



# SEVA KENDRA CALCUTTA

Social Service Centre of the Archdiocese of Calcutta

## Annual Report 2011-2012



*“called to serve,  
called to heal”*



## VISION

“A self-reliant society based on peace, love and justice, respecting the human dignity and natural environment”.

## SPECIFIC OBJECTIVES

- ▶ Mainstream the dropout children to school through STAG methodology and combat child labour
- ▶ Skill development training for the unemployed youth
- ▶ HIV/AIDS community care & counseling centers
- ▶ Teach importance of Herbal medicinal plants growth and use
- ▶ Support TB (RNTCP) programme
- ▶ Stop human trafficking, promote Safe Migration and prevent early marriage
- ▶ Build self-reliant SHGs & CBOs
- ▶ Peace building through reconciliation
- ▶ Promote organic and indigenous methods of cultivation
- ▶ Work with Panchayati Raj Institutions (PRI)
- ▶ Mobilize Government Programmes for development, food, livelihood
- ▶ Develop solar and renewable energy
- ▶ Harnessing natural resources
- ▶ Community Managed Disaster Risk Reduction
- ▶ Emergency relief & rehabilitation
- ▶ Mobilize local Resources and Funds

## SEVA KENDRA CALCUTTA

Seva Kendra Calcutta is a social service centre of the Archdiocese of Kolkata. Across the years it has built up a reputation of service, trustworthiness and integrity. It serves the poor, suffering, struggling and disadvantaged people of West Bengal and is being constantly challenged to improve upon itself, as a catalyst for social change through service, animation and mobilization of people and build a network of partnership with the like-minded organization.

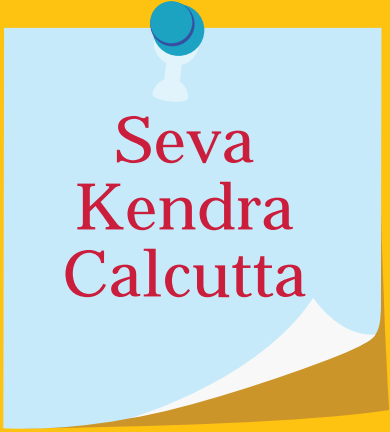
## MISSION

Building of a Harmonious Society, based on Cultural Ethos, inspired by Spiritual Heritage, Socially and Environmentally sound through Participatory Process.

## GENERAL OBJECTIVES

- ▶ Achieve formal education of all children at least till class VIII
- ▶ Improve maternal and child health and Combat HIV/AIDS, Malaria and TB.
- ▶ Promote gender equality and empower women specially ST/SC.
- ▶ Build a network of partnership to work for livelihood and employment
- ▶ Promote eco-sustainability and natural resource mobilization
- ▶ Mobilize local resources





# Seva Kendra Calcutta

Annual Report  
2011 - 12

## In this Issue...

### ★ Seva Kendra Calcutta

Mainstreaming the dropout children to school

Development Programme for Rag Pickers in Kolkata

Natural Resource Management

Alternative Energy Solutions

Seva Kendra Calcutta Community College

Seva Kendra Community Care Centre, Dum Dum

St. Joseph's Community Care Centre, Medinipur

St. Joseph's Hospital, Medinipur

Stichting Actie Calcutta

Community Managed Disaster Risk Reduction (CMDRR)

Revised National Tuberculosis Control Programme (RNTCP)

Polio Eradication Programme

Training Centre

### ★ Seva Kendra Extension Kharagpur

Child Centred Development on School Based Approach

Training Centre

### ★ Donors / Donor Agency

### ★ Local Resource Mobilization

### ★ Thank You Fr. Reggie

### ★ Members of Governing Board

### ★ Finance, Management & Project Selection Committee

### ★ A Big Thank You to All

### ★ Campaign against Hunger and Disease

### ★ SKC Staff

### ★ Finance

## Message From The Director

“Called to Serve, Called to Heal”



After ten long years of dedicated service to people through Seva Kendra Calcutta, Fr. Reginald Fernandes, the former Director of SKC officially handed over the charge to me on June 6, 2012. He has been appointed as the Director of St. Joseph's Hospital, Medinipur and also as Administrator of Seva Kendra Extension, Kharagpur. During his tenure, SKC has grown in leaps and bounds. He has left behind his indelible giant footprints on the shores of SKC. His sagaciousness, creativity, undaunting courage and immense faith in the providence of God have taken SKC to the remotest corners of the Archdiocese of Calcutta. In some parts of the Archdiocese, Seva Kendra is a household name. I join the Governing Board, the Finance and Project Selection Committee, the Staff and all our partners in thanking him for his immense contribution to society through SKC.

If I look back at the year gone by, it has been for Seva Kendra, “A Call to Serve, A Call to Heal”. This work was accentuated with the starting of St. Joseph's Hospital in Medinipur. Our work focused primarily on polio eradication, combating Tuberculosis and providing succor to the HIV/AIDS affected. Healing the world involves various other aspects other than health. We are deeply aware of the malady of our eco-system and SKC is deeply committed to play a dynamic role in caring for our eco-system. We are also reaching out and providing care to the vulnerable children in our effort to heal the world.

I look at the proximate time ahead of us as a time meant for consolidating the efforts made by my predecessors. As I reminisce about the efficacious 'seva' rendered by SKC to the society with great joy, I look forward with sanguine expectation of the ameliorative role SKC will play to “heal the world”. On December 14, 2012 we would be completing 39 years and entering into the 40th year of the life of SKC. A time has come to celebrate the RUBY JUBILEE of Seva Kendra Calcutta. I assure you that during the Jubilee Year we in SKC will also spend time to ponder upon some very crucial questions:

- ▶ How do we see the world in which we live?
- ▶ Who we are?
- ▶ Where we are and what we are doing?

An in-depth critical reflection of our world view and our engagement will hopefully show us the path on which to tread as we journey towards the Golden Jubilee of SKC.

Rev. Dr. Franklin Menezes  
Director

# STAG (Skill Targetted Academic Growth) Mainstreaming the Dropout Children to School

## Mainstreaming Centre SERAMPORE, HOOGHLY

Supported by: Indienhilfe e.V. Germany

Present status:

	Girls	Boys
Total Enrolled (20)	5	15
Left the program due to ill health : 2		
Mainstreamed (14)	3	11

Activities/Achievements:

- Conducted home visits to motivate parents to send their children to school regularly
- Home survey helped to identify, screen and admit dropout children into our mainstreaming centre
- Employed STAG & Joyful learning methods to help the children academically
- Encouraged children to open-up and realize their full potential through various co-curricular activities like songs, dance, recitation, skits, art and meeting visitors
- Outdoor visits to local places and social fairs helped children to relax and also expand their knowledge of the local surroundings
- Fun-time spent in the kitchen garden, helped children to develop green fingers and appreciate nature for its gifts
- International Child Development Programme (ICDP) meetings conducted monthly to share progress of the child with his/her ward
- Regular communication with donors helped in the smooth running of the mainstreaming centre
- Rescued two girls and four boys from child labour and admitted them in the one-year STAG course

Case Study

Four children Sandhya, Deb Kumar, Supriya and Mamoni Munda belong to poor parents who work in Kerala as labourers. Since these children do not have any other person to look after them at home, they were also taken to



Kerala by their parents. These young children between the ages of six to ten years were put to work too in order to supplement the family income. They did domestic work like cleaning the floor, baby sitting and carrying drinking water from door to door.

During one of their visits back to their native place, a Child Rights

Worker (CRW) caught up with the families of these children. The worker understood the role of these four children and realized that education was not on their daily agenda. She wasted no time to motivate the parents to send their children to the mainstreaming centre, pointing out that the children would be educated. The CRW worker also assured the parents that the children would also be looked after while they are out on work. The parents considered this good for the welfare of their children and agreed to admit them. As the four children were admitted recently, their academic growth is unpredictable, but one cannot help noticing the shine in their eyes! They are happy to be a part of the mainstreaming centre and learn.



## Mainstreaming Centre PALBARI, MEDINIPUR

Supported by: Stichting Actie Calcutta (SAC)

Present status:

	Girls	Boys
Total Enrolled (27)	12	15
Left the program due to ill health : 2		
Mainstreamed (25)	11	14

Activities and Achievements:

- CDP meetings organized with parents and teachers every month to give a feedback on child's progress and help develop a healthy child-guardian rapport for all round development of their ward.
- Organized visits to school in Nilpada, Kotapada, Mohorpun, Kajipara Bencha and Kesharmda to seek evaluation from the headmistress and teachers about the mainstreamed children.
- STAG methodology & Joyful learning methods worked very well to restore children's self confidence and willingness to know and learn the skills.
- Exposure visits conducted to widen the knowledge of these children
- Helped children to open up and realize their full potential through co-curricular activities like songs, dance, recitation and meeting visitors
- Well established rapport between parents and management has been a very positive factor to run the centre very effectively.



Case Study

Sefali Murmu belongs to Biacha village in West Medinipur. Her parents work in the fields. She left her studies when she was in the third standard. Now she helps her parents in looking after the household work. Whenever she finds time, she polishes her dancing and singing skills too. She is 11 years old now. After she joined the Stag in Palbari, she went back to her home and got herself admitted in fourth standard at the school in her village. She goes to school regularly and also motivates other children to do the same. She is loved and admired as a good girl by all the teachers of her school.



# DEVELOPMENT PROGRAMME FOR RAG PICKERS IN KOLKATA

(We express our sincere thanks and gratitude to Caritas Germany for supporting this project)

*A call to come together .....*

The "Development Program for Rag Pickers (DPRP)" was initiated in November 2008 in four clusters under jurisdiction 57 & 58 ward of Kolkata metropolitan city namely Kilkhana site, Lanedhar, Kuliatangra and Muslim camp. The habitats of these places are mostly the vulnerable and neglected population of Urban Kolkata.

They migrated as unskilled labor mostly from Bihar and other parts of the country. Their temporary residents can explain why government has designed very few policies to improve their condition. Most of them don't have identity cards or birth certificate and therefore have been struggling to access to basic governmental facilities. 'Social Exclusion' from the large society has affected their lives badly in terms of social, intellectual and economic growth.

SKC has been successful in its effort to gain acceptance in their communities through rapport building and empowering these people to meliorate their living conditions and make them aware of their rights.

## Impact Vs Activity

Identifying self worth – Using the 'being with' approach, various capacity building training and awareness meetings were organized. SKC along with the ceaseless efforts of the eight animators who are from the same community helped the participants believe in their worth. Training in various subjects like problem assessment, leadership, communication, HIV, tuberculosis, DOTs, climate change, etc. were provided to them. They have made a respectable place for themselves in their society.

We can do – Four groups namely Children parliament, Youth group, Task Forces and Mothers group in four clusters were mobilized and capacitated by trainings. Group activities have also been organized. Enlightening and competitive programs for the rag picking community of all age group have been organized with the purpose of generating awareness and maintaining cohesiveness among them. Intern groups have started to respond to their social issues. The success they have achieved so far has further helped in cementing their firm belief in 'we can do by ourselves'.

Our lives our responsibility – Participatory Learning Action (PLA) has positively helped in changing the mindset of the people about taking personal responsibility in bringing the desired change. People have become aware that there are opportunities available to pull themselves out of the prevailing hazardous and deprived situation. In order to properly plan and carry out the development work effectively they have organized themselves into 20 task force groups in four clusters.

I care for myself and my 'basti' - The youths and children were educated, mobilized and capacitated through capacity building trainings by forming groups in the four clusters. They are now involved actively in group building by enlightening others and organizing competitive programs for themselves and the people of the community of all age group. These steps taken have gone a long way in generating awareness and strengthen cohesiveness among the members of the group.

Working together as a change agent – As members of these groups and also at times acting alone the people are organizing community meetings, participating in Para level meetings, Stake holder meetings and mobilizing the target people to attend the programs. The ceaseless efforts of the animators, Task Force, Youth and CP members, could make this possible. Trainings in various subjects like Participatory Learning and Action, Leadership, Communication, HIV, Tuberculosis, DOTs, minimum safety measures while waste collection, importance of vaccination, Climate change etc were provided by SKC.

## Challenges Faced

- ▶ High turnover of working force – All field animators are graduate or under graduate students, therefore regular participation is often challenging
- ▶ Dependency – people expect overnight and quick-fix solutions to their problems and also want others to solve it for them
- ▶ Identifying 'interested people' – Affected people are interested in solving their own issues and give up easily on working together to solve them
- ▶ Future Plan
- ▶ More focus on capacity building trainings and activities for various groups
- ▶ Establish interest based 'Open Network'
- ▶ Expansion of working areas

## The President – A case study

Dilshad, a boy from the slum area of Tangra with only a primary school education, has now transformed himself into a great social worker. Three years ago he was just another common boy of the community. After joining a youth group under the "Development Programme for Rag Pickers" (DPRP), Dilshad's leadership qualities were discovered and developed. His hidden talents were brought to the forefront when Dilshad became the President of the youth group named Notun Asha. He started to organize and conduct social activities in the slum

for the development for the city-beautifiers. Soon the people of the slum started to address him as "The President". Even the Headmasters of the local Government schools and the Tangra Police officers know him for his social involvement.



Around a hundred poor students were trained by Dilshad in "Kiran Computer Centre" a project of Kolkata Police, free of cost. Dilshad also undertakes awareness campaigns in the slum area and helps the corporation to keep the area clean.

Dilshad is grateful to SKC for providing him a platform and encouraging him to explore and utilize his inherent leadership qualities for the benefit of his area and his community.



# NATURAL RESOURCE MANAGEMENT

(We express our gratitude to MISEREOR, Germany for supporting this project)

The SKC's Project on Solar renewable energy is a viable step towards seeking alternative energy solutions to address the most pressing problem of lack of electricity in eleven villages of Dantan block in Medinipur. Introducing solar lanterns in place of kerosene lamps has ushered in a new era of development in these villages. Children who earlier studied under the little light of kerosene lamps inhaling toxic fumes thus risking their health can now study effectively under the bright and clean light of solar lanterns. It has also opened up new avenues for youth employment by skill based training to assemble these solar lanterns. This project will indeed play a promising role in improving the social lives of the people in these villages.

## Achievements

DISTRICT	BLOCK	NAME OF THE PANCHAYAT	NAME OF THE VILLAGES	NO.OF.HOUSES	TOTAL POPULATION
MEDINIPUR	DANTAN -1	Tarurai	Gobra	45	02
		Chakismailpur	Sabrapitch	42	195
		Alikosha	Kadam Kori	37	165
		Dantan 1	Krishnapur	47	211
		Monaharpur	Sakari Daga	76	315
• TOTAL		5	5	247	1088

- Our NRM project includes 9 Panchayats in 11 villages and 911 families and the total population is 4676 in Dantan 1. Within a short span of five months (November 2011- March 2012) we managed to cover 5 Panchayats in 5 villeges where 247 families benefited from our effort
- Unemployed youth who are trained to assemble the lanterns are employed and financially independent
- The marginalized families who use solar lanterns save on cost of buying kerosene which helps them in other family expenses
- The saved kerosene oil is used to pump water and run generators.
- Children can now study effectively
- The solar lanterns are also used during social gatherings, small traders/shop owners etc.

## Case study

Rabindra Parriya is a farmer from Palsandapur village. He owns a small piece of land and grows paddy on it. Rabindra and his wife also work as daily

labourers. They have three school-going children. Their village has no electricity and so they use kerosene to burn lamps, cooking stoves and other household work that requires kerosene. In February 2012, Rabindra bought a solar lantern at a subsidized rate of Rs. 1350 which has now turned into a good investment for his family. His family's dependence on kerosene for energy needs has reduced considerably. Now the children are able to spend more time on their studies. The white light illuminates a larger area so the children do not need to huddle around the lamp. Rabindra was able to save 4 litres of kerosene oil in the first month and sold it for Rs. 180/-! The money that he saved was used to buy other necessary items for his family. His neighbor also regularly borrows the solar lantern from Rabindra on rent and pays Rs. 75/- each time.

This is the story of all the families who have wisely invested in a solar lantern. They have experienced the benefits of using clean and natural energy and have also saved money!

## SEVA KENDRA'S ALTERNATIVE ENERGY SOLUTIONS PROJECT

Lack of access to modern energy facilities condemns millions of people in India to live in absolute poverty. Presently, about 80,000 villages in India have no electricity. These villages therefore have limited access to modern communications, inadequate education and health facilities and under-performing work and businesses.

The role of new and renewable energy has been assuming increasing significance in recent times with the growing concern for the country's energy security. Our programmes are designed to help institutions and individuals to

seek alternative solutions. We provide them with technical and business advice and link them with various institutions to deliver concrete results in their communities.

SKC has been working toward providing clean energy so that children can study in a well-lighted place and people can experience well-being in their community. All of this is achievable through self-reflected action taken to minimize the use of fossil fuel.



### Activities:

#### Technology

SKC provides technical training and advice; assistance with product sourcing and manufacturing; facilitates access to technical advice.

#### Skills

SKC trains entrepreneurs in business planning, sales and marketing, record keeping thus helping them to develop their businesses and gain access to capital.

#### Delivery network

SKC uses its local knowledge to advice entrepreneurs about alternative suppliers, buyers/distributors/markets and technology/ product offerings, and collaborates with entrepreneurs in purchasing and sales opportunities.

#### Achievements

- ▶ 56 young men and women are trained to assemble solar lights
- ▶ 7 institutions are supported to install solar photovoltaic and water heating systems
- ▶ 2 regional level workshops on 'Promotion of Solar energy'

#### Future Plans

- ▶ SKC as eco-friendly and self-sustained campus
- ▶ National level network for promoting renewable energy



## SEVA KENDRA CALCUTTA COMMUNITY COLLEGE

Seva Kendra Community College was started on 1st December 2008 with 20 students. It is an alternative system of education, aimed at empowerment of the disadvantaged and the underprivileged urban and rural poor. The education is focused on employment with the support of the local industry. Courses are conducted on soft skills, basic electronics, computer hardware, culinary art and nursing. Improving spoken English of students is given equal importance during these courses.

#### Industrial partners

Community College can succeed only with the active participation and collaboration of local industrial partners.

Our partners are:

- ▶ Jindal Computers- provides computer hardware training to the students, enabling them to upgrade knowledge and develop practical skills in computer hardware.
- ▶ Bellona Nursing & Diagnostics Centre- provides nursing assistant training to the students, enabling them to upgrade knowledge and develop practical skills in nursing.
- ▶ SYNERGY Kitchen & Hospitality Ltd. And Moulin Rouge- provide training to our community college students to become assistant cooks

#### Courses undergoing

- Computer hardware - Since April 2011 the enrolment to this course has increased. Students taking up this course are positive about the usefulness of this course for them in the future.
- Nursing Assistant – The participants are given hands-on training in different hospitals along with their regular theory classes at SKCC.
- Assistant Cook – Through this course many of our students have got jobs overseas and have fulfilled their dreams.
- Basic Electronics and maintenance of solar energy equipment – This new course enables the students to assemble solar lamps and other solar energy equipments. Some of the former students have also begun training the new students.
- Fundamentals, MS-Office, and Internet – Knowledge of using computers has become increasingly imperative to gain employment and therefore the course draws maximum participation. Many of our students have are employed and doing well in their work.
- Tally & DTP (Desktop publishing) – These are the two new courses recently registered by the Directorate General of Employment and Training (DGET). There is a growing number of participants in these courses.
- Soft Skill for Baseline Staff in service sector & Soft Skill for frontline Office Assistant – These MES courses have helped our students to develop strong communication skills for personality development.

#### Case Study

Alex Dessa (SKCC's student of the 7th batch) became despondent due to poverty and lack of opportunities in his life. He lost his father at a very early age. It was not possible for his poor mother to educate him soon after her husband's death. And therefore he lost all interest. His uncle helped him to get admission in Seva Kendra Community College. He is a happier person now and gives credit to SKCC for having helped him become hopeful and build his confidence to face the world more boldly.



## SEVA KENDRA CALCUTTA COMMUNITY CARE CENTRES

Our Community Care Centres (CCC) for HIV/AIDS at Dum Dum and Medinipur have been working well over these last few years. Our CCC staff members are very caring and understanding towards People Living with HIV/AIDS (PLHA). When the clients visit our Community Care Centres, they come with a lot of anxiety, depression and negative attitude towards life. After the short stay at CCC, the clients are able to acquire positive attitude towards life. The service to the clients continues even after they are discharged- through home visits and follow ups. In this way a client becomes a family member of Seva Kendra's Community Care Centre.

### Seva Kendra Community Care Centre, Dum Dum

Our aim is to improve the quality of life of people living with HIV/AIDS (PLHA) in North 24 Parganas & Nadia districts of West Bengal and provide a sense of belongingness among PLHA and their families for full and active participation in society and also to reduce further HIV transmission. Seva Kendra Calcutta opened a 10 bedded Community Care Centre at Dum Dum Cantonment, Kolkata in September 2008. In Patient and Out Patient services were started from December 2008.

Since the initiation, we have provided support to 1527 new clients through In patient and Out patient services. Since April 2011 to March 2012, we have registered 560 new clients. Out of these 450 are on On ART (Initiated Antiretroviral therapy), 110 are PRE ART (Antiretroviral therapy not yet initiated).

863 old clients also receive continual health care support from CCC. Out of which 686 are On ART out patients, 85 are PRE ART out patients, 89 are On ART in patients and 3 are Pre ART in patients. During this period 463 PLHA (People living with HIV/AIDS) were referred by the Government ART



centre and 97 PLHA visited on their own. We have also provided counseling on drug adherence to 393 new clients, 753 old clients and families of 615 PLHA on various issues. Out Reach Workers have visited the homes of 638 clients to verify address, follow up on CD4 count, adherence assessment, home based care and other services as per the need of PLHA. We have also referred 867 clients to various service delivery points.

#### CASE STUDY

Mr. Anjan Das (name changed) is the only earning member in the family of four. His wife Mrs. Sephali Das (name changed) is a house wife and they have one girl and a boy. Their two year old son started suffering from severe malnutrition and recurrent respiratory infections. He was detected as reactive to HIV. They were sent back and were asked to contact the local ART centre. Since they did not know what ART centre was they did

nothing about it. One of our Out Reach Worker later came to know about it and brought them to our CCC. Our counselor spoke to them and convinced the whole family to visit ICTC (Integrated counseling and testing and testing centres) for test. It has been found that all four members of the family are reactive to HIV. This was shocking news to the family. The parents were anxious and depressed and the father developed suicidal ideation. Our counselor worked on the family and motivated them to undergo further treatment.

The ART centre appreciated our efforts and accepted our suggestion to treat them together at our CCC center. The whole family stayed at our CCC for 6 days. Our CCC staff right from the doctor to the cook treated the case in a special manner. Finally on they were discharged from CCC with a smile on their face.

They told us that the love, concern & care of Seva Kendra staff is an inspiration to them to start a new life and that they will follow the advice provided at Seva Kendra to continue ART throughout their life for a better future.



### St. Joseph's Community Care Centre, Medinipur

St Joseph's Community Care Centre was started in March 2009 in order to bring credulous transformation into the lives of HIV infected people. The centre, set amidst pristine and picturesque greenery and a mere ten minutes drive from the main town is a clear escape from the frenzy and the harshness of urban life. Catholic Bishops Conference of India, under the project 'Promoting Access to Care & Treatment (PACT) generously provides financial and technical assistance.

From January 2011 to May 2012 there were 508 new registrations, 1125 outpatients, 653 inpatients and 989 home-visits conducted.

St. Joseph's Community Care Centre provides following services:

- ▶ Qualitative counseling in the form of group, individual and couple counseling.
- ▶ Assist the participants to conduct test/s prescribed by the doctors
- ▶ Referrals to ART center, DOTS, ICTC etc.
- ▶ Free checkups and medication facilities under the care of experienced Doctors

- ▶ Drug counseling, infection prevention at home and Minor OI treatment.
- ▶ Regular home visits to check on follow-ups and adherence level.
- ▶ Home visits also conducted for LFU/ Miss Visit patients



#### Achievements

- ▶ Succeeded up to some extent to facilitate more PLHIVs
- ▶ Trace back the miss visit and LFU clients and ensure 100% adherence through counseling
- ▶ Home visits for address verification of new registered clients
- ▶ Increase bed duration percentage, monitoring of side effects for lead-in cases



Month	New Registration	Total OP	Total IP	Drug Counseling	Bed Occupancy	Home Visits
Jan-11	25	63	35	96%	78%	72
Feb-11	26	43	37	87%	100%	65
Mar-11	45	81	48	100%	79%	69
Apr-11	29	85	41	97%	96%	33
May-11	37	82	50	100%	82%	59
Jun-11	35	88	51	93%	93%	47
Jul-11	36	75	42	92%	92%	43
Aug-11	36	52	39	89%	96%	46
Sep-11	27	64	44	92%	102%	50
Oct-11	22	46	20	100%	37%	46
Nov-11	31	49	26	77%	42%	52
Dec-11	24	26	31	86%	63%	52
Jan-12	15	38	27	100%	44%	57
Feb-12	25	89	46	86%	88%	50
Mar-12	41	121	36	98%	84%	121
Apr-12	28	65	39	97%	92%	97
May-12	26	58	41	98%	84%	82

#### Future plans

- ▶ Need to have an effective coordination between ICTC, ART centre,
- ▶ DOTS & Other Service Delivery Point
- ▶ Expand the community sensitization programme like group meeting and interaction exposition
- ▶ Counseling and record keeping should be done accordingly
- ▶ Opportunity should be given to PLHA to share their experience & suffering from HIV/AIDS
- ▶ Referrals to various government facilities and schemes

#### Case Study

Kajol Pal belonging to a very conservative family became a widow with a son at a very early age. Soon after her husband died, her in-laws began to physically torture her. Her physical condition deteriorated. She visited some local doctors but her health did not improve. Later she came in contact with a CINI link worker who referred her to ICTC for HIV test. She was tested positive and her son was tested negative. When her in laws learnt that she was HIV positive, she was further tortured and finally kicked out of her house. She took refuge in her parent's house. Since her parents were poor, they asked her to find a job. So she approached us for a job and we appointed her as the Out Reach Worker. She is now very happy and independent.

## ST. JOSEPH'S HOSPITAL

(Supported by Likvidace Lepry, Czech Republic)

St. Joseph's Hospital was inaugurated by Dr. Vojtech Elias, President of Likvidace Lepry of Czech Republic. Former Archbishop Lucas Sirkar and Archbishop Thomas D'Souza blessed the hospital on 11th November 2011. Three buildings; General Hospital, Dispensary and Convent came as a gift from Likvidace Lepry to work for TB, Leprosy and serve the poor people of the area for general sicknesses. The Hospital has a pharmacy, laboratory for biochemistry and pathological tests, digital X-ray and ultrasonography with color Doppler. Fr. Reginald Fernandes is appointed as Director of St. Joseph's hospital. There are 15 Consultants for Medicine, Cardiology, General Surgery, laparoscopic Surgery, Urology, Pediatrics, ENT, Ophthalmology, Gynecology, Radiology, Dentistry, Pathology and Biochemistry. 3 RMOs are appointed and they are available round the clock 7 days a week.

Nearly ten thousand people have been treated in the Outpatient Department (OPD) since January when it started. Inpatient services started in February. There were 163 endoscopy and 28 operations conducted.

Training in bedside nursing was started on 25th May for the tribal catholic boys and girls who finished matriculation and higher secondary. There are 21 girls and 2 boys from different parishes of Medinipur deanery. They have theory classes and practical classes at the hospital. Sisters of the Divine Saviour have started a community with four sisters on 16th May 2012 and they are in charge of different departments.

A pond is dug in front of the hospital and the area is leveled with the pond mud. We are planning to have a good rose garden in front of the Hospital with music system where people can relax.

Seva Kendra is supporting the hospital for its staffs' salary, Likvidace is supporting the running expenses of the Hospital and some portion of the Hospital's food expense is being supported from the farm.



## STICHTING ACTIE CALCUTTA



SAC Netherlands (Stichting Actie Calcutta; foundation Action Calcutta) was established officially in 1974 with the aim of supporting the poorest children for education and lodging. It started its work in collaboration with Mother Teresa. The collaboration soon ended after Mother Teresa found it difficult to involve her sisters with administration of the children. Since then SAC collaborates mainly with diocesan priests and religious priests and sisters of various congregations. Initially individual children were supported. But because of the difficulties to monitor the expenditures and because of jealousy of other children SAC changed over to sponsor official institutes like hostels and informal schools only. There are various types of sponsorships, but in all cases the financial support is meant for all the children in the hostels and schools involved.

At the start of SAC many people became interested after Mother Teresa had visited The Netherlands in 1973 and promoted SAC in an interview on the TV. But these last years SAC experiences a severe decline in the number of sponsors due to competition in the charity market, aging and death of sponsors and other interests of younger people.

In 2010 there were 3360 sponsorships but the prognosis for 2013 is 2100 only. Due to the financial crisis in Europe SAC has also lost a considerable amount of shares in the stock market. However, SAC tries its utmost best to design a modern and more attractive outlook to get more, especially younger people interested for supporting poor children.

In the foregoing years centres were sponsored without a fixed deadline. Various hostels for instance are aided for more than 30 years. The sponsoring of these hostels will be stopped gradually. The present policy of SAC implies that centres have to strive for sustainability and self-support. New centres will be confronted with a limited period of support.

In November 2011 the chairman, Mrs. Joke Jansen and the secretary, Mr. Peter Rooimans together with their partners paid a visit to India. Stress laid on the monitoring of various projects and hostels supported by SAC. They also paid a visit to the "Rainbow Homes Coördination Centre" in Hyderabad. Rainbow Homes take care of street children. They get lodging, medical care, food and education. From Hyderabad all the Rainbow



Homes in India are coordinated and new homes are developed according to a fixed plan. The visitors were informed about the procedures of the Coordination Centre and specifically on the cooperation with the local governments. The Rainbow Homes are directed by 8 NGO's. These NGO's interact with the local governments in striving towards CBO (Community Based Operation) and sustainability. The result will be that the government will ultimately finance these Rainbow Homes.



The foregoing members of SAC also visited various centres in the dioceses Balasore and Berhampur. They encountered dedicated persons heading the centers but also experienced a lacking overview of the management of the hostels. That means no exchange of experiences. The SAC delegation has advised the diocesan office to evaluate the management of the hostels. Only then can be decided which hostels need support most urgently. SAC will set the first move for an evaluation report.

## COMMUNITY MANAGED DISASTER RISK REDUCTION (CMDRR)

(Supported by Caritas Germany through Caritas India)

This community based participatory project is aimed towards reducing risk during disaster. Members from the most vulnerable families actively participate in this program.

A village level plan incorporating Disaster Risk Reduction plan is drawn once the community identifies common vulnerabilities, risks and capacities. CMDRR program is now being organized in Swarupnagar & Baduria Block in North 24 Parganas West Bengal. Most of the work on planning was done by PRI (Panchayati Raj Institutions) and the local people. The local people take responsibility to contact the authorities and

involve them in the disaster risk reduction program. In this program they are able to use MGNREGA, IYA, Old age pension, Widow Pension, Janani Suraksha Yojana, single women Pension, Low cost sanitation and differently able person Scheme. PRI members have learnt the importance of CMDRR process. According to them this method leads people to participate in their own development process. The task force members of CDBP area in collaboration with PRI members selected the beneficiaries and distributed materials as emergency relief for flood victims of Swarupnagar, Baduria and Habra Block. Mr. Ashutosh Biswas is the project coordinator.



Activity	Target	Achieved	Male	Female	Total
Family level Preparedness	60	60	727	806	1533
Sensitization on Safe drinking water	30	30	454	476	930
Vulnerability, risk & capacity analysis for each village undertaken by participation of most vulnerable family by using appropriate PLA tools.	60	60	840	960	1800
GP and Block Level Sensitization Program on CBDP Concept.	14	14	193	95	288
School Sensitization Programme .	8	8	435	365	800
Gram Sansad & Gram Sabha Mobilization	35	35	635	422	1057
Community level Focused Group Discussions to organize and identify the priority area for Action and follow up	36	36	467	928	1395
Meeting with Physically challenged	15	15	176	143	319
Formation and training of Task Force	40	40	852	569	1421
Village level awareness on low cost toilet	20	20	356	661	1017
ORS demonstration, Water purification & Tube well disinfection	36	36	500	617	1117
Formation and strengthening of farmer's group	20	20	305	117	422
Sensitization on Food security	10	10	357	152	509
Sensitization on Kitchen Garden	25	25	210	315	525
Animal vaccination	15	15	474	256	730
Monthly Review Meeting	12	12	192	156	348

#### Achievements

Key DRR priorities identified and put into the GS plan

#### 1. Community level

Work	Amount Allocated	Source of Funding
3 km. of Weak Embankment	Rs. 100000	From GP through MGNRGA
5 Deep Tube Wells for drinking water	Rs. 600000	Public health
1 km. Kancha Road reconstruction	Rs. 60000	MGNRGA
2 km. Pucca Drainage construction	Rs. 80000	MGNRGA

#### 2. Family level

- ▶ 10 Vulnerable Shelter (P1) at the cost of Rs. 450000 through IAY
- ▶ 35 families have unutilized land
- ▶ There are 10 unutilized ponds
- ▶ Food security for 20 vulnerable families provided through AYJ scheme
- ▶ Food support for 191 BPL families through APY scheme
- ▶ 32 low cost sanitation
- ▶ Included 15 pregnant women in Government Health Scheme through Janani Suraksha Yojana



#### Challenges

- ▶ Plans are made to construct road but due to dispute, some portion remained incomplete
- ▶ The Elected members are ready to help us but less keen to organize genuine Gram Sansad meeting because they are not ready to face people. As a result there is a tendency to fake Gram Sansad Meeting.
- ▶ Our challenge is to create awareness in people to have a proper Gram Sansad meeting



## REVISED NATIONAL TUBERCULOSIS CONTROL PROGRAMME (RNTCP)

(We express our gratitude to West Bengal Tuberculosis Control Cell for supporting the RNTCP/DOTs programme and CBCI – CARD for facilitating this project)

#### FACT:

In India today, two deaths occur every three minutes from tuberculosis (TB). But these deaths can be prevented. With proper care and treatment, TB patients can be cured and the battle against TB can be won.

#### GOAL:

The goal of RNTCP is to decrease mortality and morbidity due to TB and cut transmission of infection until TB ceases to be a major public health problem.

#### OBJECTIVES:

- ▶ To achieve and maintain the cure of at least 85% of the new sputum smear-positive cases.
- ▶ To achieve and maintain detection of at least 70% of such cases in the population.

#### SKC's role:

- ▶ To support RNTCP under 'Urban slum scheme'
- ▶ To provide DOTs' to the identified patients
- ▶ Create awareness in the target areas.

#### Activities:

- ▶ Creating awareness in the community
- ▶ Providing DOT to the patients
- ▶ Maintaining patients growth (medical) record
- ▶ Resolving conflicts in the family due to TB
- ▶ Counseling support to the patients and family members

#### Achievements:

- ▶ Cured 47 Lung TB cases, 3 Bone TB cases and 1 Brain TB case
- ▶ Dr. Krishan and Mr. Kuntal from Tandra Chest Clinic giving an input session
- ▶ Madrasha children are discussed about TB
- ▶ Observing TB Day to create mass awareness
- ▶ Task Force member given TB input session to young girls
- ▶ Health Minister of Child parliament Master OM preparing action plan on TB awareness program

## Emergency relief for flood victims of Swarupnagar, Baduria and Habra block

### Shelter

- ▶ In the month of August 2011 almost 40% houses were submerged in flood. 30 percent of the families are living in their own houses and the rest have taken shelter in the neighbourhood by making temporary machan
- ▶ There are also those houses where water has not entered but are surrounded with water. The movement of the family members living in these houses are therefore restricted
- ▶ Some families have built tents on high land area and are living there

### Water and Sanitation

- ▶ Tube well[s] are main source of drinking water. Nearly 40% of the tube wells are inundated. Few tube wells located on high land area are

functioning and has now become the only source of drinking water for the entire population

- ▶ Most latrine facilities are under water.

### Livelihood

- ▶ Crops were damaged in the flood
- ▶ Jute & Paddy seed beds were totally damaged. The poor were left with no other alternative to earn their livelihood
- ▶ All the vegetable crops and flowers were damaged
- ▶ Fishes were lost.

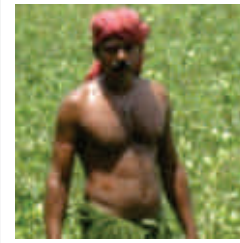
### Flood Recovery Relief

The task force members of CDBP area in collaboration with PRI members selected the beneficiary and distributed materials as follows:

		Tarpolin	Bleching	Rice	Vegetable Seeds	Fish ling	Paddy Seeds
Swarupnagar	2	100	10 bags	300 families	100 families	25 families	20 families
Baduria	4	200	40 bags	700 families	200 families	75 families	80 families

### Case Study

45 years old Dulal Ghosh is a marginal farmer living with five other family members at Peyara in Sayestanagar Gram Panchayat of Baduria block. His family's livelihood depends on cultivation. All his crops were destroyed in the last flood. He was in a desperate situation not knowing how to



overcome his losses. When Seva Kendra implemented the Flood Recovery Program, he was selected as one of the beneficiaries. We gave him Okra seeds to cultivate on a ten cotta land. Within three months he was able to cultivate Okra and earn Rs. 28,000 from the market. He has preserved seeds for the next round of cultivation. He has now become confident to face similar situations in the future through short term vegetable cultivation. He says, "Seva Kendra Calcutta showed me a ray of hope and now it is his duty to help other farmers".

## POLIO ERADICATION PROGRAMME

(Partnered with CORE)

India is one of the polio-endemic countries in the world. Poliomyelitis eradicate polio transmission in India. The number of polio cases dropped to a record low of 42 cases in 2010 compared to 741 cases in 2009. The last case of clinically compatible polio virus was reported in January 2011. Since January 2011, India has had only one case of polio detected in Panchla, Howrah district of West Bengal. Now every case of polio in the country will be treated as a public health emergency. Oral Polio vaccine continues to be an integral component of Polio Eradication Program. The program aims to immunize every child less than 5 years of age with the oral polio vaccine. State National Immunization Day was conducted with high coverage. India is now committed to eradicate Polio virus. Community Mobilization strategies have been adopted along with intensified regular vaccination. Polio Eradication Initiative (PEI) has now become a



success story in India because of the outstanding progress made during the last couple of years. The Central and State Governments, UNICEF, WHO and Rotary have contributed immensely towards this success. In places under Uluberia Municipal Corporation (UMC), Domjur and Howrah Municipal Corporation (HMC), an emergency response package has been rolled out by the government and other polio partners. Efforts to mobilize the community for polio vaccination has been scaled-up and rapid and large-scale polio immunization rounds are being carried out to protect children against polio and prevent the virus from spreading to other parts of the state and the country.

Seva Kendra Calcutta has joined hands with the 'CORE' group along with other partner agencies namely, UNICEF and ADRA, to reduce resistance and improve acceptance of polio vaccine in Howrah district of West Bengal. Seva Kendra Calcutta has started working in 7 Gram Panchayats, 6 Uluberia Municipality Wards and 12 Howrah Municipal Corporation wards. We have a total of 192 Social mobilizers, 10 Block coordinators, 4 Supervisors and 3 Project Coordinators working on this program. The strategy of CORE and Seva Kendra Calcutta to involve children in this campaign has proved effective as these children belonging to the 25 "Runner Dal" or "Bulawa toil" which we have formed know all the children below the age of 5 in their neighborhood.



### Objective of the programme:

An intensive emergency response in the high risk areas of Howrah, through community mobilization, with specific emphasis on Supplementary Immunization Activities (SIA) and community mobilization, targeting resistant families, leading to improved Oral Polio Vaccine (OPV) coverage.

### Strategies:

- ▶ Capacity Building of the Mobilizers/ Block Coordinators / Project Coordinators on Pulse Polio through trainings.
- ▶ Awareness generation through dissemination of information on eradication of polio through Information Education and Communication (IEC) materials & meetings.
- ▶ To develop linkages with the government, local doctors and other partners like WHO, National Polio Surveillance Programme (NPSP) to facilitate social mobilization for polio eradication activities.
- ▶ Involvement of parents and other mobilizers in the community

#### Working Area:

- ▶ Seva Kendra Calcutta identified and started working in the following Block / Gram Panchayats (GP) / Wards since April 2011
- ▶ 7 GPs in Domjur (Salap II, Bankra I, II & III, Mohiary I & II, Kolorah I)
- ▶ 1,2,3,7,10,11,15, 39,41,45,46 & 47 Howrah Municipal Wards
- ▶ Since September 2011 we have started working in Uluberia Municipal Corporation: ward no. 3,4,6,7,8,1

#### RUNNER DAL

- ▶ The idea of CORE and Seva Kendra Calcutta to involve children in this campaign has become successful and effective. The children belonging to the "Runner Dal" know all the children below the age of 5 in their neighborhood.
- ▶ We formed 25 Runner Dals (Bulawa toll) for the Booth Day Activity. We selected children between the age group of 10 to 12
- ▶ We organized a meeting with all their parents and explained to them about the vital and

visible role they and their children could play in making India polio free. At the end of the meeting the parents unanimously agreed to send their children for the polio campaign

- ▶ Small teams of 5 children each were formed. On booth days they were attractively adorned with yellow caps and were given whistles. They began going from house to house bringing children for the polio vaccination

#### Conclusion

We the staff of SKC greatly acknowledge our sincere thanks to :

- ▶ Ms. Sanghamitra Ghosh, DM, Howrah, Mrs. Swati Dutta , CMOH, Howrah, Dr. Subhashish Sarkar, Health Officer, Dr. Swapan Mondal, Medical officer of UMC, All Medical Officers of Zones, NPSP, Howrah, Doctors representing WHO - Dr. U. Sen, Dr. A. Basu, Mr. Ezaz Afzal - District Extender UNICEF, Government supervisors, vaccinators and ICDS Staff.
- ▶ The trainers who came from U.P and Delhi. Dr. Moushmi (previous BMOH), Dr. Bhaskar



(present BMOH) Domjur, Mr. Dilip Das, Mr. Tapan Das, Mr. Sanjay Makhal (FV), Dr. Samhana Chakraborty, Dr. Swapan Mondal MO, and all other MOs who assisted us in Health Camps and meetings of Supervisor and Block task force.

- ▶ We are also grateful to the communities where we are working hand in hand at Uluberia Municipality, Howrah Municipal Corporation areas and Domjur
- ▶ Our donors from CORE and UNICEF

## TRAINING CENTRE SEVA KENDRA CALCUTTA TRAINING CENTRE

The training centre which has been a strong support for all our ventures is giving a livelihood to 20 to 25 of our staff members and has become a strong source of local resource mobilization. The most interesting part is that we hold programmes for ordinary poor people from the slums, executives from big companies and foreign visitors too. All these groups are happy and there is a good cohesion on one platform of social development. There were 350 training programs conducted with a total number of 9820 residential and 4180 non-residential participants from April 2011 to March 2012.

#### Facilities available

- ▶ 4 Conference halls
- ▶ 202 beds (Dormitory AC/ Non AC, Single bed AC/Non AC, Double bed AC /Non Ac) lodging
- ▶ Indian, Continental food
- ▶ Other amenities such as laptop, LCD projector, overhead projector and sound system
- ▶ Cars are available for passenger transport



## 'SINDHU TARA' TRAINING CENTRE AT DIGHA

Our Training centre at Digha is called "Sindhu Tara".

#### Facilities available

- ▶ 1 Big conference hall accommodating 60 people and 1 small conference hall accommodating 20 people
- ▶ 18 rooms (1 single bed room, 4 double bedrooms, 8 triple bedrooms, 5 quadruple bedrooms)

#### For booking details :

033 2329-0381/5400, 032 2026-6902

Mobile: + 91-9231834642



## SEVA KENDRA CALCUTTA EXTENSION KHARAGPUR

Today we can proudly say that Seva Kendra Calcutta ( Extn) Kharagpur not only has won the hearts of people by its outstanding dedication of service but at the same time plays a major role in building up the nation. It has become one of the successful helping organizations, which focuses upon working with individuals, families, groups, communities, and organizations in order to assist them in functioning better in their social environments. Inaugurated in the year 2004, with the sole motto to serve humanity and seek to improve the quality of life of deprived masses, safeguard human rights or raise its voice against social injustice and sustain the process of human development, in its working area.

## CHILD CENTERED DEVELOPMENT (CCD) - WEST MEDINIPUR ON SCHOOL BASED APPROACH

*(A project supported by Indienhilfe e.V Herrsching, Germany)*

Seva Kendra Calcutta (Extn) Kharagpur mainly works through its CCD project, which has been re-structured and is working with a new school based approach, with effect from November 2011. Supported by Indienhilfe e.V Herrsching, Germany, the project is actively at force in 5 blocks in the district of West Medinipur. The four major components of the project are Education, Nutrition, Health and Dignity and the activities are performed highlighting these major components. The project aims at the welfare of every child and then moves up from child to the family and then into the community as a whole. It makes every possible attempt to ensure that the rights of the child are protected and restore back their childhood. At present we are focusing on providing educational support to every child as its Fundamental Right, through a school based approach and at the same time tackling the problem of school drop-outs, irregular students/absentees and child labour. CCD provides special coaching and guidance to slow learners as per RTE (Right to Education Act) and motivate the parents of these children. Special care is taken to provide for the health and nutritional needs to both mother and the child through periodical health check up programs at schools, monitoring the process of ICDS/ improvements



of mid- day meals and ensuring spot- feeding, supplementing the quality of the meals by promoting nutrition garden in the school premises, inculcating healthy practices among people etc. Eliminating the discrimination towards the girl child and enhancing the "Right to participation" of every child. Beside these activities there are IGA (Income generating activity) for the groups by availing various Government facilities. Communities are also encouraged to apply RTI (Right to information) act as directed by the Samonay (Information kiosk) groups formed at the very grass root level, to build confidence in them.

Few achievement of Child Centered Development, in the financial year 2011-12 can be listed down as follows:

- ▶ Total 11 Child Centered Development - Coaching centres are going on in High School premises, to reduce the rate of irregularity and drop-outs and to provide special coaching to the slow learners
- ▶ Total 9 drop outs. 2 child labourers were rescued and main-streamed. 56 irregular students were regularized.
- ▶ Shishu mela organized at NPMS project area with great enthusiasm. Nearly 300 students from CCD- high schools participated

- ▶ Eco-group, Salboni prepared the water harvest system and also 3 smoke-less Chullas as a response to the destruction done to the environment.
- ▶ 10 School health committees were formed and are performing various activities at School to develop an ideal school environment
- ▶ Nutrition gardens are being cultivated in most of the ICDS Schools( both Primary and High) which has provided nearly 50 kg of fresh vegetables( without any types of chemical fertilizers/ pesticides) to supplement the quality of the meals at schools.
- ▶ 23 nutrition demonstrations were conducted to educate the mothers on the healthy way of cooking food which retains the quality and nutrition of the food after cooking.
- ▶ 17 traditional water filters were installed and 44 new sanitation units from all the three units were constructed and are in use.
- ▶ 10 new SHGs are formed and 126 SHGs are involved in IGA either with the help of Government loans/ internal loans.
- ▶ Samonay (information kiosk) are active and functioning as clusters in every unit, which facilitates community to avail different government schemes.
- ▶ Micro-plan done and the implementation is going on in D. Belar (Salboni), Borotalpada and Ramchandrapur (Baligeria), through community initiatives and also with the help of government resources.

## TRAINING CENTRE

The spacious and green surrounding of the training centre, one of the wings of Seva Kendra (Extn) Kharagpur, accommodates various community based programs with the like-minded organizations. It offers good food, lodging facilities and well furnished and equipped training halls to meet the need of various types of trainings that are being conducted at the centre. Some of our partners for the year 2011-12 are:

- ▶ Grace Child Development Center, Chandra Kona Road
- ▶ Central Warehousing Corp.
- ▶ Telegu Union Baptist Church, Kharagpur
- ▶ Sacred Heart Church, Kharagpur

- ▶ Assembly of God Believer's Church in India, Kharagpur
- ▶ Action Aid
- ▶ Solar Training- SKC
- ▶ Indian National Apostle's Diocese
- ▶ Meeting conducted by CCD –West Medinipur.
- ▶ Sacred Heart Church, Second Community, Kharagpur
- ▶ St. Vincent's Ashram, Jholi, Kharagpur.

Being a social service organization, Seva Kendra (Extn) Kharagpur is successfully carrying on various activities and is still looking for areas of social welfare that is not fully attended to. With the

help of its generous benefactors, support from its well-wishers, guidance from the authorities and with the hard work of its entire team, it is contribute toward healing the world we live in.



## DONORS / DONOR AGENCY

Sl. No.	Name	Activities
1.	Caritas India	1. Development Program for Ragpickers 2. Relief to the flood effected families 3. Renewal Energy for public health 4. Community Managed Disaster Risk Reduction.
2.	C.B.C.I., Commission for Health, India	Community Care Centre (HIV Patients)
3.	Deaf Child World Wide, U.K.	Sign language training for Deaf children & families, skill training, workshop for teachers & parents.
4.	Indienhilfe, Germany	1. Child Centre Development (CCD) on school based approach 2. Child Labour 3. Capacity Building 4. Initiative towards better living of children 5. Child Centered Development thru Community Based Approach
5.	Likvidace / Jiri Holy, Czech Republic	St. Joseph Hospital at Medinipur
6.	Missio, Germany	Promotion & networking of BCC & BHC in West Bengal & Sikkim Region
7.	Misereor, Germany	Development of marginalised community thru NRM
8.	Stichting Actie Calcutta, Holland	1. Administrative Cost 2. Sponsorship 3. Mainstreaming Dropout Children
9.	UNICEF	Polio Eradication Program

Our sincere thanks to the donors, donor agencies, The Federal Bank Ltd, State Bank of India, Auditor M/s B. De & Co., Governing Body Members, Staff and friends for their kind support & cooperation.

## Local Resource Mobilization

Sl. No.	Name of Parishes	Total (₹)
1	Church of Christ the King, Park Circus	75,000
2	St. Mary's Church, Ripon Street	73,022
3	Bandel Church, Hooghly	35,450
4	Sacred Heart Church, Kharagpur	34,331
5	Church of Our Lady of Vailankani, Picnic Garden	34,225
6	Fatima Parish, C.I.T. Road	31,000
7	Sacred Heart Church, Lenin Sarani	30,737
8	Prabhu Jishu Girja, Rafi Ahmed Kidwai Road	24,000
9	Auxilium Parish Church, Mahendra Roy Lane, Gobra	20,000
10	St. Xavier's Community, Park Street	19,670
11	Infant Jesus Church, Behala	17,200
12	St. Joseph's Chapel, Market Street	15,957
13	St. Francis Xavier's Church, B.B. Ganguly Street	15,015
14	St. Teresa's Church Fund, AJC Bose Road	14,000
15	St. Anthony's Church, Kharagpur	13,980
16	St. Thomas Church, Middleton Row	12,971
17	St. Ignatius Church, Ekbalpore Road	12,131
18	Church of Our Lady of Lourdes, Barasat	9,075
19	Holy Family Church, Keshtopur	8,000
20	St. Patrick's Church, Dum Dum	7,970
21	Sacred Heart Church, Kowgachi	7,252
22	Catholic Church, Premnagar, Santragachi	7,050
23	Queen of Peace Church, Tollygunge	7,000
24	St. Joseph the Worker Church, Santragachi	6,020
25	St. Joseph's Church, Barrackpore	6,000
26	St. Joseph's Church, Bongaon	6,000
27	Church of Our Lady of Consolation, Haldia	5,870
28	Shantirani Girja, Bamandanga	5,730
29	St. John's Church, A.P.C. Road	5,700
30	Church of Our Lady of Dolours, Boitakhana, Sealdah	5,500
31	Immaculate Heart of Mary, Nirmal Hriday Ashram, Medinipur	5,500

32	Church of the Immaculate Conception of Blessed Virgin Mary, Serampore	5,000
33	Nirmala Mata Maria Girja, Andul Road	4,805
34	Stella Maris Church, Nimak Mahal Road	4,220
35	St. Peter's Church, Haldia	3,860
36	Church of Our Lady of Happy Voyage, Howrah	3,000
37	Holy Family Church, Kearchand	3,000
38	Mary Immaculate Church, Kanchrapara	2,500
39	Catholic Community Centre, Jholi, Kharagpur	2,500
40	St. John Bosco Parish, Liluah	2,500
41	St. Lawrence Chapel, Ballygunge	2,260
42	Christo Jyoti Ashram, Kamalasole, Basinda	2,059
43	St. Thomas Syro Malabar Catholic Church, Behala	2,000
44	Jishu Ashram, Station Road, Pandua, Hooghly	1,700
45	St. Francis Xavier's Church, Guma	1,525
46	St. Francis Xavier's Church, Salboni	1,000
47	Sacred Heart Church, Chandannagar	1,000
48	Christo Jyoti, Namalasole	833
49	Holy Cross Church, Baligeria	350
50	Christ the King Church, Balichak, Medinipur	150
TOTAL		615,618

Sl. No.	Name of Schools / Colleges	Total (₹)
1	Loreto Convent, Entally	39,940
2	St. Teresa's Secondary School, Kidderpore	32,775
3	Loreto Day School, Lenin Sarani	27,003
4	Carmel School, Deshapriya Park	25,000
5	Holy Child Institute, Beadon Street	22,560
6	Stella Maris School	21,420
7	Loreto Day School, B.B. Ganguly Street	20,290
8	Loreto Day School, Elliot Road	20,000
9	Marian Education Centre, Picnic Garden	20,000
10	St. Agnes School, Kharagpur	16,000
11	Loreto House, Middleton Row	15,000
12	St. Paul's Boarding & Day School, D.H. Road	15,000
13	Our Lady Queen of the Missions School, Salt Lake	15,000
14	St. Agnes Convent School, Howrah	15,000
15	Meghmala Roy Education Centre, Behala	14,450
16	St. Anthony's School, Market Street	14,250
17	Morning Star College, Barrackpore	12,380
18	Auxilium Convent School, P.K. Guha Road, Dum Dum	12,000
19	Loreto College, Middleton Row	12,000
20	Lavinia House, Kolkata	11,308
21	Our Lady Queen of the Missions School, Syed Amir Ali Avenue	10,000
22	Don Bosco School, Bandel	10,000
23	Auxilium Convent School, Bandel	10,000
24	Shanti Rani Primary School, Tollygunge	10,000
25	St. Mary's High School, Entally	8,785
26	Holy Child Girls H.S. School, C.I.T. Road	7,000
27	Convent of Our Lady of Providence Girls' (Hindi High School), AJC Bose Road	6,000
28	St. Mary's School, Ripon Street	5,798
29	St. Xavier's Collegiate School, Park Street	5,000
30	St. Mary's Orphanage, Dum Dum	5,000
31	Don Bosco School, Park Circus	5,000
32	St. Mary's Convent School, Santragachi	4,000
33	Don Bosco Self-Emp, Mirpara	3,000
34	Holy Family Convent School, Liluah	3,000
35	St. Francis School, Guma	2,500
36	Sacred Heart Chinese School, Weston Street	1,000
37	St. Luigi Nursery School, Barrackpore	1,000
38	Holy Trinity School, Jhargram	500
39	St. Teresa's School, A.J.C. Bose Road	373
TOTAL		479,332

## Local Resource Mobilization

Sl. No.	Name of Religious Institutions	Total (₹)
1	St. Joseph's Convent, Chandannagar	16,500
2	Little Sisters of the Poor, St. Joseph's Home, A.J.C. Bose Road	13,700
3	St. Joseph's Hospital, Medinipur	12,000
4	Seva Kendra Calcutta Training Centre	10,000
5	Seva Kendra Calcutta Community Care Centre, Dum Dum	10,000
6	Sisters of the Sacred Heart, Anjali Bhawan	10,000
7	The Carmelite Convent, Outram Street	10,000
8	St. Vincent's Home, D.H. Road	10,000
9	Convent of Our Lady of Providence, AJC Bose Road	10,000
10	Auxilium Convent, Mahendra Roy Lane, Gobra	6,200
11	Auxilium Convent, Taki Road, Barasat	6,000
12	Convent of Immaculate Heart of Mary, Tollygunge	5,000
13	Congregation of the Sacred Hearts of Jesus and Mary (SS.CC) Damien House	5,000
14	St. Agnes Convent, Kings Road, Howrah	5,000
15	MSMHS Provincial House, Ichapur, Howrah	5,000
16	Sisters of Charity, Provincial House, Convent Road	4,000
17	Daughters of St. Paul, Royd Street	4,000
18	Bethany Novitiate, Barasat	4,000
19	Holy Cross Convent, Pandua	3,000
20	Auxilium Convent, Syed Amir Ali Avenue	3,000
21	St. Vincent's Ashram, Jholi	2,500
22	Nirmala Convent, (Nirmala Sisters), Dr. Sundari Mohan Avenue	2,200
23	Servite Convent, Jholi	2,100
24	Helper Sisters, Barasat	2,000
25	Sisters of the Cross, Lower Range	2,000
26	Sisters Adorers, Nazareth Villa, C.I.T. Road	2,000
27	Sisters Adorers, Bandel	2,000
28	Daughters of the Cross, Novitiate, Barasat	2,000
29	St. Mary's Convent, Kharagpur	2,000
30	Carmel Niketan, Novitiate, Barrackpore	1,500
31	Apostolic Carmel, Provincial House, Moore Avenue	1,500
32	Sisters Adorers, Christopher Road	1,500
33	Sisters of Charity, Oasis Capitanio, East Udayrajpur (N) 24 Parganas	1,500

34	Don Bosco Nitika	1,500
35	Daughters of the Cross, Kolkata	1,350
36	Claret Ashram, Sahari	1,300
37	Sisters of the Cross Welfare Association, Lower Range	1,000
38	St. Anne's Convent, B.B. Gunguly Street	1,000
39	Shanti Dham, Guma	1,000
40	Carmel Convent, Bongaon	1,000
41	Nava Jeevan, Barasat	1,000
42	Sisters of Providence, Provincialate, Barrackpore	1,000
43	Sisters Adorers, Kharagpur	1,000
44	Daughters of St. Anne, Novitiate, Barrackpore	1,000
45	Holy Spirit Sisters, Nihon Apartments, Kolkata	850
46	Sister of Mary Immaculate, Gurusaday Road, Ballygunge	750
47	FMM Sisters, Adivasipara, 24 Parganas (N)	600
48	Nirmala Nilayam, Portuguese Church Street	500
49	Sisters Adorers Navajyoti Bhawan, Liluah	500
50	Bethany Sisters, Portuguese Church Street	500
51	Matri Bhawan, Sourin Roy Road, Behala	500
52	Carmel House, Behala	500
53	St. Anne's Convent, Jhargram	500
54	Maria Health Centre, Bankra Dakshin Pally, Howrah (Maria Bhavan)	500
55	Shanti Bhavan, Prince Golam Md. Road	500
56	Bethany Cottage, Barasat	500
57	St. Ann's Convent, Bamandanga	500
58	Sisters of Mary Immaculate, Dum Dum	500
59	Formation House, Prado Sisters, Barasat	420
60	Shantikiran, C. I. T. Road	300
61	St. Anne's Convent, Mataldanga, Bagdubi	250
TOTAL		198,020

Sl. No.	Name of Individuals / Groups	Total (₹)
1	Daniel Tirkey	6,000
TOTAL		6,000

GRAND TOTAL

12,98,970

## Thank you Fr. Reggie !

Fr. Rudolf D'souza (Secretary of Seva Kendra Calcutta)  
He has always had a special concern for the poor, sick and the needy. He goes all out to help everyone in their needs irrespective of their cast or creed.

Fr. I.P. Sarto (Governing Body Member)  
Responsible, Energetic, Generous, Gentle, Interested, Encouraging  
Friendly, Enthusiastic, Religious, Natural, Aware, Numerous qualities, Determined, Empowering, Sociable

Sr. Christin (SCC Animator)  
Fr. Reginald is a priest who quietly presents Christ's words and actions daily to all the people whom he serves.

Eugene Gonsalves (Governing Body

Member)  
God bless you Fr. Reggie for all the good work you have done at Seva Kendra Calcutta!

Dr. Malay Mundle (Governing Body Member)  
Fr. Reginald Fernandes has brought out Seva Kendra from 'another' organization into a renowned institution where the work ethic has seen a quantum jump. I could never think of Seva Kendra without thinking about him.

Mukul Haldar (Coordinator, CCC Dum Dum)  
We sincerely thank Fr. Reggie for his innovative ideas and a clear vision to pave avenues that will help serve the needy in a systematic way. We pray for his good health



and assure him of our commitment to continue the good work initiated by him.

Magdalen Mondal (Secretary to the Director, Seva Kendra Calcutta)  
He goes out of his way to help others.



## Members of Governing Board

Archbishop Thomas D'Souza, President  
Fr. Franklin Menezes, Vice President  
Fr. Rudolf D'Souza, Secretary  
Fr. John Mohandas, Member  
Fr. Vincent Lobo, Member  
Fr. Anthony Rodricks, Member

Sr. Amala, D.S.A., Member  
Mr. Eugene Gonsalves, Member  
Prof. Maria Fernandes, Member  
Dr. Malay Mundle, Member  
Ms. Cheryl Francis, Member  
Ms. Asha Ekka, Member

## Finance, Management & Project Selection Committee

Fr. Franklin Menezes, Vice President & Director  
Fr. Rudolf D'Souza, Secretary  
Fr. Reginald Fernandes, Member  
Fr. Vincent Lobo, Member

Fr. Shyam Charan Mandi, Member  
Sr. Mary, SJA, Member  
Prof. Maria Fernandes, Member

## A Big Thank You to All

### INTERNATIONAL ORGANIZATIONS

- Caritas Internationalis, Germany
- Deaf Child Worldwide, UK
- Indienhilfe e.V., Germany
- L.L. Likvidace Lepry, Czech Republic
- Misereor, Germany
- Missio, Germany
- Stichting Actie Calcutta, Netherlands

### NATIONAL ORGANIZATIONS

- Archdiocese of Calcutta (Parishes, Religious Societies, Educational Institutions, Associations)
- Association of Bengal Collaborators for Development, Kolkata
- Caritas India, New Delhi & Kolkata
- CBCI-Health Commission, New Delhi & Kolkata
- RNTCP, Kolkata
- UNICEF, Kolkata

### GOVERNMENT SECTOR

- Confederation of Indian Industry

### INDIVIDUALS

- Eric Herbert Barber
- Moses Rozario
- Violate and Paul Lee
- S. F. Fernandes

### LOCAL NGOs/Institutions

- Action Aid
- Agragoti- Amta
- Atghara Sanhati Kendra
- Barabankara Anagrassor Palli Unnayan Samity
- CINI Asha
- Concern Worldwide
- Dakhin Agartala Swami Vivekananda Kisak Sangha
- Focus
- Howrah South Point Social Welfare & Community, Howrah
- Khelaghar, Kolkata
- Khulna Gram Panchayat
- Lutheran World Services
- Medinipur International Rural Development Council
- Palli Mongol Parishad
- Seva Samity Deulpotha- Mohishadal
- Sundarbanan Devasis Sevasram Sangha
- Tiljala Shed
- Tulsiberia Shishu Kalyan Samity
- Udayani Social Action Forum
- Women's Interlink Foundation

A special thanks to all Parishes, Schools, Colleges and Convents of the Archdiocese of Kolkata for their generous support

## An Appeal

*To reach out...To touch  
To make a difference*

To mobilize community and individuals who can pool their resources together for their own development.

Be our partners in this movement

## Donation Form

From: -

Phone

Mobile

Date of Birth

Email

Please accept my contribution of :  
(✓ Please tick)

Rs. 1000/-  Rs. 2500/-  more

Cash  Cheque  Draft

Date

Signature

*You can make a difference by contributing :*

Rs. 1000 : Seeds to farmer whose crop failed/destroyed

Rs. 2500 : Annual Expense of a school child

Rs. 5000 : Emergency treatment of a patient

Rs. 7500 : Leadership training programme for 30 persons

Rs. 10000 : Annual Salary of a community animator

Seva Kendra Calcutta  
52B, Radhanath Chowdhury Road  
Kolkata-700 015  
Phone : 0091 33 2329 0381/5400/4905  
Email : sk.calcutta@gmail.com  
Web : www.sevakendracalcutta.org

Extension Units of Seva Kendra Calcutta  
Seva Kendra Calcutta Extension, Kharagpur  
P.O. Hijli, Kharagpur-721 306  
Medinipur (W), Ph: (03222)-224642  
Email : sevakgp@gmail.com

Seva Kendra Calcutta Community Care  
Centre  
93/1, P. K. Guha Road  
Kumarpara, Dum Dum Cantonment  
Kolkata-700 028  
Ph : 0091 33 30239384  
Mob : 9734381470  
Email : cccdumdum@gmail.com

St. Joseph's Hospital &  
Community Care Centre  
Phulpahari, Vidhyasagar University,  
P.O. Medinipur (W)-721 102  
Ph : (03222) 275946/269902  
Email : stjosephmccc@gmail.com  
st.josephMedinipur@gmail.com

Sindhu Tara Training Centre-Digha  
Plot No. 63 Sector N2, Jubak Abas  
(Youth Hostel)  
New Digha, Medinipur(E)-721 463  
Ph : (03220)266902

Seva Kendra Calcutta Mainstreaming  
Centre, Palbari  
Vill: Palbari, Ganapati Nagar,  
P.O. Nutan Bazar  
Medinipur (W)

Seva Kendra Calcutta Mainstreaming  
Centre, Serampore  
Vill: Simla, P.O. Serampore -3,  
Hooghly-712 202

# Campaign Against Hunger & Disease

Place	Amount spent (₹)
Seva Kendra Calcutta	2, 53,295.00
Seva Kendra Calcutta, Extn Kharagpur	39,260.00
Seva Kendra Dum Dum	NIL
Caritas	NIL
Other expenses	96,776.00
<b>Total</b>	<b>3, 89,331.00</b>



## Seva Kendra Calcutta-Main Office

Name	Designation
Mr. Andrews Tapan	Section Head
Mr. Branger Ronald	Senior Accountant
Mrs. Ganpat Harriet	Coordinator
Mr. Mondol Francis	Field Reviewer cum Logistician
Mrs. Mondal Magdalen	Office Secretary
Ms. Naskar Benu	Field Reviewer
Mr. Rana Samir	Assistant Accountant
Mr. Roy Alex	Assistant Accountant
Mr. Sarkar Bablu F.	Section Head
Sr. Mary, SJA	Section Head
Mr. Bishnu Sarkar	Solar Technician

## Seva Kendra Calcutta Community College

Ms. Mohua Rozario	Teacher
Ms. Asha Bhujel	Teacher
Mr. Satyaki Mukherjee	Computer Trainer

## CCC-Dum Dum

Mr. Mukul Haldar	Coordinator
Ms. Suparna Raychaudhury	Counselor
Dr. Prasenjit Saha	Doctor
Ms. Rita Panda (Halder)	Staff Nurse
Ms. Prasen Minj	Staff Nurse
Mr. Chinmoy Mahanti	Outreach Worker
Mr. Rajender Roy	Outreach Worker
Ms. Soma Hansda	Cook
Ms. Kalpana Biswas	Janitor

## St. Joseph's Hospital & Community Care Centre -Medinipur

Fr. Reginald Fernandes	Director
Sr. Lizy Sebastian	Nurse cum Administrator
Sr. Rani Joseph	Nurse cum Asst. Administrator
Dr. Paritha Sarathi Samanta	Doctor
Dr. Susanta Bera	Doctor
Ms. Jaicinta Roy	Coordinator
Mr. Prasenjit Mondal	Counselor

Ms. Jui Sen Gupta	Nurse
Ms. Mithu Midya	Outreach Worker
Mr. Dilip Pal	Out reach Worker
Mr. Debasis Magi	Out reach Worker
Ms. Junu Singh	Cook
Ms. Sumita Singh	Janitor
Ms. Koyeli Hembrom	Janitor
Mr. Havel Rana	Driver
Mr. Kishore Biswas	Night guard

## Training Centre

Sr. Bianca	Department in charge
Sr. Reba, DSA	Department in charge
Ms. Kujur Geeta	Coordinator
Ms. Nayak Mary	Coordinator
Mr. Bor Biswajit	Cook
Mr. Halder Augustine	Cook
Mr. Murmu Rupai	Assistant Cook
Mr. Kisku Montu	Light Vehicle Driver
Mr. Singh Dinesh	Light Vehicle Driver
Mr. Behera Narayan	Security Personnel
Mr. Biswas Robi	Security Personnel
Mr. Das David	Support Staff
Mr. Hansda Boidyanath	Support Staff
Ms. Mondal Jennifer	Support staff
Mr. Kujur Rakesh	Support staff
Mr. Birshu Lakra	Support staff

## SKC-Kharagpur

Fr. Reginald Fernandes	Administrator
Mr. Dey Sudarsan	Coordinator, Projects
Ms. Ruth Mary Roy	Assistant Coordinator
Mr. Forhad Ali	Assistant Coordinator
Mr. Lawrence Adhikari	Area Coordinator
Mr. Moven Domingo	Area Coordinator
Mr. Ranjit Gomes	Area Coordinator
Mrs. Vanessa Smith	Accountant cum Office Asst.
Mr. Badal Singh	Supervisor
Mr. Michael Hembrom	Supervisor
Mr. Laxman Hansda	Supervisor

## FINANCE

### Schedule of Projects for the year ended 31st March, 2012 (Foreign)

Sl. No.	Name of the Projects	Opening Balance ( ` )	Receipt during the year ( ` )	Utilised Balance ( ` )	Closing Balance ( ` )
1.	Caritas-Renewable Energy for Public Health & Environment Awareness	545,540	-	545,540	-
2.	Caritas-Development Of Raggpickers 2nd Phase	53,338	576,550	615,414	14,474
3.	Caritas-CMDRR	11,602	1,783,225	1,261,668	533,159
4.	CRS-DRR-1409,1550 & 6788	120,815	-	120,815	-
5.	Deaf Child -Use of Office Space	11,111	385,400	412,000	(15,489)
6.	Deaf Child World Wide	74,153	2,395,473	2,007,793	461,833
7.	Financial Assistance	166,041	2,451,148	2,319,724	297,465
8.	Indienhilfe-Capacity Building	60,280	300,000	131,127	229,153
9.	Indienhilfe-Child Labour	92,519	1,700,000	1,247,534	544,985
10.	Indienhilfe-Emergency Fund + SEVA	276,843	-	-	276,843
11.	Indienhilfe-Gratuity for IDP Staff	147,842	-	147,842	-
12.	Indienhilfe-Integrated Development Program	14,773	4,972,540	4,679,517	307,796
13.	Indienhilfe-Use of Office Space	17,113	319,440	300,000	36,553
14.	Indienhilfe-Kolkata Office	27,743	997,736	884,835	140,644
15.	Jesuits Mission	77,075	-	177,075	-
16.	Likvidace/Hospital	10,503,890	15,707,302	23,827,995	2,383,197
17.	Missio-EV	469,726	1,301,608	846,150	925,184
18.	Richard Saldana	66,865	-	55,000	11,865
19.	SAC-Administrative Expenses	57,195	824,730	825,418	56,507
20.	SAC-Mainstreaming the Dropouts	-	377,550	344,219	33,331
21.	Seva Kendra Siliguri	-	15,000	-	15,000
22.	Fr. Owen D'Souza -Village Development	-	818,802	454,239	364,563
23.	Caritas- Relief to the Flood affected family	-	640,000	558,499	81,501
24.	Misereor-NRM	-	623,336	285,251	338,085
25.	Atghara Sanhati Kendra	-	2,349,705	2,337,838	11,867
26.	Chatra Sensitive Citizens' Forum	-	152,836	131,834	21,002
	<b>TOTAL</b>	<b>12,794,464</b>	<b>38,692,381</b>	<b>44,417,327</b>	<b>7,069,518</b>

### Schedule of Projects for the year ended 31st March, 2012 (Indian)

Sl. No.	Name of the Projects	Opening Balance ( ` )	Receipt during the year ( ` )	Utilised Balance ( ` )	Closing Balance ( ` )
1.	Campaign against Hunger & Disease	2,701,048	1,023,021	97,630	3,626,439
2.	Emergency Relief Fund	44,696	-	-	44,696
3.	Good Friday Walk	(139,536)	432,591	293,055	-
4.	Herbert & Ellen Barber Scholarship Fund	42,000	-	-	42,000
5.	Herbert Eustace Barber & Ellen Barber	41,000	-	-	41,000
6.	Fr.Moses Fund	50,000	-	-	50,000
7.	Violet Lee Fund	42,000	-	-	42,000
8.	S. F. Fernandes Fund	100,000	-	-	100,000
9.	Aila Relief Assistance	360,841	-	5,000	355,841
10.	Seva Kendra CCC DumDum	139,409	1,303,430	1,335,607	107,232
11.	St.Joseph's CCC Medinipur	76,703	1,332,362	1,284,982	124,083
12.	BCC	244,560	-	244,560	-
13.	UNICEF	-	3,858,443	3,538,952	319,491
	<b>TOTAL</b>	<b>3,702,721</b>	<b>7,949,847</b>	<b>6,799,786</b>	<b>4,852,782</b>

## ADMISSION GOING ON

### COMMUNITY COLLEGE SEVA KENDRA CALCUTTA "MAKING PEOPLE FIT FOR LIFE AND FIT FOR JOB"

Job Oriented, Work Related, Skill Based and Life Coping Education

Community College is the need of the hour. It provides education for livelihood. It responds to the challenges of exclusion and elimination from the formal system, mismatch between education and employment capability, poverty and problems of unemployment, under- unemployment, unemployability as well as school dropouts.

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1. Life Coping Skills
2. Interpersonal Relationship & Communicative Skills
3. Developmental English
4. Basic Computer Applications

#### TRADE

1. Nursing Assistant
2. Basic Electronics-Renewal Energy
3. Assistant Cook
4. Computer Hardware
5. Desktop Publication
6. Tally

DURATION OF THE COURSE: Six months  
AND only for trade – 3 months  
SESSION STARTS: January & June

TIME : Morning – 9:30 a.m. to 1:00 p.m.

Eligibility: Class VIII

#### COURSE FEE:

Admission Fee : Rs. 1000 (\*Refundable)  
Exam Fee each subject Rs. 800  
(\*Refundable)

\*Money will be refunded once the candidate passes the examination and receives the certificate.

#### CONTACT :

THE DIRECTOR & PRINCIPAL  
SEVA KENDRA CALCUTTA  
COMMUNITY COLLEGE

52B, Radhanath Chowdhury Road,  
Kolkata-700 015

Phone: 2329-0381, 2329-5400

E-mail: sk.calcutta@gmail.com

Website:www.sevakendracalcutta.org



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