundraising for projects and decision making leading to effective system of functioning.

### Major accomplishments of Monitoring & Evaluation

- Compilation of Village/Mandal Directory and Documentation of Housing Directory
- Updating software of Women Sector MIS and developing a new software package for CBR sector field and institutional teams in liaison with IT Section
- Developing a comprehensive family survey format
- Compilation of annual reports, brochures, case studies and updating information to the RDT website
- Extending support in compilation of information needed for strategic planning
- Extending support to Lotus Development Trust (LDT), Bangalore in compilation of data needed for impact evaluation



## RESOURCE MOBILISATION

RDT's primary source of funds is its own sister organisation Fundación Vicente Ferrer (FVF), in Spain. In India, the fundraising team mobilises resources from individuals, public and private organisations. Additionally, RDT also has a Resource Mobilisation Centre in Mumbai. Some of its programmes that tie-in directly with State Government initiatives are government funded.

### Following are few of key RDT initiatives

- The existing successful *Seva Hundi* movement as a part of the "India for India" initiatives was replicated across other cities. More than 1000 urban citizens have adopted *Seva Hundi* to help people who need support
- 1500+ more individual supporters were registered
- New corporates and trusts have committed support
- Over 5000 people are connected to RDT's online social networks
- Various awareness programmes have been held at schools with an objective to connect future citizens with the challenges of rural people and making them aware about RDT's work towards equitable resource distribution and development



## FUND ALLOCATION

17.25%	Education
8.75%	Ecology
4.29%	Health
18.11%	Hospitals
3.46%	Women
28.25%	Habitat
5.09%	CBR
1.55%	Sponsorship
5.78%	Area Development
0.30%	Rural Sports
1.17%	Community Welfare
0.31%	M & E
5.69%	Central Offices & Campuses

# RECEIPTS & PAYMENTS

for the period 01-04-2014 to 31-03-2015



Vicente Ferrer

RECEIPTS	31 <sup>st</sup> March 2015
<b>Opening Balance</b>	
Cash	4,11,528.00
Bank	26,88,38,633.33
<b>Grants Received</b>	
(a) Foreign Grants	274,56,87,492.08
(b) Specific Grants / Local / Governments Grants	30,21,44,026.00
(c) Donations	10,27,06,945.99
<b>Other Receipts/Income</b>	
Interest	41,04,34,549.53
Dividends	10,15,526.70
Income on Investments	6,52,012.00
Other Receipts-Insurance Claims / Other Income	42,90,242.00
Hospital Income	15,94,45,024.00
Sale of Scrap	6,06,091.00
<b>Other Receipts - Sale of Fixed Assets</b>	
Other Receipts / Income - Sale of Fixed Assets	25,28,000.00
<b>Other Receipts / Current Liabilities</b>	
Gratuity & Welfare (Gratuity & Health Subsidy)	2,99,55,233.69
<b>Other Receipts - Current Assets</b>	
Realization of Telephone & Gas Deposits	9,900.00
<b>Advances</b>	
Advances / Repayments from other Programmes	10,00,000.00
Advances / Repayments from other Projects	10,00,000.00
Advances from Others	86,87,429.10
Advances TDS from Banks - Income Tax	23,35,425.00
Advances from Govt. (BHT Project)	2,42,300.00
<b>Fixed Deposits / Investments : (Realization)</b>	
Bank Investments	32,23,99,314.81
<b>Transfer of fund from / To Programmes</b>	
Fund Transfer ( Per Contra)	18,025.50
<b>Current Liabilities - EMD</b>	
Current Liabilities - EMD	9,24,051.00
<b>Total</b>	<b>436,53,31,749.73</b>

PAYMENTS	31 <sup>st</sup> March 2015
Education Programme	41,75,59,042.81
Ecology Programme	21,18,57,855.67
Community Health Programme	10,38,15,692.40
Rural Hospitals Programme	43,84,70,022.99
Women Programme	8,38,13,490.85
Community Habitat Programme	69,69,27,487.93
Community Based Rehabilitation Programme	12,32,46,990.55
Sponsorship Programme	3,74,65,654.98
Area Development Programme	13,98,85,005.11
Rural Sports Programme	73,42,903.00
Administration Expenses (Central Offices and Campuses Depts.)	13,76,81,720.23
Monitoring & Evaluation Department	75,01,389.55
Revenue Expenditure - Charities	2,82,37,507.00
Capital Expenditure	18,51,98,584.20
Revenue Expenditure / Current Liabilities	1,87,51,743.00
<b>Transfer of fund From / To Programmes</b>	
Fund Transfer (Per Contra)	18,025.50
<b>Advances</b>	
Advances to Other Programs	10,00,000.00
Advances to Other Projects	60,05,181.00
Advance to Staff & Others	2,11,75,445.07
Advances - TDS - Interest - Income Tax	4,41,74,091.09
<b>Investments</b>	
Bank Investments	157,59,47,824.04
<b>Other Deposits</b>	
Other Deposits (Gas & Electricity )	38,200.00
<b>Closing Balances</b>	
Cash	4,82,087.00
Bank	7,87,35,805.76
<b>Total</b>	<b>436,53,31,749.73</b>

# INCOME & EXPENDITURE

for the period 01-04-2014 to 31-03-2015



VicenteFerrer

EXPENDITURE / UTILIZATION	31 <sup>st</sup> March 2015
Education Programme	41,75,59,042.81
Ecology Programme	21,18,57,855.67
Community Health Programme	10,38,15,692.40
Rural Hospitals Programme	43,83,78,437.99
Women Programme	8,38,13,490.85
Community Habitat Programme	68,39,82,619.93
Community Based Rehabilitation Programme	12,32,46,990.55
Sponsorship Programme	3,74,65,654.98
Area Development Programme	13,98,85,005.11
Rural Sports Programme	73,42,903.00
Administration Expenses (Central Offices and Campuses Depts.)	13,76,81,720.23
Monitoring & Evaluation Department	75,01,389.55
Revenue Expenditure - Charities	2,82,37,507.00
Depreciation	8,59,89,821.77
Excess of Income over Expenditure transfer to Balance Sheet	121,74,30,094.62
<b>Total</b>	<b>372,41,88,226.46</b>

INCOME	31 <sup>st</sup> March 2015
<b>Grants Received</b>	
(a) Foreign Grants	226,98,26,581.84
(b) Foreign Grants - Specific - Ecology Programme	8,94,727.00
(c) Health Corpus Foreign Grant from WDT	47,38,40,910.24
(d) Health Corpus Local Grant from WDT	29,37,69,546.00
(e) Specific Grants	59,38,368.00
(c) Donations	10,27,06,945.99
<b>Other Receipts/Income</b>	
Interest	41,04,34,549.53
Dividends	10,15,526.70
Income on Investments	6,52,012.00
Other Receipts-Insurance Claims / Other Receipts	42,90,242.00
Hospital Income	15,94,45,024.00
Sale of Scrap	6,06,091.00
<b>Income on sale of fixed assets</b>	<b>7,67,702.16</b>
<b>Total</b>	<b>372,41,88,226.46</b>

# BALANCE SHEET

as at 31-03-2015



Vicente Ferrer

LIABILITIES	31 <sup>st</sup> March 2015
<b>Fund Account</b>	
Capital Fund Account	145,73,34,785.14
General Fund Account	15,71,20,167.21
<b>Corpus Funds</b>	
Health Corpus Fund - for sustainability of Hospitals	334,76,38,126.45
Projects Corpus Fund - for sustainability of Programmes	68,09,36,909.00
CBR - Disability Schools & Institutions - Corpus Fund Account	65,54,30,809.00
<b>Future Program Fund under Form-10</b>	
Housing Programme Fund (to be utilised within 5 years)	109,50,00,000.00
Ecology Programme Fund (to be utilised within 5 years)	15,00,00,000.00
<b>Other Liabilities (Staff Welfare Fund)</b>	
Gratuity & Welfare	8,90,97,695.54
Staff Health Benefits	6,66,05,344.03
<b>Other Liabilities - EMD</b>	
Earnest Money Deposit	58,92,333.00
<b>Other Liabilities - Recd. in Advance from Govt./Institutions:</b>	
Advance from Government and other Institutions	17,21,103.00
<b>Loans &amp; Advances</b>	
Advances from other Programmes	1,31,35,061.00
<b>Total</b>	<b>771,99,12,333.37</b>

ASSETS	31 <sup>st</sup> March 2015
<b>Fixed Assets</b>	
Fixed Assets	145,73,34,785.14
<b>Deposits / Investments / Corpus</b>	
Health Corpus Fund Investments	258,00,27,669.45
WDT - Health Corpus Fund Investments	76,76,10,457.00
Projects Corpus Fund Investments	68,09,36,909.00
CBR Institutions Corpus Fund Investments	65,54,30,809.00
<b>Future Program Fund Investments - Form-10</b>	
Housing Programme Fund	84,50,00,000.00
Ecology Programme Fund	10,00,00,000.00
<b>General Fund / Others</b>	
Other Security Deposits	31,38,100.89
General Fund Investments	21,17,12,542.56
<b>Staff Welfare Fund Investments</b>	
Staff Welfare Fund Investments	15,51,29,917.54
<b>Advances</b>	
Advances to Other Programmes	1,31,35,061.00
Advances to Other Projects	60,05,181.00
Advances to Staff and Others	1,03,67,505.00
Advance Tax receivable from IT Department	10,65,70,356.13
Amount receivable from Government & Banks	94,10,561.00
<b>Current Assets: Closing Balance</b>	
Cash	4,82,087.00
Bank	7,87,35,805.76
Field Offices	3,88,84,585.90
<b>Total</b>	<b>771,99,12,333.37</b>

**Statutory Auditors:** M/s. V.K. Madhava Rao & Co., Chartered Accountants, Secunderabad

**Income Tax Consultants:** M/s. P. Sivaramakrishna & Co., Chartered Accountants, Hyderabad

**Consultants:** KPMG Risk Advisory Services, Bengaluru



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



## WAY FORWARD

A third of the world's poorest are in India - over 354 million people - most of them belong to marginalised communities, and many are women. So while India has seen remarkable economic growth, its inequities are still many. Addressing these challenges will call for a fluid combination of political leadership, citizen engagement and resource mobilization.

RDT's Strategic Plan was defined by its team in 2014, with the participation of over 540 staff members, external consultants and over 600 community members. It articulates where the organisation sees itself in 10 years, and the changes to be made internally to make that transition successfully.

RDT's overall goal is to see all socially-excluded communities- most particularly women, become empowered and make a giant leap forward in their living conditions and ability to exercise their rights.

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

**Women** will speak up to claim equal opportunities and social justice, and will lead a life free of discrimination and violence, with self-respect, dignity, and improved socio-economic status.

**Chenchu Tribes** will be able to ascertain their rights, protect their values and cultural heritage, access all resources and services they are entitled to, and ultimately lead a quality life.

**People with Disabilities** will ascertain equal rights and opportunities, overcome social stigma and discrimination and lead a quality life with human dignity. PWD will be able to lead a dignified life by earning a regular income.

**Health:** The rural poor will have access to quality health care at affordable costs.

**Education:** Children from marginalized communities, especially girls, will complete secondary and Pre-University education, and have equal opportunities to pursue higher education so as to enhance their upward mobility.

**Habitat and Community Infrastructure:** The rural poor will improve their quality of life through access to permanent shelter and to basic community infrastructure to cater for their socio-economic, educational and developmental needs.

## Common Three-fold Approach For All Sectors

### A Community Empowerment Approach

RDT will ensure its support does not generate dependency - but rather, makes communities stronger and more self-sufficient. Therefore it will continue to invest in leadership and organisational abilities, particularly among community Self-Help Groups. Additionally, it will encourage communities to engage with others, mainly government actors, but also other organisations intervening in their environment.

### A Gender Approach

Besides its stand-alone women's programmes, a cross-cutting gender approach will ensure that the concerns of women and girls are taken into account in every programme, across every sector.

### A Disability Approach

RDT will apply a disability lens to all its programs to ensure the specific needs and priorities of PWDs are catered for.





## INDIA for india

RDT introduced the *Seva Hundi* concept in a few project villages in 2012, with the slogan "**Spandinchu Sayamandinchu**" (**Let your hearts respond and hands help**). It follows the common custom of depositing small amounts on a regular basis to a *Hundi*, a collection box, usually for offerings to God. RDT adapted the practice to pool together small donations from project areas to support the common cause. **RDT has established the tradition of collating all the proceeds from these Hundis on April 9, Father Ferrer's birth anniversary.**

The unique bottom-up approach of the initiative has inspired all sections of society especially the poor people. It is they who are motivating their friends, colleagues, relatives, and neighbours to maintain *Hundis*. As for the sum collected, in accordance with people's wishes, it is being utilized to fund the education of orphan children in and near Ananthapuram district. **The vitality of the India for India movement comes from the fact that thousands of poor families and various sections of people, including educational institutions and private business enterprises, within and outside project area have reached out with their support by maintaining such *Hundis*.**

“  
In 2013, there were over 40,000 of these Hundis. By the next year, this number had doubled to 85,542 and the collected amount also grew to ₹1.88 crores

Moncho Ferrer



**Vicente Ferrer**

[www.rdtfvf.org](http://www.rdtfvf.org)

### Communication Department

#### Ananthapuram

Rural Development Trust  
Bangalore Highway  
Ananthapuram  
Andhra Pradesh 515 001  
Mobile: +91 9849692133  
+91 8554271377  
Email: [communications@rdt.co.in](mailto:communications@rdt.co.in)

### Resource Mobilisation Offices

#### Mumbai

Om Sai Ganga, B2  
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Mobile: +91 9022954832  
Email: [isupport@rdt.co.in](mailto:isupport@rdt.co.in)

#### Vijayawada

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