

AnandaGrero
Memorial Resource Centre
Thalpawila
Matara



Sarvodaya Suwasetha Sewa Society Ltd.

Charity Registration No. ACT 9/87/12



Table of Contents

1. Title of Project	3
2. Project Period.....	3
3. Project Background and Problem Analysis.....	3
4. Purpose of the Project.....	4
5. Project Details	5
6. Project Implementation Methodology.....	7
7. Project Approach summary.....	8
8. Importance of the project for the overall implementation of the strategic plan	9
9. Experience gained from the previous project:	9
10. State policies relevant to the project:	9
11. Goal analysis:.....	9
12. Geographical area and target group:	10
13. Stakeholder analyses:.....	10
14. Monitoring system and Evaluation:	11
15. Analysis of organisational structure and implementation procedures:	11
16. Risks Analysis and action taken to mitigate the risks:	11
17. Sustainability analysis:.....	12
18. Budget (Please refer Annexure)	

1. Title of Project: AnandaGrero Memorial Resource Centre –Thalpawila, Matara

2. Project Period: 01-01-2016 to 31-12-2016(One year)

3. Project Background and Problem Analysis

The Lanka Jathika Sarvodaya Shramadana Sangamaya (popularly known as Sarvodaya) was founded in 1958 by Dr. A.T. Ariyaratne to uplift the most marginalized communities in Sri Lanka. Sarvodaya works with people at grass-root level awakening them to be aware of their potential, motivating them to work together and share resources to address common needs to encourage self-reliance within the community as a whole.

The Sarvodaya Suwasetha Sewa Society Ltd. was founded in 1984 as a legally independent social service organization within Sarvodaya, with a vision of a nation that respects the rights of children, adolescents, youth, elders and disabled persons to lead a life with dignity. Suwasetha in its mission promotes and protects the rights of children, adolescents, youth and persons with disabilities affirming their entitlement to love, compassion and protection within a caring environment.

The government started its first school for the disabled in 1912. Later on, the NGOs too established schools for children with disabilities. Special Education units were introduced to mainstream schools and in 1997 inclusion of children with disabilities in the ordinary classrooms was begun. However special education in the school system met with a range of constraints such as the lack of disabled-friendly class rooms, inadequate knowledge base of teachers and the poverty issues faced by children with disabilities. Despite all the government efforts to meet the need for providing and implementing strategies to protect, promote and affirm the rights of children with disabilities there is a long way to go before a situation of equity at least in quantitative terms is achieved in the delivery of services to disabled children.

Children with disabilities are a marginalised group within the already marginalized segment of the persons with disabilities in the mainstream society of Sri Lanka. Despite legislation and recognition of their needs in recent times, much needs to be done to remove the external societal challenges they are faced with in addition to their physical or mental limitations. They are rarely included in mainstream children's activities. There are only a few childhood disability programmes in the government and the NGO sectors. Childhood care and development programmes hardly target rural children with disabilities or include them.

Regarding health although disability is detected in early childhood no stimulation and follow up interventions are available to minimize consequences of disability. As a result, the development of a positive self-image and inherent skills get impeded. The mentally retarded and severely disabled children have hardly any services available in the health sector. They are often left isolated, segregated leading a poor quality of life. The girl children with disabilities are vulnerable to sexual abuse.

Their economic situation is no better. The monthly grant of Rs. 100-300 under the Samurdhi scheme is at times their only income. Selected families receive a government grant of Rs. 300/-. Opportunities to develop skills and go through vocational training are very low. It makes it difficult to break through the cycle of poverty that shrouds their lives as well as their families.

The public transport system does not cater to the mobility issues of children with disabilities. Limitations in mobility deprive them of their opportunities to education, skill development, and social life.

SarvodayaSawasetha through its special education unit at Thalpapwila in the Matara District has stepped in to breach the gap, at least minutely offering special education to the children with disabilities in the area.

4. Purpose of the Project

Persons with disabilities comprise 8% of the population and statistics reveal that 3.7% of them are intellectually impaired. A study conducted by the Department of Social Services claim that they are the poorest segment in the mainstream society. They have poor access to skills development and education. Although inclusive education has been promoted since 1997 a considerable proportion of children with disabilities do not start schooling. There are no opportunities for education for children with multiple disabilities and intellectual disability. Even for others, lack of adequate expertise and knowledge among teachers, and lack learning material results in poor quality of education. Career guidance and vocational training opportunities are severely limited. The presence of a child with disability within the family affects the income generating activities of the family. They are trapped in a vicious cycle.

Hence it is necessary to take steps to improve their quality of life and ensure their entitlement to rights as equal citizens of the country. The situation these children with disabilities are in can be changed by improving their language skills, changing their behaviour patterns, and training them in daily living activities and motor skills. Children with mild disabilities can be trained to understand personal cleanliness, develop communication and social skills to move into the mainstream education system.

5. Project Details

5.1. Main Objectives

To empower and rehabilitate disabled persons to lead an independent life at family and community level

5.2. Sub objectives

To promote right to education of mentally disabled children through provision of special education and prepare those who are capable to get into the mainstream inclusive education system.

5.2.1. Activities

5.2.1.1. Speech therapy clinics

Once in three months a speech therapist will conduct a half-day Speech therapy clinic for 15 children. Parents and teachers will participate in the clinic for training of activities. Children will be trained in communication, speech, identification of various items, and to remain in one place for some time. Individual progress of children, problems, issues and solutions are included in the plan.

5.3. Sub objectives

To enhance personal mobility skills through physiotherapy, community improvised mobility aids, devices and training,

5.3.1. Activities

5.3.1.1. Physiotherapy clinic

A monthly, half-day physiotherapy clinic will be conducted for 15 children. A physiotherapist attached to the Karapitiya Teaching Hospital in Galle has undertaken to conduct the clinic. Parents and teachers will participate in the clinic for training of activities. Individual progress of children, problems, issues and solutions are included in the plan. Referrals to appropriate clinics /hospitals for treatment will be made at these clinics.

5.4. Sub objectives

5.4.1. Activities

To connect disabled persons with service providers of health, education, social services, public administration

5.4.1.1. Primary health Clinics

A half-day Primary health clinic will be held once every three months by a Public Health Inspector and a Family Health Officer for 15 children with disabilities. The clinics will be held at the unit and individual checkups on primary health-dental, skin, nutrition, weight, and general health will be carried out. Parents will be given advice on prevention of secondary problems and behavioural patterns and feeding of disabled children

5.4.1.2. Participation in the clinic on Down's syndrome

In the 4th week of March every year, on Down syndrome day, KosalaDoollawa Foundation organizes a clinic at Royal College, Colombo. The children and the teachers of the Thalpawila special education unit will participate in this clinic. Specialist doctors will be carrying out physical checkups including the assessment of the mental condition of the children and also the dental and skin conditions their hearing and visual levels.

5.5. Sub objectives

5.5.1. Activities

Persons with disabilities, both children and adults, to enjoy a meaningful and independent life in the family and the community, integrating into society with confidence and dignity.

5.5.1.1. Language and Mathematical skills

Training on drawing, scribbling, matching pictures with suitable words, Reading and writing, identifying numbers, group formation of similarities, identifying shapes, basic mathematical skills, will be provided by 2 teachers to children with disabilities, at the unit, Activities will be regularly continued at their own homes and the classroom. These skills help them to be independent, move in society and express ideas and understand using money.

5.5.1.2. Training in Music Dancing and Art

15 children with disabilities at the unit will be trained in music, dancing, and art by two teachers. The activities will improve mobility, imitating others, working in groups, identifying sounds, tunes and singing. Further the activities will improve behavioural control and concentration.

5.5.1.3. Motor skill Training

Two teachers will conduct fine/gross motor training, cutting with a pair of scissors, tearing, clasping, pasting, rolling, sand and water play, picking and threading for 15 children with disabilities at the unit. They will also be taught movement of fingers, eye and hand contact, stay in one place over a period of time, improve body position, concentration, identification of colours, patterns, materials, size of items, working in groups, exchanging items among themselves.

5.5.1.4. Religious, cultural and integration programmes

Religious programmes will be conducted by two teachers, on the day before the Poya day of each month. Special events are organized to commemorate Children's day, Elders' day, Disabled persons' day, Teacher's day, Mothers' day, Fathers' day, and to celebrate the Sinhala/Hindu New year and Dr A.T.Ariyaratne's birth day.

5.5.1.5. Parents/teachers meetings

Parents, teachers, government officers e.g. Grama Niladhari, Social Services officer, Sarvodaya Suwasetha CBR manager will meet once every three months to discuss the progress of programmes, planning of new programmes, issues and solutions and the services offered by the government. A team comprising Social services officer, Family Health Officer, Public Health Inspector, and CBR manager, will conduct four Awareness programmes of 1 ½ hours' duration for parents of children with disabilities.

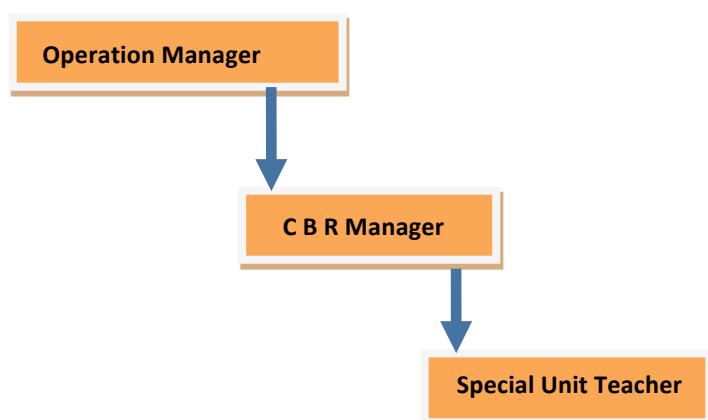
5.5.1.6. Integration Programme

Fostering good will and companionship will be encouraged by organising visits between pre-schools and formal schools with gifts and engaging in joint activities like, sports, games and dancing. Three half-day visits will be organised in a year.

Summary of Activities and Beneficiaries:

Activities	Beneficiaries
4 Speech Therapy clinics	15 children with disabilities
12 physiotherapy clinics	15 children with disabilities
4 primary health clinics	15 children with disabilities
1 Down's Syndrome clinic	15 children with disabilities
Daily Language and mathematical skills	15 children with disabilities
Daily training in music dancing and art	15 children with disabilities
Daily training in motor skills	15 children with disabilities
12 Parents & teachers meetings	30 parents and children with disabilities
Daily Training activities	15 children with disabilities
3 Integration programmes	15 children with disabilities 20-30 primary school children

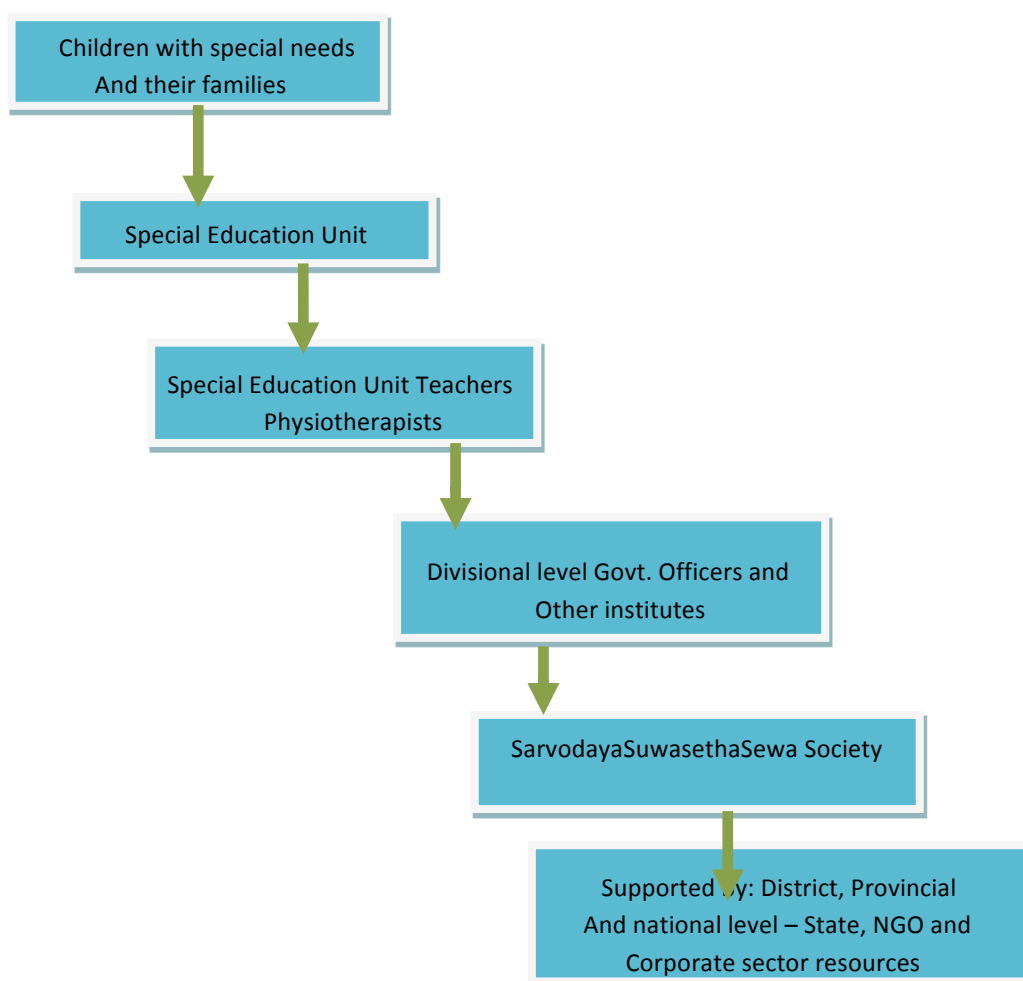
6. Project Implementation Methodology



A team of officers, the social services officer and social service assistants for the government sector, the CBR manager from SarvodayaSawasetha, the GramaNiladhari, SamurdhiOfficer, and Family Health Officer from the village level provide the guidelines, advice, and conduct monitoring and evaluation activities for the projects, The government officers at divisional and village level support the selection of children with disabilities to the Thalpwila special education unit and offer guidance regarding activities in health, education, livelihood, and social development. The special educational will work in close concurrence with hospital authorities, Formal schools, and pre-schools in the area and they will refer children with disabilities to the Thalpwila unit. Integration programmes such as drama, sports, music and art will be organized by them.

Thalpwila Special Education unit is designed to be a disabled child friendly unit. The class rooms are specially designed and the premises are designed to accommodate outdoor activities. The teachers will support at least two mothers per day. The children with disabilities will be supported by family members in completing their homework. A monthly meeting of teachers and parents will be held to discuss on parents’ responsibilities, children’s progress, individual and common issues, and awareness on special needs of children with disabilities.

7. Project Approach summary



8. Importance of the project for the overall implementation of the strategic plan

The project is an essential part of the strategic plan as it is a manifestation of the Suwasetha vision and mission. It is also an effort made by SarvodayaSuwasetha in empowering and rehabilitating disabled persons to lead an independent life at family and community levels. The issue of helping the disabled segment of our society to affirm their rights has not drawn the attention of the government or the Ngo sector very much. Statistics reveal the absence of opportunities for them to move away from their isolated, marginalized lives. As such the strategic direction of enabling the disabled is put into action through the Thal pawila centre.

9. Experience gained from the previous project:

The Sarvodaya Suwasetha Thal pawila special Education Unit that has functioned for the last 17 years. This unit has provided special education, protection and rehabilitation for 183 children with disabilities in the course of its existence, 119 children have integrated into the formal education system and 56 have been integrated into society.

Last year a number of children have been referred to special education

The experience gained in the previous years has sensitized us to the importance of physiotherapy in rehabilitation of children with disabilities. We have recruited a physiotherapist for our team and his/her advice and guidance in rehabilitating and making children with disabilities independent and enabling them to enjoy their rights will prove very valuable.

10. State policies relevant to the project:

The national policy and the national plan for the improvement of the quality of life of persons and children with disabilities deal with activities that fulfil the special needs of the disabled. Under this policy and plan the ministries of Social Services, Health and Education are directly involved in the programmes. As elucidated under the heading project methodology the divisional level government officers from these ministries take an active interest and participate in the delivery of services to the children with disabilities.

11. Goal analysis:

Project objective	Indicators	Source of verification
<i>What is the desired situation at the end of the project</i>	<i>What are the indicators verifying that the desired situation has been achieved</i>	<i>From where is the information regarding each indicator collected .</i>
Children able to handle daily life activities independently despite limitations	15 children with disabilities have improved mobility, motor skills A number of children were referred	Individual files Level of participation in religious and other group activities, end of

Children prepared to enter mainstream education system	to special education in the mainstream school system	year concert etc	
Children with social skills able to integrate into the community	75% of the children eagerly communicate with preschool children and formal school children at the integration programmes		
Expected results	Indicators	Sources of verification	Activities
<i>On a lower lever, what are the expected results leading up to the project objective</i>	<i>What are the indicators verifying that the result has been achieved</i>	<i>From where will the information regarding each indicator be collected</i>	<i>What are the core strategies/main activities leading to the expected result</i>
Improved general health and personal hygiene	80%of the beneficiaries are conscious of personal cleanliness	Individual files and progress reports	Training , therapy and health clinics at the centre and follow up interventions at home and classroom
Improved behavioural traits	75-80% of the children move confidently with children from formal schools		
Improved communication skills	75% Of the beneficiaries eagerly communicate with preschool children and formal school children at the integration programmes		

12. Geographical area and target group:

Children with disabilities identified by government officers and GramaNiladhari as either unable to access available services and need special education, or severely disabled children with a need for regular and systematic care are targeted by the centre. The children are located in the surrounding areas of Thal pawila and within the Matara District.

13. Stakeholder analyses:

Stakeholders of the project comprise the government officers supporting the activities, the medical personnel, the specialist teachers, Suwasetha CBR manager and organizations and individuals who sponsor events.

14. Monitoring system and Evaluation:

The 15 children with disabilities at the special educational unit in the Thal pawila centre have been allocated individual files maintained by the teachers. The system will continue and the monitoring of activities will be done through these files. The two teachers will prepare the weekly programmes and it will be displayed for the parents to be prepared for them.

The programme coordinator, a new addition to the team will collate the monitoring and evaluation information provided by the teachers of the special education unit and prepares the quarterly reports.

Annual progress report will be submitted annually between the months of January to March. The progress, achievements, problems and sustainability strategies on activities of the Special Education unit will be discussed in the annual report.

15. Analysis of organisational structure and implementation procedures:

The organizational structure is simple and uncomplicated. Manager, Operations of SarvodayaSuwasetha will be responsible for the supervision and effective implementation of the programmes through the CBR Manager. The two specialist teachers, the physiotherapist and other specialists in different activities will support them in carrying out the activities. The Programme coordinator will be collating monitoring and evaluation information provided by teachers of the Special Education unit, reporting and documentation.

16. Risks Analysis and action taken to mitigate the risks:

Expected results (copy from 4)	Internal risks (within the project)	External risks (outside the project)
Improved mobility and ability in performing day to day activities	Poor attendance on the part of beneficiaries Action Taken: Through point 5.5.1.5 (Parent/teacher meetings) this problem appear to get reduced	Transport problems Actions taken: Have made arrangements for a Car pooling system wherever possible
Eye and hand coordination	Secondary problems that arise can hamper progress Action taken: We have recruited a physiotherapist to deal with such problems Refer 5.3.1.1	

Strengthened parents with knowledge to be self-reliant	Educational level of the parents Action taken: Awareness programmes for parents through parent teacher meetings.	
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17. Sustainability analysis:

The Thalpwila special education unit has been functioning since 1988. At present it accommodates 12 children and it will increase to 15 in the coming year as arrangements are afoot to enrol more children with disabilities. The main aim is to provide care and rehabilitation in a protective environment, developing and improving their skills and talents and to ensure a safe reintegration into society.

Through its mission of rehabilitating and affirming the rights of persons with disabilities, Sarvodaya Suwasetha Thalpwila centre, works in harmony with the government and non-government sectors, parents and caregivers, and receives the fullest cooperation of all its stake holders, The sustainability of the project depends on the good will of the stake holders and needless to say the generous support extended by Sarvodaya Netherlands.

18. Budget (Please refer Annexure)