



2020-21
ANNUAL
REPORT



KIRAN

A ray of hope into lives

Darkness is nothing but the absence of light.

The literal meaning of KIRAN is “A ray of light”. KIRAN is the hope of dawn in the depths of night. A hope which is also a dream; the dream of a society where persons with disabilities will have equal rights and opportunities, the dream that they will be accepted for what they are without discrimination. KIRAN is striving to make this dream come true by removing the many obstacles which block our way. In this struggle against darkness, the friends and supporters have always held up a lamp to help KIRAN find the way to overcome the obstacles. Since its foundation in 1994, KIRAN has brought light to thousands of lives. Over the course of almost three decades years, we have witnessed so many changes; the spark returning to so many dull, defeated eyes, as thousands of children and persons with disabilities have begun to live their dreams.

In the last year (2020-21), we have continued to strive tirelessly to enable and empower communities from the most marginalized sections of society. We hope to share the joy of bringing smiles to these beautiful faces.

Vision

A world which ensures the inclusion of the differently abled and marginalized children and youth into mainstream society, where they can feel welcome, supported and empowered.

Mission

To enable differently abled and marginalized children and youth to receive rehabilitation, education and vocational training, so that they are able to take care of their social, physical and spiritual needs and thereby become fully integrated into society.



A ray of hope into lives

The report contains information about KIRAN Society's work and the financial report for the year 2019-20. The information in the report cannot be used in the legal matters inside or outside the jurisdiction of Varanasi, without the written consent of KIRAN Society. The information, data, photographs used in this report are the property of KIRAN Society. KIRAN Society reserves the rights to disclosure, copying, distribution and printing this report. Any unauthorized use of information available in this report will be treated under the law of land. Photographs of children are used with consent of the parents/guardians.

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Secretary	Dr. Kaushal Agarwal
Treasurer	Dr. Rajiv Ranjan
Medical Director	Dr. Moreno Toldo
Member	Mr. Surendra Charan
Member	Mr. Raju Biswas
Member	Dr. Kamaluddin Sheikh
Member	Dr. Muniza Rafiq Khan
Executive Director/Ex-officio	Mr. Ahyan Shandilya

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Message from Founder and President

Dear friends,

May be that this past year of 2020 to 2021 was for all humanity an invitation by LIFE to start build more bridges between those who have and those who have nothing....those who can feel secure and those who feel and are abandoned. In KIRAN we are glad that, in spite of the big challenges due to lockdown,



we could experience the generosity of our friends and partners from all over the world which enabled us to come to the rescue of several thousand families who were in utter poverty, with nutritional, hygiene, education, healthcare, communication and short-term livelihood support that could help them over the worst time.

But while I am writing, we are sad that the schools all over India need still to remain closed due to fear of Covid-19 infection. Our teachers and therapists do their utmost to keep in touch with the children through online teaching and advice to parents, although knowing that this would never replace the direct contact with them. We do hope that very soon the KIRAN Village will again be radiant with the laughter, singing and learning of the children.

So let us never give in to despair but support each other with positive attitude and a helping hand where it's needed.

To all our friends and partners I would like to extend our hearty 'thank you' for your faithful support. We very much depend on it so that this KIRAN village can continue to be a ray of hope in our world.

With best wishes to you all from the entire KIRAN team and children

Sangeeta J.K.
Founder President

Message from Executive Director

Greetings!

The year 2020-2021 was not like other usual years - witnessed the world come to a near standstill. In the year that marked our 30th anniversary, the world lived a health crisis unlike anything seen before in our lifetimes. The COVID-19 virus has taken an exceptional toll and continued to resurge despite global efforts at all levels to control its progression.

The increased number of deaths and health issues attributable directly and indirectly to COVID-19 continues to grow and will have a terrible impact especially on the most vulnerable in the society. In early 2021, the vaccination programme was initiated and it was expected of a gradual return to normal environment but with new variants of the virus posing an ongoing terror and casting a longer shadow than initially anticipated.

The KIRAN team along with well-wishers, donors, partners, collaborators, local authorities, volunteers and communities co-manufactured a fantastic team response. At the times of crisis of COVID-19, all of them contributed swiftly, effectively and creatively in such local response to reduce the impact on the most vulnerable.

I am deeply grateful for your dedication and flexibility, especially amid these difficult circumstances. All of you make our work possible and persistent through generous support to serve marginalized communities.

The crises of 2020-2021 created more humanitarian needs in a bounded environment than ever before but whether we as a global community stood in solidarity to help each other or turned our eyes off on those suffering the most. There is, of course, much more to do and we need your persistent support to continue to do our bit at ground zero.

A deep gratitude to our supporters, who help us in restoring dignity and hope to those whose lives are profoundly affected by this crisis.

On behalf of our KIRAN team, thank you for your ongoing support and confidence.

With heartfelt thanks to you all.

Stay safe and healthy!

Ahyan Shandilya
Executive Director, KIRAN Society



Education

Childhood education is fundamental to social and intellectual development. The Kiran Viklang School of Kiran Society stands on the Right to Education (RTE), Act 2009 which enforces the concept of inclusive education by ensuring the provision of maximum learning opportunities for both children with disabilities and marginalized children of kindergarten, Primary and Upper Primary groups of Elementary Education through academic and co-curricular activities. Children with severe physical disabilities including high cognitive level are given full opportunity to complete their secondary and senior secondary education through a distance education system known as the National Institute of Open Schooling. The 11 months special educator internship program is offered to diploma holders students (Special educators) to gain practical knowledge of the teaching-learning process, in turn, they can support class teachers in handling and teaching children with disabilities in an inclusive set up.

An inclusive approach in promoting children with disabilities and other students' togetherness remained a cornerstone of Kiran School's educational interventions, therefore reflects strongly through stage programmes, classroom activities, co-curricular activities, and awareness programmes, and disseminate the exemplary work towards inclusion.

Inclusive education

In the academic year 2020-2021, beginning of the session, the impact of pandemic increased all over the world lead to lockdown and restrictions. In KIRAN, the families of children with and without disabilities from poor economic backgrounds were affected badly due to sudden loss of income. In view of this grave problem, the team of teachers started working from home. Initially, they contacted parents and children individually for providing information on precautionary measures for COVID-19 like using masks, washing hands frequently, making social distance, etc. Later, the inclusive school of KIRAN made significant efforts facing new situations to teach children by adopting new methods considering their rural-poor background. Using the 'trial and error' concept, teachers tried to teach their subjects and took tests and exams in different ways. The sole intention was to make them connected with subject knowledge.

In this inclusive school set-up, a total number of 220 children including 36% of the children with different types of disabilities and 52% female students. Due to the COVID-19 situation. there were no children in the hostel facilities of KIRAN. A total of 35 new admissions took place in this academic year. The details of students for the academic year 2020-2021 in this inclusive school are below:

Type of disability	Male	Female	Total	Students	Male	Female	Total
Cerebral palsy	22	22	44	Children with disabilities	41	38	79
Intellectual disability	3	1	4	Children without disabilities	65	76	141
Hearing Impairment	9	9	18	Total	106	114	220
Low vision	2	0	2				
Locomotor disability	5	6	11				
Total	41	38	79				

Special education

The special education services of KIRAN encompass a range of learning opportunities for children with severe disabilities, primarily with cerebral palsy, intellectual disabilities, and hearing impairment that play a vital role in the planning of their future life. The special educator maps out the appropriate strategy for each child aiming at the current and future progress by involving the parents in all stages of the teaching-learning process. Group teaching and individual need-based teaching cover the overall area of learning. During this COVID-19 situation, the team of teachers made extra efforts to deal with children with disabilities and their parents through one-to-one sessions including guiding, counseling, sharing issues, and motivating. The special educators prepared small tasks aiming long-term goals of each child and trained their parents to accomplish it.

Considering the dearth of hostel facilities for children with cerebral palsy and other disabilities, KIRAN fulfils the large gaps by providing hostels for both girls and boys but this year hostel facilities were not utilized due to covid-19 restrictions.

Type of disability	Male	Female	Total
Cerebral palsy	16	10	26
Intellectual disability	21	11	32
Hearing Impairment	8	7	15
Total	45	28	73

In this academic year, a total of 73 students with a different types of disabilities including 38% female students were provided special education services to mainstream them in regular learning and development process. A total of 19 new admissions took place in this academic year.



Key initiatives

Following were the key initiatives taken to improve the special education services based on the previous years' learning:

- **Learning and teaching approach:** In order to cope with the difficulty and risk of COVID-19, the teaching activities took place with the help of different online platforms. The team of teachers tried their best in order to not let any of the students miss their lessons. During the work from home, their main priority was to facilitate the students who had smartphones. They taught directly to children or through the support of parents (Special needs and kindergarten children) attended the queries of students and parents, assigned tasks, and evaluated the students' progress through online tests. During the work from school, the main motive was to facilitate the students who reside in the surrounding of the school and have either bar phone or no phone at all. They provided them with the completed tasks, explain the lessons, and did assessments as per needs. Still few of them stayed very far from KIRAN and lacking any mode of communication. In this case, some teachers tried to reach their homes and provided them worksheets, and guided their parents. They applied this approach to cover all the students so that no one could be left behind.
- **Different methods applied by teachers to evaluate the students:**
 - *Online platforms:* In the Pre-Primary classes, the tests were taken through video calls on an individual basis whereas in Primary and Upper Primary classes it was conducted through worksheets. The students were allotted a time limit within which they had to complete and send back their completed worksheets to their respective subject teachers. About 75% of students were able to give exams in this mode.
 - *Telephonic one-to-one oral test:* Some students who did not have smartphones or internet facilities were called by their subject teachers individually and evaluated through the oral question-answer-based assessment (QABA) method. About 10% of students were evaluated by this method.
 - *Test in local vicinities:* Some students from the surrounding of the school, who were not having mobile communication facilities, were called and their tests were taken by the subject teachers. The social distancing, mask, and sanitization rules were strictly followed during this activity. Around 10% of the students participated through this mode.
- **Support of nutritional, hygiene, books, notebooks, and stationery materials:** This year, due to the COVID-19 situation students were provided free-of-cost kits carrying items of nutrition, hygiene, books, notebooks, and stationary. The education team arranged the schedule over a period of 5 days to provide these materials to children class-wise along with one-to-one meetings with parents so as to better understand their situation and exchange some updates about the improvement of their children.

Initially, the neediest, a total of 62 children with and without disabilities were supported in the month of April 2020 (31 each through relief kits and bank transfers of 1000/- INR each).

250 families of children with and without disabilities were supported through nutritional and hygiene kits.

- **Co-curricular activities at home:** Children with and without disabilities were engaged by participating in co-curricular activities like making drawings, simple craftwork, singing songs, dancing, and doing household works. Children were supported by drawing books and other materials for performing co-curricular activities. As children already got drawing materials, so many children with and without disabilities showed their enthusiasm in participating in drawing competitions conducted by print media. Poverty and strict lockdown conditions could not have restricted them to take part in co-curricular activities.
- **Celebration of International day for persons with disabilities:** Every year, December 3 is observed as an International day for persons with disabilities. This year, a renovated building of Special Education was inaugurated in presence of invited guests and the KIRAN team. Now the unit has self-explanatory wall-painting based on the core activities of special education. All classes have new teaching-learning materials for teaching children. The washrooms were made more spacious with modified ramps. On the occasion of this special day, all the students with disabilities from Kiran were offered a set of school uniforms as a gift.
- **In spite of challenges at each end, the continuation of teaching activities to children with and without disabilities during pandemic situations:** During the pandemic condition throughout the year, many of the children were able to get connected through smart/bar phones. The team of teachers tried their level best to continue teaching subject lessons through audio recording clubbed with images, short video clippings, links of reference materials using apps/youtube videos, one to one teaching through video calls, guiding parents and students, meeting with parents in person and even home-visits.

The special educators continuously connected with the parents and their children with disabilities for learning new skills, revising previous knowledge, behavioural issues, and guiding parents during pandemic situations.

- **Other education projects**
 - World Children Foundation project: Upper Primary section with students and teachers were supported for continuing quality teaching-learning.
 - JVS/SLF project: 37 children with disabilities were supported for medicine, uniform, teaching-learning materials and tuition fee.
 - GIVE India: Children with and without disabilities.
 - Diocese of Vicenza, Italy: Supported 20 children with and without disabilities.

Improving access and promoting inclusive quality education for marginalized children

During the reporting period, the focus was given with the supervision of the steering committee to complete the special education unit built primarily for children with disabilities. Improvement of the quality education environment was accelerated by providing various educational materials to children with and without disabilities.

After successful completion of the previous project (January 2017 to December 2020), a new project “Improving access and promoting inclusive quality education for marginalized children” proposal of a total cost of 320,000 Euros has been approved by CSI, Luxembourg for a period of four years starting from January 2021 to December 2024.

The anticipated results of this intervention are:

- Improve the conducive educational environment by (a) construction of new infrastructure (b) development of existing infrastructure (c) Establishment of school material and equipment.
- Promote and contribute access to inclusive education by (a) Training support for KIRAN teachers/staff (b) Sensitization and exposure for teachers, administrators, students, staff of institutions (c) Awareness of parents and family members (d) Workshop on good practices
- Professional management and follow-up

A total of 33,450 beneficiaries (6,690 direct and 25,760 indirect) will benefit/be aware which include children with and without disabilities from poor economic backgrounds living in rural areas In KIRAN school; parents/guardians of children with and without disabilities; Teachers/Headmasters/Headmistress/staff from public and private schools; students from public and private schools; students/staff members from other institutions; KIRAN staff members and general population through this proposed intervention for four years.

Key initiatives

Following were the key initiatives taken to improve the project activities based on the previous years' learning as well as the situation imposed by the COIVID-19:

- **Steering committee:** A steering committee consisting of the management team has been created for accelerating the monitoring of CSI supported project activities especially infrastructure development and core educational activities.
- **Inception and lesson workshop:** An Inception workshop was organized by involving many stakeholders before the commencement of the project to clarify the activities, timeline, target beneficiaries, and roles and responsibilities of the different team members. After completion of the scheduled phase of CSI supported project, a workshop was conducted in December 2020 month for knowing the views of stakeholders regarding the noticeably effective and lacking part of any activity in form of a lesson learnt workshop. A total of 50 parents, teachers, and students with and without disabilities actively discussed on given points.
- **Effective monitoring system:** Through quarterly internal evaluation of the overall project activities and expenditure against allocated budget to identify the gaps and improve it further.
- **New proposal:** A concept note which was submitted to an individual donor (Ms. Rita Lampart) was approved for this year also (2020-2021) towards the valuable educational support of 48,000 CHF for a period of one year to Classes VI, VII and VIII.
- **Project completion as scheduled using new approaches:** By not restricting the work from different locations during the pandemic situations, the renovation of special education unit equipped with beautiful wall paintings, furniture, and solar panel on scheduled time under CSI project, Luxembourg. The students' materials which were supposed to utilize in schooling time, provided to them for use at home like- drawing materials/ craft materials, maths learning tools, stationeries, uniform etc.

The Human Resource Training Centre (HRTC) of KIRAN came into existence to share the technical know-how accumulated in the last 30 years of working intensively at the grass-root level with the children and youngsters having consequences of cerebral palsy. It was realized that there is an enormous need to have well-trained professionals in the field of special education who can work with dedication and quality results with the person with disabilities. The main focus of the HRTC is on enabling young professionals to achieve a competitive advantage in the field of special education. Further to make them realize that there is an urgent need to create a new, capable and sensitive workforce to fill this much-neglected field of special education.

From its inception, the philosophy to encourage the youngsters especially females from the rural background to join this professional course.

During the academic year, a total of 49 students were enrolled including 34 (69%) female students and 5 (10%) students with disabilities. Most of them were from economically and socially deprived families. The selection of a new batch was done by mid of July 2020 and an online programme on organizational orientation (one week). Due to the COVID-19 restriction, an online approach was taken to transact curriculum.

Category	Number
Number of students	49
Year – I	24
Year – II	25
Female students	34
Male students	15
Reserve category	40
Unreserved category	9
Person with disability	5
Age range	18 to 33 years

There are two government apex bodies to govern this diploma course all over India. The first one is the Rehabilitation Council of India (RCI) and the second is the National Institute for the empowerment of persons with multiple disabilities (NIEPMD). The former is responsible for giving recognition and curriculum for the courses and monitoring the slandering of the course. The latter is responsible for conducting examinations and awarding certificates.

Workshop attended by teaching faculty	8
Workshop organized by the department	2
Intra-department collaboration	2
Curriculum Transaction (Theory & Practical) – I Year	450 hours
Curriculum Transaction (Theory & Practical) – II Year	434 hours
Library up-gradation under DDC classification	1400 books

Research study: Inclusive design and accessibility of the built environment in Varanasi, Uttar Pradesh

KIRAN Society along with National Institute for Urban Affair (NIUA) participated in a short-term (November 2020-March 2021) research study of Global Disability Innovation Hub, University College London. This case study is part of the FCDO UK Aid-funded ‘AT2030: Life-changing assistive technology for all’ programme. The AT2030 programme aims to explore ‘what works’ to increase access to life changing assistive technology (AT) for all.

The overall aim of this study is to learn how people with disabilities experience the built environment in their everyday lives and to understand how we can better develop guidance to design more inclusive and accessible spaces and infrastructure for people with disabilities in the city of Varanasi, Uttar Pradesh.

As one of the collaborative partners, KIRAN Society conducted a number of interviews with various stakeholders from different backgrounds and persons with disabilities as well as photo diaries with interviews with persons with disabilities in the city of Varanasi, Uttar Pradesh.

Two workshops, one with persons with disabilities and another one with multi-stakeholders workshop took place where exploratory co-design activities were used to discuss the findings from the primary data collected. The workshop which was organized in KIRAN premises aiming to understand the barriers and challenges faced by persons with disabilities in accessing basic infrastructure services, identifying key priority areas for improvement, and recommendations for city stakeholders. The participants of varied impairments, age and gender attended and shared their experiences and ideas on how to improve the city from the perspective of accessibility, inclusivity, and safety. The research combined virtual and face-to-face research activities and followed local protocols around the COVID-19 pandemic. As the second of six case studies on inclusive design and the built environment in lower-and-middle-income countries, these findings will go on to inform global actions on inclusive design.

Economic Inclusion: Promoting economic inclusion by empowering youth from marginalized communities

A project title “promoting economic inclusion by empowering youth from marginalized communities” for the period from January 2021 to December 2021 has been approved by IM, Sweden. The overall goal is to promote economic inclusion of youth with and without disabilities from marginalized families through self-employment opportunities in the Varanasi and Mirzapur districts of Uttar Pradesh. During the first quarter of the project, orientation among the potential target communities and recruitment of the project staff members were done.

Key initiatives

Following key initiatives were taken based on the previous years’ learning as well as development of new projects:

- **Curriculum transaction:** The curriculum transaction for the diploma students was another initiative taken by the department. The detailed hourly timetable and class arrangement, their transaction, and evaluation is an ongoing and rigorous process. In this regard, completed almost 95 percent of curriculum transactions as per guidelines of the Rehabilitation Council of India. The practical exposure to the teachers’ trainee is also a crucial part of curriculum transaction but pandemic had an adverse effect on educational institutions which were closed during the academic year.
- **Effective monitoring system:** Through quarterly internal evaluation of the activities to identify the gaps and improve it further.
- **Capacity building:** The teaching faculty had a chance to attend various workshops or seminars on virtual platforms for enhancing their own skills under the faculty development program.
- **Submission of concept notes/proposals:** The year was a few writing of new proposals and sharing was done with the potential donors. A few of them were successful and some of them were not or put on hold by the donors due to the COVID-19 situation.
- **Submission for a new course:** The initiation and permission of a new course (a two-year diploma in Intellectual disabilities) has been delayed due to COVID-19 situation.

Healthcare

The KIRAN Clinic

Since 2018, the KIRAN Clinic is a registered clinical establishment recognized by the Chief Medical Officer of Varanasi district. The staff members comprise the Medical Director Dr. Moreno Toldo and the nurse, Ms. Usha Panna. Five specialist doctors were/are registered as consultants under the clinic: Dr. Kaushal Agarwal, Orthopaedic Surgeon, who is also the Secretary of KIRAN Society; Dr. Monika Gupta, Internist and also member of KIRAN Society; the late Dr. Swami Varishthananda, Paediatrician who passed away prematurely in September 2020; Dr. Swami Gyanasthananda, Paediatrician; and Dr. Ravi Sahai, Orthopaedic Surgeon. Dr. Bhave, Naturopathist, is present in KIRAN on a honorary basis once a week. Under the umbrella of the clinic all rehabilitation services of KIRAN are registered. The clinical work is documented in the reports of each unit below.

The clinic provides health services to all school students (hostellers and day scholars), trainees (hostellers and day attendants), staff members, and patients who access other services in KIRAN. The clinic gives first-aid treatment and care also to the relatives of staff members living inside KIRAN Village (about 100 persons) and to caretakers of patients. When clinical tests, specialist's treatment and hospitalization are needed, patients are referred to hospitals (Benares Hindu University, Samvedna, Ramakrishna Mission Home of Service, Smayan) and Diagnostic Centers (Arihant Diagnostic Centre, Prakash Lab., Dr. Poddar Neurology Clinic). With all the above clinical centres (apart from BHU), KIRAN clinic has an agreement for special discounts in favour of patients and with free of cost treatments for the poor.

The events of the year 2020-2021 have been exceptional due to the consequences of the COVID-19 pandemic. The Indian government imposed a strict lockdown from March to June 2020 that brought a closure of all routine KIRAN services, the clinic included. The activities restarted from July 2020 stepwise, but the school remained close. Workshops were held in April 2020 by the medical director and the nurse on how to cope with the COVID-19 pandemic and what preventive measures are to be followed by staff members and the beneficiaries of KIRAN services. Sanitizers, gloves, masks and aprons were provided to the staff according to their duties.

A health check-up was conducted for 14 children of the special education section. Students found with eye, ear, dental or skin problems were referred to the respective specialist doctors. Tetanus vaccinations were done for all trainees and those staff members who requested it. Eight patients participated at feeding programmes for individuals with cerebral palsy with feeding difficulties. Medicines were provided to four hostellers on chronic therapy.

Community-based rehabilitation

KIRAN's healthcare interventions include the approach of community-based rehabilitation which is applied in 98 villages of Shikhar and Majhawan blocks of Mirzapur district and Kashi Vidyapeeth and Pindra blocks of Varanasi district. KIRAN endeavours to promote human inclusion by providing medical rehabilitation care, support the practice of inclusive education, strengthen economically the needy and advocate for social rights of children/persons with disabilities, women in general, and families with socio-economic disadvantage.

With the aim to carry out these benefits for target groups, projects have been implemented on the key five components (Health, Education, Livelihood, Social and Empowerment) of the Community-Based Rehabilitation (CBR) matrix from the World Health Organization (WHO). In order to provide rehabilitation services at door steps in the community, a resource centre has been developed for extremely poor children with disabilities. Our CBR team of around 25 people of diverse professional background is dedicatedly working in this huge area in collaboration with volunteers, local supporters and civil society for social transformation.

Mainstreaming disabled and marginalized children through inclusive education, health promotion, rehabilitation and empowerment

This project has been implemented in 54 villages of Mirzapur and Varanasi districts, aiming to mainstream children with disabilities and marginalized children through inclusive education, health promotion, rehabilitation and empowerment for the period of three years (April 2018 to March 2021); this is in synergy with two other community-based rehabilitation projects (the G.A.N.E.S.H. and Empowerment and Enterprise projects; see below) in the same geographical area.

The COVID-19 pandemic has brought serious challenges to this project. Regular meetings with stakeholders through workshops/meetings/training sessions and other means were suspended due to local, inter-district/interstate movement restriction. Efforts were done to continue clinical activities with standard safety measures so as to provide the needed consultations. Few children came for therapeutic services (especially those who live closely to our centre). Parents were not able to pay proper attention to their children due to a widespread loss of jobs and economic insecurity. For children with disabilities, the COVID-19 crisis has severely limited the access to quality education and physical rehabilitation services. The government had shut down all educational institutions as part of precautionary measures.

During the complete lockdown, staff served the beneficiaries through various modes of communication and changed project priorities so as to look after the need of poor families in consent with donors, and decided to provide essential nutritional and hygiene support. The activities restarted in July 2020 with a limited number of staff and still restricted freedom of movement.

The staff members were deployed for data collection and distribution of dry ration kits. After improving the situation, the staff was allowed to conduct the project activities in the field. A total of four training programmes on challenges on imparting education in COVID-19 situation were organized for government school teachers. Women and children were trained on their rights and made aware about different government social security schemes. The self-help groups were supported and capacity building of associated members was done on enterprise development.

Even in this challenging time, the team remained in contact with beneficiaries. The essential needs of beneficiaries and communities at large were addressed efficiently in coordination and collaboration with staff, donors and civil societies. The objective of the project somehow remained intact while the remaining gaps were filled with ongoing efforts.

The following are the details of these efforts during the reporting period:

- 5080 families of remote areas were supported under COVID-19 relief initiatives
- 20 poor families with disabled children received cellular phones so that they could remain connected through a tele-rehabilitation programme
- 110 self-help groups were supported
- 57 children received home-based rehabilitation programmes and 102 children received institutional-based programmes
- 119 at-risk and disabled children received regular health check-ups
- 386 newborn infants were screened a for developmental delay and 93 suspected infants received medical and rehabilitation care
- 6 children have been enrolled in KIRAN inclusive school
- 98 government staff members were trained on “Challenges of online education and its solutions during COVID-19 pandemic”
- 1099 women were trained on their rights
- 158 government teachers were trained on inclusive education programmes
- 65 poor families with disabled family members were helped to avail government schemes

General movements Assessment in Neonates and infants for Early intervention Social and Health support: the G.A.N.E.S.H. Project.

The sudden outbreak of COVID-19 pandemic has brought many challenges also to this project. In the beginning of the 3rd year of the project, due to the lockdown, early identification activities were postponed till 31st of July 2020. The project staff was sent home as a safety measure due to the highly contagious nature of COVID-19. Regular meetings with stakeholders through workshops/meetings/training sessions and other means have been suspended due to local, inter-district and interstate movement restrictions.

The government also suspended regular clinical activities of health centres, such as immunization programmes, nutritional day activities and OPD services for 3 months (April, May and June 2020). The governmental local health workers were given the responsibility to create awareness in the community and identify suspected cases of COVID-19 in their respective villages.

There was a great fear in the communities due to a widespread loss of jobs and consequently an economic insecurity. For children identified/suspected of neurodevelopmental disorders, the COVID-19 crisis severely limited the access to medical and early intervention services. Gradually, some field and community activities particularly the early identification and intervention, could be restarted from August 2020 onwards.

Since its launching 3 years ago, the G.A.N.E.S.H. project aims (a) to identify newborns and young infants at risk for neurodevelopmental disorders and disability, and (b) to provide state-of-the-art early intervention services to these infants. The identification of at-risk infants is done by a non-invasive, cost-effective corner-stone assessment of the infant's age-adequate movements and postures (the General Movement Assessment) resulting in a Motor Optimality Score. An infant is referred to a targeted intervention programme if at least one of the following criteria is observed: abnormal General Movements; a reduced Motor Optimality Score, asymmetries of any kind, especially asymmetric segmental wrist and/or finger movements; a body weight and/or head circumference at or below the third age-related percentile on the WHO charts; facial dysmorphism and/or malformations such as congenital talipes equinovarus, cleft palate; acute illness and any other parental concern.

In November 2020, the procedure of G.A.N.E.S.H. was published in the British Medical Journal Open: Toldo M, Varishthananda S, Einspieler C, et al. Enhancing early detection of neurological and developmental disorders and provision of intervention in low-resource settings in Uttar Pradesh, India: study protocol of the G.A.N.E.S.H. programme. *BMJ Open* 2020;10:e037335. doi:10.1136/bmjopen-2020-037335.

During the report year 2020-2021, the following activities were conducted:

- 386 newborns and young infants (0 to 5 months) underwent the General Movements Assessment, in collaboration with ASHA, ANM and Aaganwadi workers in the targeted communities
- 93 children are still under early intervention programmes under the supervision of KIRAN
- 209 government frontline community health workers were trained in the basic concept of the General Movement Assessment, but also in child care, safe delivery, nutrition and hygiene in the community
- 119 infants/children received a comprehensive neurological evaluation in medical camps; free medicine was provided to them and their parents as per need
- 223 government front line health workers (ASHA/85-ANM/24-Aaganwadi/114) were trained in early identification and intervention programmes
- 143 women and 32 adolescents were trained in health hygiene and child care
- 10 families received a cellular phone to continue tele-rehabilitation services
- More than 200 poor families were supported for COVID-19 dry ration and hygienic kits

A total of 1279 General Movement Assessment videos were recorded and evaluated during the last 3 years; 365 infants were found suspect.

These infants and their mothers have received medical intervention and early rehabilitation programmes. Medical care services were provided through medical health check-up camps. Health awareness programmes were organized in communities with audio-visual tools to enhance understanding. Women from marginalized sections have been trained on child care, safe delivery, importance of nutrition and hygiene, along with government front line health workers. Many infants achieved normal developmental milestones due to joined efforts of our rehabilitation team and the community health workers.

To evaluate the impact of our early identification and intervention programme, the data analysis of the first 1000 infants (March 2021) revealed the following preliminary results:

- 728 infants had normal General Movements
- 272 infants needed a more careful examination and, in case of need, intervention due to their abnormal General Movements and/or malnutrition
- 159 infants achieved a normal development after implementation of medical and early intervention programmes
- 2 infants died
- 16 infants could not be followed due to a lack of parental compliance
- 46 infants have a neurological, developmental, orthopaedic diagnosis and are under regular follow-up
- the preliminary prevalence rate of disability in the targeted community is 4.6%

Moving from normal schools to inclusive schools

This 2-year inclusive education project (January 2019 – December 2020) was implemented in 54 targeted villages to disseminate the concept of inclusive education in community through various sensitization and awareness-raising campaigns, trainings, workshops and meetings with direct and indirect stakeholders, so as to bring crucial changes in practicing and promoting inclusiveness through capacity building. The key focus was the strengthening of community-based organization groups, children groups, parents' groups, and other stakeholders.

Due to the sudden outbreak of COVID-19 pandemic, movement restriction and the measures for social distancing forced KIRAN to close the project activities from the 3rd week of March to end of May 2020. Project staff was asked to do work from home. From June 2020 activities were gradually restarted in a phased manner, but advocacy events such as workshops, seminars, large group meetings at block/district/state levels had to be cancelled.

Under these circumstances, a change of our working approach was needed, in order to allow the achievement of the project outcomes. Therefore, reallocations were made and activities modified. Reallocations were geared towards promoting and supporting children with disabilities and through inclusive education.

Below are some of the details of the activities done within the frame of this intervention:

- Community grassroot meetings; parents' group meetings; children's group meetings; meeting with teachers; community-based meetings
- Training of school teachers/ workshops on inclusive education
- Meetings with head of schools at the block resource centre on inclusive education
- Awareness workshops on Right to Information (RTI) and Right to Education (RTE) Acts

- Strengthening of SMC on their roles & responsibilities
- State level workshop with education professionals on inclusive education
- District level meetings/workshops with stakeholders, including educators and rehabilitation professionals
- Development of Model Schools
- Development of IEC Material on RTI and RTE
- Development of an E-training module
- As a part of COVID-19 relief initiative, a total number of 205 families with disabilities received nutritional and hygiene kits

Improving access to Right to Education (RTE) and Right to Information (RTI) for children with disabilities through advocacy in Pindra block of Varanasi district, Uttar Pradesh / COVID-19: Humanitarian assistance to marginalized families in Uttar Pradesh, India

Initial Intervention: Back in March 2020 with the support of Embassy of Switzerland in India, KIRAN started an 8-month inclusive education project for 15 villages of Pindra block of Varanasi district in Uttar Pradesh, India. At that time, KIRAN Society was already working in 30 villages of Pindra block of Varanasi district for promotion of inclusive education through advocacy for RTI and RTE. The goal of this 8 months project was to complement in extending the existing efforts from 30 villages to 45 villages.

The project started in March 2020 and activities started smoothly for the project as KIRAN got approval from local education authorities to implement the following project activities in the schools:

- An inception workshop was organised to better understand about project objectives, activities and resources available
- Successful completion of a beneficiaries' identification survey in the proposed 15 villages of project area
- Started working on an 8-month activity plan, so as to implement project activities in the given time

Change in planned intervention: By the end of first month (March 2020) project faces its major challenge in the form of COVID-19 outbreak. Due to these circumstances KIRAN was forced to shut down all the project activities because the Government of India ordered a nationwide lockdown. Project staff was asked to work from home.

As an immediate response to the ongoing crisis created by COVID-19 and the subsequent lockdowns, with Swiss Embassy's support and approval, KIRAN planned to realign its project activities into a humanitarian assistance programme to facilitate access to nutritional and hygiene kits for families of vulnerable groups like children/person with special needs and marginalized communities.

Result of the project: 835 families of children/persons with disabilities and women, along with other vulnerable groups benefitted from this initiative.

As most of the beneficiaries are daily wagers, they particularly suffered the consequences of the lockdown. Our support of essential nutrition and hygiene material proved crucial for these households to meet their basic and immediate food needs.



Outreach services

KIRAN reaches out to four districts of Uttar Pradesh, namely Varanasi, Mau, Ghazipur, and Ballia districts and to the Kaimur district of Bihar state in coordination with local implementation partners. The main objective of these services is to reach the neglected, isolated children in far-off villages who have any disability; and to offer them best possible quality of rehabilitation in order to improve their quality of life through a holistic rehabilitation approach, physiotherapy, occupational therapy, counselling, training, aids and appliances, medical care and special education. One of the aims is to guide the development of the child/person with disability within his/her own environment.

The first three months of this report year (April to June 2020) was extremely challenging due to the sudden outburst of COVID-19, which brought the outreach services on halt. Therefore, children with disabilities were in double challenging situations because of interrupted rehabilitation services, and consequently, most of them were forced to stay in isolation due to movement restriction and fear. During the lockdown, our rehabilitation professionals guided and counselled the families of children with disabilities through regular tele-rehabilitation sessions.

A total of 247 sessions were provided to children with disabilities by virtual means for rehabilitation and special education. From July 2020 onwards, regular services were started again and children came to KIRAN according to their appointment schedule.

Throughout the year, due to pandemic situation, we were only able to organize five medical-rehabilitation follow-up camps in Mau, Ballia and Ghazipur districts. Children with disabilities have received a broad range of therapeutic services at camps. To monitor the development of these children, weekly consultations with the neurologist and orthopaedic surgeon, therapists and special educators were carried out. Children in need of surgeries and other doctors' consultations were supported weekly by the outreach team.

During the report year 2020-2021, the following activities were conducted in the project:

- Throughout the year 500 (430 follow-up/70 new) children with different disabilities were examined in the outreach unit
- 106 children received rehabilitation services at the five medical-rehabilitation camps
- 109 children were followed through tele-rehabilitation by the rehabilitation professionals during the lockdown period
- 25 parents of children with disabilities have been trained in handling techniques to better take care of their children through day care services
- 6 children with disabilities were admitted for inclusive education and one child for vocational skill training to KIRAN
- 57 families of children with disability were supported with dry ration and hygienic kits
- 14 children with disabilities received a cellular phone for tele-rehabilitation



Prosthetic and orthotic services

KIRAN's prosthetics and orthotics services are provided through well-trained and experienced professionals. Fabrication and fitting of devices are carried-out according to the need of children with disabilities. The users' feedback on the comfort of the devices is taken into consideration in order to provide appropriate devices and bring maximum independence to the user.

A regular follow-up and check-up of devices occur during outreach rehabilitation camps and at KIRAN, wherein broken or fragile parts of devices are repaired. One dedicated day per week for wheelchair services is given to wheelchair users to maintain highest possible mobility through training, modification and repair. Apart from these core services, we extend the support in fabricating and modifying special wooden chairs for children with disabilities in KIRAN's wood workshop unit. These extensive services are provided free of cost or on subsidized contribution to children/persons with disabilities based on their socioeconomic assessment.

In this context, also the COVID-19 pandemic impacted on the project implementation. Due to the sudden increase of COVID-19 cases in Varanasi and neighbouring districts, the orthotics and prosthetic services were forced to shut down from 24th of March to 30th of June 2020. From July 2020 onwards, a new action plan was developed and shared with the team in order to ensure maximum productivity in that challenging time.

In the beginning, a limited number of beneficiaries was allowed to access the services due to the lockdown and the production rate remained still low. A total number of 529 appliances of different types were produced and fitted; 81 aids were delivered and 515 repairs/modifications were done for children with motor disabilities with high safety measures.

The demand of orthotic and prosthetic intervention services raised significantly since October 2020 and in the following months, which was expected after movements were allowed again by the public health authorities, and medical-rehabilitation camps at community sites could resume in a phased manner.

Appliances delivered	Units	Aids delivered	Units	Repairs and modifications	Units
Knee Ankle Foot Orthosis	85	Wheelchair	21	Wheelchair modified	23
Ankle Foot Orthosis/CTEV	301	Modified Sandle	19	Wheelchair repaired	105
GRAFO/FRO	20	Rollator	3	Calliper repaired	375
Gaiter	62	Crutch (Axillaries & Elbow)	38	Prosthesis repaired	12
Hand Splint	9	Total	81	Total	515
Helmet	2				
Knee Brace	6				
Foot Orthosis	26				
Ex Ortho Prosthesis	10				
Spinal brace	5				
Trans Femoral Prothesis / Prothesis	3				
Total	529				



Key initiatives

Based on the previous years' experiences, the following key initiatives have been achieved for different projects and services:

- **Publication of the study protocol of the G.A.N.E.S.H. project in the British Medical Journal.** Apart from providing all details of G.A.N.E.S.H., this paper has also the potential to facilitate access to scientific grants for projects in medical rehabilitation and community health. The article can be accessed from the following link:
<https://bmjopen.bmj.com/content/bmjopen/10/11/e037335.full.pdf>
- **Effective monitoring system** through quarterly internal evaluation of the project activities and expenditure against allocated budget to identify the gaps and improve it further.
- **Up-scaling of staff capacity:** Three capacity building workshops organized on early identification and intervention programmes to enhance the competencies of therapists and community health workers.
- **Change in mode of service delivery:** During the lockdown children with disabilities were followed over phone. Individual home-based programmes were designed and shared with their parents for follow-up on internet-based applications. These activities supported the involvement of parents of children with disabilities in the rehabilitation process.
- **Tele-rehabilitation services:** Poor families with disabled children received cellular phones to continue regular follow-up over phone.
- **COVID-19 relief response:** Poor families with disabled children were supported through nutrition and hygiene kits during the lockdown situation.
- **Development of child-friendly environment and gait training area:** In order to involve the children visiting KIRAN in their rehabilitation process, a child-friendly environment and gait training area were built.
- **Timely availability of raw materials** was ensured through a centralized warehouse. Here raw materials are kept safe; the stock list is digitalized; available materials and timely placement of orders are monthly updated in collaboration with the procurement service.
- **Up-scaling of staff's clinical knowledge** through group learning, case study presentations and attending workshops.
- **Developing visibility** of key services through documentaries and applications to promote inclusion.
- **Improved and developed collaborations** with a diverse range of stakeholders during the COVID-19 pandemic.
- **Granted:** A subproject of G.A.N.E.S.H. with the title "Survive and thrive: perinatal asphyxia and/or small for gestational age neonates in rural India" has been approved by the Laerdal Foundation, Norway. The key objective is to define predictors of outcome by assessing neuromotor performance in the first months of life in rural India: infants with perinatal asphyxia and small for gestational age neonates. Initially, it is planned as a one-year project (April 2021-March 2022).
- An MoU has been signed between Amar Seva Sangam and KIRAN Society on **Mobile-Based Community Rehabilitation Initiative**. A team of three members (including two Heads of Departments) from the rehabilitation department also visited Amar Seva's institution for training.

Institution-based rehabilitation

The institution-based rehabilitation services of KIRAN aim to optimize the functional skills of children and youths with disabilities, making it less challenging for them to cope with the various demands of their environment. The major challenge for parents is to avail all rehabilitation facilities under “one roof” which KIRAN Village provides. KIRAN delivers rehabilitation services to children and persons with disabilities via a team of multidisciplinary professionals. KIRAN treats children with movement disorders, speech and communication impairments, cognitive impairments and impaired social interaction, as well as a broad range of other developmental disorders. High quality services are delivered including physical therapy, special education, speech/language therapy, psychological and medical evaluations/interventions. The rehabilitation programme includes the screening and identification of children with disabilities, comprehensive assessments of complex individual needs, and the development of individual rehabilitation plans (IRP), all carried out by a multi-disciplinary team with the aim of maximising the potential of each child. Most of the families availing services belong to poor social and economic backgrounds.

Parents and child care unit

The Parents and Child Care Unit (PCCU) serves as the entry to KIRAN. A total of 519 children received services in the period between April 2020 and March 2021. A trans-disciplinary approach is followed, keeping family and child at centre.

New enrolments in the PCCU: During this reporting tenure, PCCU registered 181 new children with different neurodevelopmental disorders and disabilities. Every new registered child has gone through a comprehensive assessment by multidisciplinary professionals according to the need of the child.

Institution-based follow-up in the PCCU: 338 children with different developmental disabilities were followed. During the follow-up sessions, the team demonstrated the therapeutic activities to the child and his/her parents according to the IRP.

Tele-rehabilitation programme: During this global pandemic time, tele-rehabilitation has emerged as an effective and sustainable solution for medical rehabilitation services. Tele-rehabilitation aims to ease the consequences of physical isolation of the families and the psychological stress of parents and caregivers. The PCCU team of audiologist and speech/language therapist, special educator, physio- and occupational therapist, psychologist and neurologist interacted through telephone to address the issues of parents and children with cognitive impairment and other neuro developmental disabilities. It motivates parents to become more involved in their child rehabilitation programme. Home-based activities were designed for each child on the basis of his/her individual needs.

Regular intensive therapy in the PCCU: This programme provides an opportunity to the parents of children with disabilities to observe the therapy sessions provided by different therapists and also practice the same in front of them. The aim of this programme is to train parents so they can participate in the rehabilitation process of their child.

It helps the child to become independent to some extent. The duration of intensive therapy session is 45 minutes daily by each therapist (speech therapy, physio therapy and special education) for one week and repeated after 1-2 months, depending on individual needs. During this reporting tenures 34 children with disabilities received regular intensive therapy.

Feeding programme: Feeding is an essential part of the child’s holistic development. Most of the children in the feeding programme are diagnosed with cerebral palsy, in which feeding and swallowing impairments are frequently observed. For three to five children with cerebral palsy, a team of speech/language therapists, occupational therapists and the nurse perform an oro-motor assessment, which leads to an individual intervention plan, e.g. oro-motor exercises, proper positioning of the child during feeding, etc. Last year, three feeding training programmes were organized with 10 children.

Mainstreaming of children: This year 13 children got admission in the inclusive school and special school of KIRAN. Some of the children also got admission in private and government schools in their respective areas.

Details	Follow-up	New	Total
Attention Deficit Hyper Active Disorder	9	6	15
Autism Spectrum disorder	13	8	21
Behavioural Problem	-	1	1
Borderline Intelligence	1	1	2
Cerebral Palsy	196	87	283
Delayed Speech and Language	5	3	8
Developmental Delay	1	4	5
Diagnosis Awaited	1	12	13
Down Syndrome	14	6	20
Duchenne Muscular Dystrophy	7	4	11
Encephalitis	1	-	1
Epilepsy	14	9	23
Global Developmental Delay	14	7	21
Hearing Impairment	3	8	11
Hydrocephalus	1	1	2
Intellectual Disability	37	15	52
LLD	1	-	1
Low Vision	-	1	1
Microcephaly	-	1	1
Multiple Malformation	1	-	1
Muscular Dystrophy	1	1	2
Neuro	1	1	2
Neuropathy	1	-	1
Orthopaedic Handicap	-	1	1
Sclerosis	1	-	1
Spastic Paraplegia	2	-	2
Speech Impairment	-	1	1
Spina Bifida	11	2	13
Traumatic Brain Injury	1	1	2
Tuberous Sclerosis	1	-	1
Grand Total	338	181	519

Children on tele rehabilitation by different professionals	Total
Physio and occupational therapist	211
Special Educators	174
Speech therapist	68
Intensive therapy	77
Psychologist	54
Total	584



Physio-occupational therapy unit

This unit provides therapy to children with disabilities or developmental delay who attend KIRAN's inclusive school, and supports the teachers in the holistic process of physical, mental and psychological growth of the students. The team integrates therapeutic interventions and strategies into the scholastic curriculum.

Throughout this year, a total of 78 children with disabilities received individual therapy; their diagnoses are the following:

Diagnosis	Number
Cerebral palsy	66
Spina Bifida	5
Torticollis	1
Femoral Dysplasia	2
Phocomelia	1
Myopathy	2
Neuropathy	2
Total	78



Support of children and youths with disabilities to participate in society and to ensure inclusion

This project focuses on the development of the child while making efforts to enable the family environment to respond to the needs and situations in order to bring a positive change to children and youths with disabilities. 80 children were supported by Jan Vikas Samiti/Liliane Fonds under this initiative.

Key initiatives

Based on our previous experience, we took the following key initiatives:

- Home visits were launched to evaluate selected patient's home environment, with special focus on barriers and infrastructure
- Updating individual files with soft copies of disability certificates, UDID numbers and Aadhar card numbers
- Revision of formats on parents' participation and feedback in order to improve their satisfaction for services
- Parents were encouraged to financially contribute for services received
- Early intervention for very young children through intense therapy sessions
- Capacity building of staff members through various internal and external programmes including Com DEALL, Bangalore
- Improvement of the Management Information System for data storage and retrieval.
- Updating and reviewing the documentation of planned trainings in the next financial year
- Granted: Our proposal focusing on the support of children and youths with disabilities to promote participation in the society has been approved by Liliane Fonds for the duration January to December 2021

Inclusion

Inclusion is a cross-cutting issue in most of the interventions of KIRAN but some dedicated efforts have been done to mainstream the youngsters with and without disabilities in society. The objectives of integration operationalize through:

- Providing equal opportunities and educational experience to children/youngsters with disabilities as those are provided for children/youngsters without disabilities.
- Allowing children/youngsters with disabilities and their families, neighbours, and peers to interact socially to change stereotypic responses to disability
- Creating awareness in society about the need to give persons with disabilities the possibility to live with dignity in social life.
- Encouraging youngsters with disabilities for finding training, or a job or for organizing self-employment.

The session started with the process of admission and counseling of (21) out-going students with and without disability from the KIRAN inclusive school, who were successfully integrated into normal school in their nearby village/town. In addition to this, admission of youngsters who have completed their schooling and aimed to study further for educational or professional courses.

A few such efforts

- 25 youngsters were provided support through bank transfer and 80 nutritional and hygiene kits were provided during the outbreak of COVID-19.
- In the reporting year enrolled, a total of 16 new trainees with and without disability (8 male and 8 female) belonging from below the poverty line.
- Grihini: In this learning opportunity programme, uneducated, marginalized, and young girls with disabilities were enrolled for their better future and to gain the best way of survival. The training includes basic education, cooking, gardening, stitching skills, manner of life and beautician course, etc. There were changes made in the syllabus and study patterns like- cooking fast food, life skills, communication skills, etc. The collaboration was done with a government certification partner (Jan Shikshan Sansthan). In the last session, 15 students have completed the course and got government-certified certificates.
- Educational and learning programmes for children/youngsters with and without disabilities: The below projects are ongoing to complete the educational requirements of youngsters with and without disabilities from the marginalized populations.
 - Roche I: Started in the session 2017-18 for 9 youngsters
 - Roche II: Started in the session 2018-19 for 10 youngsters
 - Roche III: Started in the session 2020-21 for 22 youngsters
 - Girl child education: Started in the session 2019-20 for 9 girls

Output

- 21 students successfully integrated with normal and special schools.
- 10 students got admission for higher study in universities across the country.
- 15 Grihini girls completed their course and received a skill training certificate.
- 15 job placements in different working areas like- shopping malls, schools, and private organizations, etc.

Key initiatives

Following key initiatives were taken based on the previous years' learning:

- Certification for Grihini Course in collaboration with Jan Shikshan Sansthan
- Close follow-up on Deen Dayal Rehabilitation Scheme (DDRS) with the Ministry of Social Justice and Empowerment.
- Participation by youngsters with disabilities in wheelchair race and dance on National Voters Day programme at Sigra Stadium, Varanasi
- Regular follow-up of students in various schools & colleges with the help of digital platforms and applications
- Appreciation by the government and other officials for the cultural programme by youngsters with disabilities for their unique performance.
- Meeting city officials to share information on skilled trainees
- Well improved documentation by using database concept
- Monitoring system through quarterly internal evaluation of the overall activities and expenditure against allocate budget to identify the gaps and improve it further.



Livelihood and capacity building

The vocational skill training programme of KIRAN provides training as well as production support in various trades like making IQ toys, carpentry, tailoring/weaving, art and design, food preservation, and bakery services to mainstream the youngsters with and without disabilities from the marginalized population in the society.

All the trainees received counseling as per the needs of various functional units and according to their specific skills. Special arrangements were made within the environment for independent functioning and mobility. Many of the trainees who joined initially they had low self-esteem and confidence level which were enhanced through learning opportunities, workshops, and other confidence-boosting activities.

Due to COVID-19, KIRAN was closed till June 2021 and started again in the month of July 2021 with government restrictions. The work process undertaken in different units are as under:

- (a) Art and design team made 1200 masks with some requests for canvas bags. The team also supported in painting and polishing work for I.Q. toys.
- (b) The food preservation team prepared pickles of mango and jackfruit received from KIRAN village. Also preserved guava, lemon, carrot, and other vegetables for future use.
- (c) Wood workshop team prepared some make toys out of MDF material by replacing wood. The requests were received for special chairs and some interior work from KIRAN education services. In KIRAN village doors, windows, and other repairing work were accomplished.
- (d) In the bakery, able to support some limited and regular requests even in the COVID-19 situation with all precautionary measures.
- (e) Display of products made by youngsters with disabilities on some of the occasions like Shivratri which attracted the attention of many local people.

Key initiatives

Following key initiatives were taken based on the previous years' learning:

- Able to acquire **support through small and limited orders** from the market and completed on time keeping on account its quality and specification.
- **Customized production** as per their need to increase the demand of production.
- **Renovation of the Suryodaya building** is started with support from an individual donor which supports in shifting of the bakery on the third floor and to keep the first and second floors for other revenue generation requirements.
- **Up-gradation of bakery**, the old ovens with less capacity were replaced with a better version of the oven and other equipment to get maximum output with quality. In the new bakery, there will be better work conditions than earlier to expand the production of goods in the coming period.
- **Effective monitoring** system through quarterly internal evaluation of the overall activities and expenditure against allocate budget to identify the gaps and improve it further.

- Earlier details of inventory (raw material and final products) were recorded manually. Now along with the manual entries, the records are in the **process of digitization**.
- Food and craft stall by female trainees during a few events = this is to increase their confidence apart from basic education and learning activities.
- **The fish farming initiative** is a small but different intervention with an aim of gradually mobilizing resources for KIRAN. Fish farming in ponds is environmentally friendly and will not have adverse environmental impact on the ecosystem. A proposal has been accepted by the KIRAN Foundation for the next three years.



COVID-19: Humanitarian response

This year was completely unique as well as challenging to affect the global population with the longest lockdown situation in many countries. It is not only a difficult phase for narrowing or halting down many regular functions and hitting hard economically but required tough mental conditions to deal with the unexpected changes. It shakes the steady rhythm and allows only a limited time of the year for the regular functioning of activities.

The lockdown situation in India represents a gigantic challenge given the population magnitude and density. The majority of the population is affected by it but in different communities or groups, it has different levels of impacts. Within the country, millions of internal migrant workers and their families, including the elderly, women, and children leaving the cities as the lockdown imposed to limit the COVID-19 pandemic made them jobless. In order to reach their homes, many of them are walking hundreds of kilometers while carrying minimum items to survive.

For many or all team members, it presented a very different exposure, especially those who were not used to longer curfews/restrictions/lockdown and different working modalities from the regular schedule.

The funding situation seems harsher in the given condition but a big thank you to all committed donors and supporters of KIRAN for continuing their valuable support during this time. During this period, they have been constantly informed about the situation, update on actions on a regular basis. Considering the minimal availability of team members, it was more challenging to work in a distance mode.

On the other hand, this also gives KIRAN an opportunity to explore the working as well as providing services in a different way. In the early announcement, many of the staff members went to their hometowns and were thereafter not able to travel back or further due to restrictions by local/state authorities. This put a hefty load on a few available team members to continue with some form of services or support. This new and challenging situation poses difficulties for many of the team members as well as to beneficiaries (children, youngsters, women, and men with and without disabilities) who were engaged in direct service provisions or not having this mode of function.



Key activities done during this crisis situation

Precautionary measures: All necessary measures were taken up within the KIRAN premises, KIRAN staff and village residents to make them aware of COVID-19. Awareness of precautions, safety measures and facts related to it. The posters with key messages were displayed at various sites of KIRAN village. Installation of handwashing points at different heights near to entry gate.

Avoiding rumours and myths: To avoid rumours and myths related to COVID-19. the reliable updates on education and communication material were shared with the team from credible sources like the Ministry of Family and Health Welfare (MoFHW), The Indian Council of Medical Research (ICMR), and the World Health Organization (WHO).

Medicinal support: Due to the lockdown situation, many of the children were unable to procure their medicines due to lack of money or the non-availability of shops in remote areas. The team provided medicinal support to such identified children with/without disabilities in Varanasi and Mirzapur districts.

Internal follow-ups and coordination: Regular follow-ups with respective team members through joint tele-conferences at regular intervals, emails, frequent discussions with individual team members.

New collaborations on the ground: Along with collaborating partners, KIRAN reached out to its network of community workers to understand where the need is most critical. After that, this community workers team compiled a list of the communities, locations, number of people affected. A consolidated sex-disaggregated list of beneficiaries was prepared and cross-checked thoroughly to avoid any duplicity.

Orientation programmes: Orientation programmes on guidelines for relief distribution and safety measures were conducted to acknowledge the field situation, ensure efficient distribution with proper safety measures. Key points elaborated were the type of emergency, local participation, team coordination, proper documentation, site planning and management, physical distancing, communication to beneficiaries, safety kits, and most importantly respect and dignity for beneficiaries while providing support.

Variety of response interventions: There were a variety of interventions were conducted under COVID-19 response like direct funds transfer support, distribution of relief items (nutritional and hygiene), cash for work support to families improving livelihood, support for children in needs during an emergency - Education and hygiene, support for the families of children with disabilities, medicinal support to children with disabilities and basic equipment to families for communication.

Feedback mechanism: Sharing of feedback by the team members after the relief distribution. The broad areas of such discussions included the overall experience of the relief distribution process, what went well, what didn't go well and a few recommendations to improve further.

Resources mobilization: Discussion with potential donors to mobilize the support. With joint efforts from some team members, the funds were mobilized or channelized from the existing intervention towards the COVID-19 within a few months along with response activities and reporting for the same.



A few collaborations during COVID-19 humanitarian response

Following partners were involved and collaborated during COVID-19 response

- Abhilasha Trust, Varanasi
- Astha Foundation, Varanasi
- CLG Ashram Trust, Varanasi
- District Disability Officer, Varanasi
- Gram Sewa Samiti, Sonbhadra
- IPSITA Welfare Society, Chandauli
- Jan Vikas Samiti, Varanasi
- Kashi Kusth Sewa Sangh Varanasi
- Kashi Kusth Sewa Sangh, Sarnath, Varanasi
- Kasturba Seva Samiti, Varanasi
- Kiran Grameen School, Varanasi
- Lok Chetna Samiti, Varanasi
- Manav Sewa Kendra, Chandauli
- Sampurn Janhit Vikas Foundation Trust, Varanasi
- Sarvodaya Seva Ashram Chitrakoot
- SPCG Trust, Varanasi

Support from donors for COVID-19 humanitarian response

Apart from numerous individual donors, following key organizations offered their valuable support during COVID-19 response:

- KIRAN Foundation, Switzerland
- Roche Foundation, Switzerland
- CSI, Luxembourg
- SOIR IM, India
- Motivation India
- Jiv Daya Foundation
- Embassy of Switzerland, India

Impact

In just a limited period of time the humanitarian assistance programme was started and able to reach out to the most vulnerable groups (families of a person with disabilities and marginalized groups) in four seven of Uttar Pradesh (Chandauli, Chitrakoot, Ghazipur, Jaunpur, Mirzapur, Sonbhadra and Varanasi)

The nutritional and hygiene support kept these families safe and turns out to be important attention need to pay during this life-threatening pandemic COVID-19 situation.

Starting from April 2020 till December 2020, KIRAN provided multi-fold assistance to 6,447 families (around 36,748 persons) needy families with the limited resources. This programme helped KIRAN to reach out to a wider group in remote areas of Uttar Pradesh. KIRAN team is grateful to be in a situation that allows them to continue serving their community during this crisis. The collaborations and support during this period were very impactful in serving the vulnerable at a time when they needed it most.

Support functions

Fundraising

This is one of the key dedicated activities initiated recently for the future prospects in the KIRAN through three steps (1) developing and maintaining fundraising strategic plans; (2) finding potential and regular donors and (3) promoting a positive and attractive public image of KIRAN Society.

This year, due to the COVID-19 situation, a decline in the cash and kind donations has been witnessed compared to the last year (monthly and yearly donations). Still, along with some cash donations, the donors also supported some of the key events like Foundation Day, Diwali, Republic day, or their birthdays. Some installations like drinking water coolers, ration, and woolen clothes support for youngsters with disabilities, hostel students, raw material for prosthetic and orthotic services, and other equipment were supported by the donors.

The dissemination of the KIRAN calendar 2021 was also done with a variety of stakeholders including potential donors. Even in the crises, donor relationships were maintained through regular communication, and sharing of updates.

Volunteering

KIRAN has received volunteer support from the very beginning. It is an enriching experience for both of us in order to get to know each other's culture and the way of working. The volunteers' support is very precious for our children as well as staff too. Their dedications towards assigned tasks were very useful and appreciable.

Unfortunately due to the spreading coronavirus (COVID-19) epidemic in the entire world and lockdown in India, all activities have been affected. But the volunteers decided to remain in the KIRAN for some period. They have supported in other tasks i.e. in report writing, in editing newsletters, teaching the English language, and in carpentry so that they can utilize their time and skill in this crucial period.

Volunteer	Country	From	Assignment	Left due to COVID-19
Ms. Pauline Magenta	France	December 2019	Skill Training, Fundraising, Social Integration, hostel	July 2020
Mr. Matteo-Zattra	Italy	December 2019	Skill Training, = Wood workshop	August 2020
Mr. Sean Hannon	Ireland	January 2020	Education, Hostel, Rehabilitation	April 2020
Ms. Alix Lacotte	France	March 2020	Communication and programmes	August 2020

Canteen services

The KIRAN canteen provides healthy, hygienic, and nutritious food to the children, staff, and guests. During the normal situation, the canteen team of KIRAN provides more than 450 meals (lunch) every working day to children and staff members and to dinner for 80 hostellers boys/girls. Due to the COVID-19 situation, the canteen services were not functional during the previous year except on a few occasions. This period was utilized in updating of inventory, the canteen staff was involved in farming activities; sowing vegetables and supported in harvesting on a rotation basis; helping in COVID-19 response activities like packaging and distribution of nutritional and hygiene ration kits; cleanliness support in the campus; and documentation updating; collaboration in events.

Communication

The KIRAN monthly newsletter has been started in October 2019. Every time, efforts have been done to improve it further and share it with relevant stakeholders. This has been very useful to share the key information of KIRAN on a regular interval and keep posted. As an ongoing process, around 45 videos were updated on the official YouTube link of KIRAN

Administration

- In this reporting year, in spite of the COVID-19 situation, the KIRAN administration team worked to ensure that programme and COVID-19 response activities run smoothly without any interruptions, finance, human resources, logistics, maintenances, security, procurement, and Information technology were continued. Limited movement of vehicles after lockdown declaration. A regular interval inspection towards the functioning of these vehicles continued during this period.
- Water and sanitation project, which supports water and sanitation-related activities of KIRAN Village, all planned septic tanks and washroom facilities were constructed/renovated.
- Observation on Foundation day, KIRAN's birthday, Diwali, Christmas, Republic Day, and Independence Day.
- Under an initiative by the administration team, the cash-for-work programme started to provide temporary income support to poor, vulnerable men and women nearby the peripheral area so they can meet their essential needs in this crucial time of the pandemic COVID-19. Unskilled and semi-skilled men and women from the nearby places with vulnerable and poor families above 18 years of age were involved which directly benefited 90 families during the period October 2020 to January 2021).
- The general services team supported heavily throughout the COVID-19 response from April 2020 to December 2020.
- During this period, construction and repair work includes renovation of staff quarters, special education section; guest house renovation work, external and internal beautification of the campus, construction of vehicle parking stand,
- Equipping vehicles with GPS and camera surveillance.
- The farming team provides vegetables and cereals to the KIRAN canteen; all the products which were produced from the farms were organic. For the financial year, 2020-21 total of 1200 kg of vegetables and cereals were produced. Similarly, 13,943 liters of milk have been produced and provided to the canteen.
- The renewal of registration for persons with disabilities for the next 5 years up to August 2025 and annual renewal of certification from the Food Safety and Standards Authority of India.
- Opening of Bank Account as per FCRA Amendment Act, 2020 completed before 31st
- March 2021. The new FCRA bank account will be opened in the designated bank of State Bank of India at New Delhi.

Human resources

- Staff strength: 164
- 1/3rd employees were female and 16% were persons with disabilities

Management and coordination

A range of regular organizational management and coordination activities happened. A few of them listed below :

- General Body Members and Executive Committee Members meetings
- Review workshop of programmes and support functions.
- Regular management and coordination meeting with different departments
- Field visit for monitoring and support
- Monthly/project reports and timely submission of donor supported reports
- Networking and collaboration efforts
- Some of the staff members participated in virtual capacity building workshops



Awards and recognitions



2020

NGO Excellence Award, IEEC BHU 2020

2018

Uttar Pradesh State Awarded for best leadership NGO

2017

Certified of accreditation by Credibility Alliance

2016

Guide Star India NGO Transparency Awards

2014

Lokamat Award for the Best NGO

2013

Global Commitment Towards Inclusive Education Award Uttar Pradesh

2012

Award of Best NGO by organization of understanding fraternity, India

2012

Andhra Pradesh Government awarded Prayasa Award for the working in differently able field

2008

Andhra Pradesh Government awarded Prayasa Award for the working in differently able field

2007-08

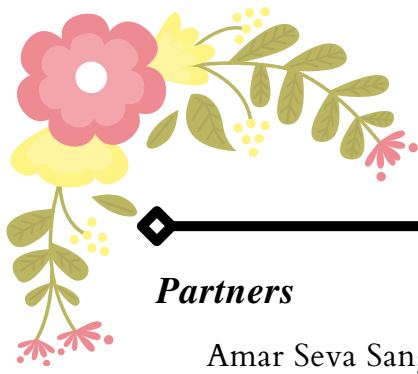
Best NGO awarded by National Trust

2007

Awarded by Dr. J.E. Brandenburger Stifuting Award, from St. Gallen, Switzerland for working in long Social Service for the differently able ones and humanitarian

2006

Ramakrishna Jaidayal Harmony Award for the Best NGO in Uttar Pradesh state
2006 Uttar Pradesh State Awarded for State wise best NGO



Partners and supporters

Partners

Amar Seva Sangam, India
Association FIDEI, France
Bharat Heavy Electricals Limited, Varanasi, India
Caracchi, Professor Pinuccia, Italy
Condomine, Mr. Laurent, France
Christian Solidarity International, Luxembourg
Diocese of Vicenza, Italy
Disability and Development Partners, United Kingdom
Give Foundation (Give India)
General Movements Trust, Austria
Global Disability Innovation Hub, University College London
Golden Sufi Centre, United Kingdom
IM, Sweden
India & You (Claire Martignier)
Jiv Daya Foundation, India
Jan Vikas Samiti, Uttar Pradesh, India
Liliane Fonds, Netherlands
Medical University of Graz, Austria
Motivation India
National Institute for Urban Affair, India
National Institute for the Empowerment of Persons with Multiple Disabilities, India
Kerbl, Dr. Ulrike, Austria
KIRAN Foundation/ KIRAN Friends Association, Switzerland
KIRAN Friends Association, Italy
Old POSSUM's Practical Trust (T.S. Eliot), United Kingdom
Paramahansa Yogananda Trust, Purulia, India
ROCHE, Switzerland
SoftwareONE, India
So Hum Foundation, United States of America
Statsny, Mr Hanspeter, Switzerland
The Swedish Organization for Individual Relief (SOIR-IM), India
World Child Future Foundation, Switzerland



Affiliation and knowledge partners

Com DEALL, Trust, Karnataka, India
Einspieler, Prof. Dr. Christa, Medical University of Graz, Austria
Marschik, Prof. Dr. Dr. Peter B., University Medical Center Göttingen, Germany
Martinuzzi, Dr. Andrea, La Nostra Famiglia Hospital, Conegliano, Italy
Ministry of Health and Family Welfare, India
Ministry of Social Justice and Empowerment, India
Mishra, Prof. Dr. V.N., Banaras Hindu University, Uttar Pradesh, India
Mitchell, Dr. Andrew, Clinical Psychologist, United Kingdom
Motivation India, Karnataka, India
Nai Fovino, Dr. Federica, District Hospital of Vicenza, Italy
Pandey, Dr. Anil, Guru Nanak Home for Handicapped Children, Jharkhand, India
Pandey, Dr. Ruchi, Paediatrician, Varanasi
Ramakrishna Mission Home of Service, Varanasi
Rehabilitation Council of India, Delhi
Social Welfare Society of Varanasi Diocese, Uttar Pradesh, India
Squarzon, Dr. Corrado, Managing Director, Eraclitus, Italy

Collaborating partners in COVID-19 response

Abhilasha Trust, Varanasi
Astha Foundation, Varanasi
CLG Ashram Trust, Varanasi
District Disability Officer, Varanasi
Gram Sewa Samiti, Sonbhadra
IPSITA Welfare Society, Chandauli
Jan Vikas Samiti, Varanasi
Kashi Kusth Sewa Sangh Varanasi
Kashi Kusth Sewa Sangh, Sarnath, Varanasi
Kasturba Seva Samiti, Varanasi
Kiran Grameen Coaching Centre, Varanasi
Lok Chetna Samiti, Varanasi
Manav Sewa Kendra, Chandauli
Sampoorn Janhit Vikas Foundation Trust, Varanasi
Sarvodaya Seva Ashram Chitrakoot
SPCG Trust, Varanasi

Erstwhile Patrons

Aegis Media, Italy
Associazione Fileo, Italy
Bharat Heavy Electricals Limited, Varanasi
Big Lottery, United Kingdom(DDP)
Buechi Foundation, Switzerland
Guiden a Scouten, Luxembourg
Cless Foundation, Germany
Friends Group in Regelsbrunn, Austria
Kiran Mazumdar-Shaw, India
Matri Shree Charitable Trust, Uttar Pradesh
Wick Foundation, Switzerland



To VOCATIONAL TRAINING							
Raw Material(IQ, Carpentry)	17,078.00			By Income From Art & Design, Gihini	1,23,515.00		
Raw Material Skill Training(Art & Design)	67,468.00			By Income From Bakery	4,82,340.00		
Raw Material Bakery	96,677.00			By Income From Canteen	15,618.00		
Raw Material(Food Preservation)	26,378.00			By Income From Coffee Shop	14,643.00		
Raw Material Coffee Shop	23,710.00			By Income from Dairy & Farming	1,67,903.00		
Stipend	97,156.00	3,28,467.00		By Income from Fooding & Lodging	55,711.00		
				By Income From IQ & Carpentry	1,40,940.00		
To AIDS & APPLIANCE & MEDICAL EXPENSES				By Income from Food Preservation	55,204.00		
Dispensary Expenses		43,224.00		By GA NIEPMD For Exam	48,234.00		
				By Income from Beneficiary	39,400.00		
				By Income From Scrap Material	6,650.00		
To STAFF WELFARE:				By BANK INTEREST			
Staff Welfare, Meeting & Guest Exp	21,409.00			Interest on Bank A/c	9,474.00		
Staff Training/workshop/seminar	2,412.00	23,821.00		Interest on FFD	76,166.00		
				Interest on FDR's	5,15,442.00	6,01,082.00	
To REPAIRS & MAINTENANCE				By PROJECT FUND INCOME			
Electrical Repair & M.	39,699.00			GIVE INDIA PROJECT FUND	10,79,888.64		
Generator Fuel & Maintenance	14,205.00			Medical Fund	1,05,000.00	11,84,888.64	
Repair & Maint. General	55,287.00	2,97,663.00		By Excess of Expenditure over Income transferred to			
Computer & Xerox Maintenance	51,430.00			Capital fund	6,653.93		
Vehicle Repair & Maintenance	1,37,042.00			Project Fund (F.C A/c)	-		
				Project Fund (General A/c)	-	6,653.93	
To VEHICLE RUNNING MAINTENANCE							
Vehicle Fuel	55,435.00						
Vehicle Insurance	1,200.00	56,635.00					
To PROJECT FUND EXPENSES							
To KHWS FUND		49,235.00					
To GA NIEPMD For Exam Expenses		54,157.00					
To ADMINISTRATIVE EXPENSES							
Legal & Consultancy Charges	32,057.00						
Audit Fee	8,850.00						
Bank Charges	402.10						
Communication / Telephone Expenses	42,949.00						
News Paper & Magazine	14,608.00						
Postage & Courier	63,932.00						
Printing & Stationery	8,695.00						
Electricity Expenses	4,76,502.00						
Celebration & Festival	27,073.00						
Travelling & Conveyance	50,969.00						
Office Consumable Store	53,726.00	7,79,763.10					
To PERSONNEL COST FOR PROGRAMME							
Salary	1,200.00						
Remuneration	15,160.00						
P.F Employer Share	1,11,127.00						
P.F Employee Share	1,11,127.00						
P.F. Administrative Charges(ADM)	32,805.00	2,71,419.00					
To Covid-19 Expenses		88,950.00					
To Depreciation on Fixed Assets		65,79,841.00					
To Excess of Income over Expenditure transferred to							
Capital fund							
Project Fund (F.C A/c)	10,04,995.98						
Project Fund (General A/c)	11,35,653.64	21,40,649.62					
TOTAL Rs.		7,42,56,896.07		TOTAL Rs.		7,42,56,896.07	

AUDITOR'S REPORT
"As Per Separate Report Even Date"

CHARTERED ACCOUNTANTS
AUDITOR'S

PLACE : LUCKNOW
DATE :19.07.2021

KIRAN SOCIETY, KIRAN VILLAGE, MADHOPUR, P.O. KURUHAN, VARANASI (U.P)

S.TULI & Co.
CHARTERED ACCOUNTANTS,
8-HALWASIA COURT,
HAZRATGANJ,
LUCKNOW.

CONSOLIDATED BALANCE SHEET AS ON 31.03.2021

LIABILITIES		Rs.	P.	Rs.	P.	ASSETS		Rs.	P.	Rs.	P.
CAPITAL FUND						FIXED ASSETS					
Balance as on 01.04.2020		9,65,56,477.38				(At Cost Less Depreciation)					
Add: Project assets Capitalized during the year		35,05,354.00				(As per Schedule)				6,48,36,731.00	
Less: Excess of Expenditure over Income		6,853.93		10,00,55,177.45							
CORPUS FUND						LIVE STOCK					
Balance as on 01.04.2020				64,35,800.00		Balance as on 01.04.2020				39,700.00	
PROJECT FUND F.C A/C (As per List)						CURRENT ASSETS					
Balance as on 01.04.2020		10,04,073.17				Stamp Paper for Land				1,11,000.00	
Add: Excess of Income over Expenditure		10,04,995.98		20,09,069.15		Balance as on 01.04.2020					
PROJECT FUND (GENERAL A/C (As per List)						INCOME TAX (TDS)					
Balance as on 01.04.2020		18,92,150.00				Balance as on 01.04.2020		4,06,017.42			
Add: Excess of income over Expenditure		11,35,653.64		30,27,803.64		Add: Deducted during the year		18,773.00			
CURRENT LIABILITIES						Less: Refunded during the year		4,24,790.42		4,22,410.42	
P.F Payble								2,380.00			
Balance as on 01.04.2020		2,66,756.00				SECURITY (Electricity)					
Less: Paid During the year		2,66,756.00				Deposited During the Year				2,14,791.00	
TOTAL Rs.				11,15,27,850.24		CLOSING BALANCES : (As on 31.03.2021)					
						(As per books of Accounts)					
						(I) FOREIGN CONTRIBUTION ACCOUNT					
						(As per books of Accounts)					
						Cash in Hand		796.00			
						Cash in Hand (SOIR-IM)		19,626.00			
						With U.B.I. S.B. / Flexi fix A/c No. 304002010008741		28,18,646.77			
						With U.B.I. S.B. A/c No. 399402010947008		12,08,314.27			
						F.D.R With Education Department (As per List)		3,500.00			
						Cash Certificates With U.B.I (As per List)		2,28,32,625.00			
						N.S.C With Post Office (As per List)		10,000.00			
						Accrued Interest on FDR's (As per list)		5,97,041.00		2,74,90,549.04	
						(II) GENERAL ACCOUNT					
						Cash in Hand		49,525.00			
						With U.B.I. S.B. A/c & Flexi Fixed A/c No. 5516		25,12,812.32			
						With B.O.B. C/A No. 1885 (Suryodaya)		9,322.50			
						With U.B.I. S.B A/c No. 399402010948602		8,02,449.96			
						HDFC Bank S.B. A/c 50200009741351		1,84,674.00			
						Cash Certificates With U.B.I. (As per List)		1,41,71,865.00			
						Accrued Interest on FDR's (As per list)		6,82,020.00		1,84,12,668.78	
TOTAL Rs.				11,15,27,850.24		TOTAL Rs.				11,15,27,850.24	

AUDITOR'S REPORT
"As Per Separate Report Even Date"

CHARTERED ACCOUNTANTS
AUDITORS

PLACE : LUCKNOW
DATE :19.07.2021

Help us to keep these beautiful smiles intact

YOU CAN

- Sponsor a child
- Donate through Give India
- Donate through our Website



Registered address

Village Madhopur,
Post Office: Kuruhuan
Varanasi - 221011,
Uttar Pradesh. India

Phone : + 91-7571010009
e-mail : mail@kiranvillage.org
Website: www.kiranvillage.org

Postal address

B 30/1D, Ganga Bagh Colony
Lanka, Varanasi- 221005,
Uttar Pradesh, India