

MOBILITY INDIA



Annual Review
April 2003 - March 2004



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Our Vision : An inclusive society where people with disabilities have equal rights and a good quality of life.

Director's Note

The founder and architect of Mobility India, Mr. Chapal Khasnabis has moved to the World Health Organization in Geneva to shoulder higher responsibilities in the field of disability. We wish him the very best in all his endeavors.

The five pronged strategy that we advocate through - training, rehabilitation services, community based rehabilitation, partner support, and research and development is growing from strength to strength and an overview of our achievements are detailed in each of the sections.

The second batch of the long term training is on course and should conclude in June. The short term CBR courses were on schedule. Our trainee participants are from various parts of India and other countries, which indicate that the courses we conduct are in good demand. Our faculty manages most modules of training activities; the rest is complemented by faculty from national and other centers.

The use of our rehabilitation services is growing steadily and we are happy to report that most people who come here for service return satisfied. Our community based rehabilitation work is being streamlined and consolidated. From this success we are exploring the possibilities of expanding the work in the adjoining slums and in rural Karnataka.

We are able to reach out to large numbers of persons with disabilities because of the placement of trained second generation of professionals and through grass root partner organizations. However, our work with grass root partner organizations needs a critical review to ensure that the partnership is put to optimum benefit for persons with disabilities. Our unstinted focus on producing low cost affordable rehabilitation devices resulted in the development of SATHI - a light weight plastic modular prosthesis.

We owe much of our success during the year to the donors, governing body, staff, partner organizations and the communities with whom we work.

M. Sanjivi

Special thanks go to...



SKN-The netherland

SIR DORABJI TATA TRUST

Supraja Foundation Limited

HPS Foundation

STANLEY THOMAS
JOHNSON FOUNDATION



European Union



Action on Disability
and Development



Lottery money making a difference



ZURICH
FINANCIAL SERVICES

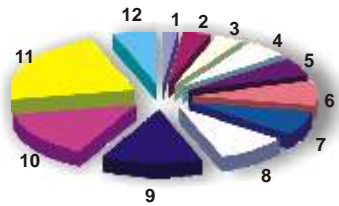


...our individual and corporate donors.

Training

"To train second generation of professionals in Prosthetics, Orthotics, Rehabilitation Therapy and Community Based Rehabilitation within India and other Low Income Countries, who can provide equal opportunities to persons with disabilities by working at grass root level."

Area wise representation of long term trainees - 32

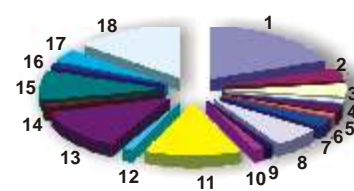


- | | |
|----------------|-------------------|
| 1. Kerala | 7. Bangladesh |
| 2. Angola | 8. Tamilnadu |
| 3. Ethiopia | 9. Srilanka |
| 4. Nepal | 10. Andhrapradesh |
| 5. West Bengal | 11. Karnataka |
| 6. Orissa | 12. Agarthala |

India alone needs 20,000 P&O professional (1:500) 1 trained person for every 500 people who need assistive devices and 100,000 therapist/therapy assistants (1:100) 1 trained person for every 100 people who need therapy. India has so far developed only 5% of the required manpower. A similar situation prevails in the low-income countries of Asia and Africa.

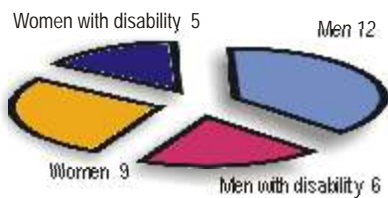
To facilitate the process Mobility India runs a one year course for Prosthetics, Orthotics and Rehabilitation Therapy; and short term courses in Community Based Rehabilitation. This year our programme trained the following as indicated in the graphs.

Area wise representation of short term trainees - 78

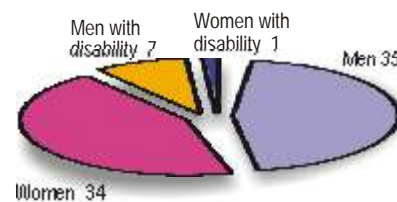


- | | | |
|---------------------|----------------|---------------|
| 1. Andhrapradesh | 7. Maharashtra | 13. Kerala |
| 2. Uttarpradesh | 8. West Bengal | 14. Ethiopia |
| 3. Madhyapradesh | 9. Uttaranchal | 15. Gujarat |
| 4. Arunachalpradesh | 10. Orissa | 16. Srilanka |
| 5. Agarthala | 11. Karnataka | 17. Bihar |
| 6. Punjab | 12. Mozambique | 18. Tamilnadu |

Disability/Gender break up



Disability/Gender break up



Luisa, Angola Trainee

I am Luisa from Angola. I came to Bangalore, India in July 2003 to attend my Rehabilitation Therapy Training in Mobility India. In my life I will never forget my stay and experience at Mobility India. It is difficult to put this into words. The trainers and staff at Mobility India were always helpful. They explained the lessons properly and were very encouraging.

For my technical profession, I am learning a lot. I did not know about developmental delay and cerebral palsy before I came here. I also gained experience working in the community. I met people from different countries and cultures.

I am happy with this training as it will be useful for my rehabilitation field back in Angola.



Faculty : Mobility India's faculty manages most (64%) modules of the training sessions and the rest is supported by faculty from national and other centres.

Consultants : We had 2 consultants from Handicap International to help us understand trainer needs and review objectives, course content, curriculum and evaluation methodology of the training programmes.

Sponsorship : Trainees sponsored by funders for long term training : JLC - 6, Miblou - 3, CBM (N) - 3, CBM SARO (S) - 5. SLF has sponsored 2 batches of short term training for CBR Managers.

Rehabilitation Services

“To focus on rehabilitation services to people who are in need of any kind of orthosis, prosthesis, rehabilitation devices, therapeutic and surgical interventions.”

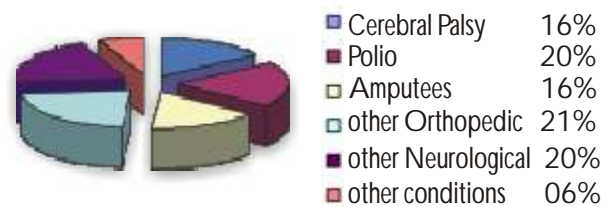
Mobility-the quality of moving or being moved easily from place to place, or of having ease and flexibility of motion.

People deprived of mobility require appropriate rehabilitation. Mobility India facilitates the process through its Rehabilitation Service. Mobility India has a well equipped Prosthetic/Orthotic workshop and Therapy Unit. They work in tandem to achieve functional independence for users accessing the service. The focus is on individual's abilities, not disabilities, providing a value-added service for each person entrusted.



Appliances to suit individual rehabilitation needs

This year we have facilitated 946 people



A total of 1275 appliances were provided for individual rehabilitation needs-1010 orthoses, 101 prostheses, 147 mobility aids and 17 wheelchairs.

Therapy inputs were given to 150 people on a regular basis and to others as per need.



Developing body balance

Deepika's life- towards functional independence

Deepika is a familiar face to most at Mobility India. She has been coming here since November 2003. When she first came, her father carried her into the centre.

Deepika has Cerebral Palsy. Cerebral Palsy is a condition where coordination and balance is affected. In Deepika's case it resulted in spasticity (tightness) of limbs. Due to this her mobility was hampered drastically. She had to be carried manually from one place to another for her daily routine which she was not able to perform independently. This had been a routine for the family for the 13 years of Deepika's life. The family took her to various hospitals for both surgical & therapeutic intervention. This was before the family approached Mobility India in November 2003.

Mobility India's rehabilitation plan for Deepika- after detailed evaluation suggested regular stretching / weight bearing exercise to reduce the spasticity of her limbs. She was also fitted with (KAFO) Knee Ankle Foot Orthosis. She would come to Mobility India daily for therapy.

A home programme was suggested to help Deepika to dress on her own, button her clothes and eat without the assistance of family members. With repeated inputs she was able to improve her coordination.

Now... Deepika's father says- "In the past few months she is participating in her daily activities as she can maintain her balance in a sitting and standing position."

Our aim is to make her independent in walking with elbow crutches and independent in all her activities of daily living.



Community Based Rehabilitation

"To facilitate organisations of people with disabilities and chronic conditions, especially the poor, to be the primary actors in ensuring they have equal rights and a good quality of life"

Mobility India- a catalyst in the community.

Working in the poorer sections of the society and making an impact takes a lot of courage and perseverance. There are lots of superstitions, misconceptions and myths that have to be dispelled by the field staff just to get the message across when convincing people about the importance of rehabilitation.

Mobility India is carrying out its CBR programme as a facilitator- to people with disabilities and their families, an advocate- of human rights (disabled people's rights in particular), a communicator-by raising awareness in the community on related issues. The strategy is to build on the abilities of people with resources available in society in general and the community in particular.

Our Community Based Rehabilitation programme continues to work in the slums of Banashankari, LR Nagar and Avalahalli covering an estimated population of 1,10,000 where we have identified 690 persons with different disabilities (368 male and 322 female).

This year we realized the following in our programme

Areas of support	Activity	Numbers
Medical rehabilitation	• Home Based Therapy	67
	• Corrective Surgery	39
	• Aids & Appliances	163
	• Home Adaptations	37
Education	• Enrolment of children (disabled and non disabled)	314
	• Educational materials for children in coaching classes	346
	• Scholarships for children with disability	67
	• Children attending Additional coaching classes (20)	365
	• Basic computer skills	41
Vocational skills	• One year training programme in Rehabilitation services	5
Self Help Groups	• Groups formed	12
	• Members	337
	• Savings	Rs. 1,13,361
	• Loan	Rs. 4,92,765
Income Generation Programme	• Individual IGP's	22
	• Auto Rickshaws	8
Access of Social security schemes	• Identity card	25
	• Pension	110
	• Bus Pass	38

A total of 953 services were rendered - 434 for women & 519 for men



Improving Madhu's hand function



Coaching class

Income Generation Programme- Hamidullah was 8 years old when he had a fall and hurt his leg. As he did not feel the pain initially, he ignored the injury. But over a period of time he could not use his leg. 25 year old Hamidullah now wears a caliper to enhance his mobility. He lives in Iliyasnagar, a CBR project area of Mobility India. Hamidullah was motivated to join the Sangha.



He was guided by the CBR team about the various schemes the Government has for persons with disability. He has availed a loan to set up a plastic business. Hamidullah is now financially independent.

Education- Ashwini (11 years) has lost her vision due to a problem in her retina. Corrective surgery could not restore her vision. She was unsure about coping in school and she could not go to school independently and hence she discontinued her studies.

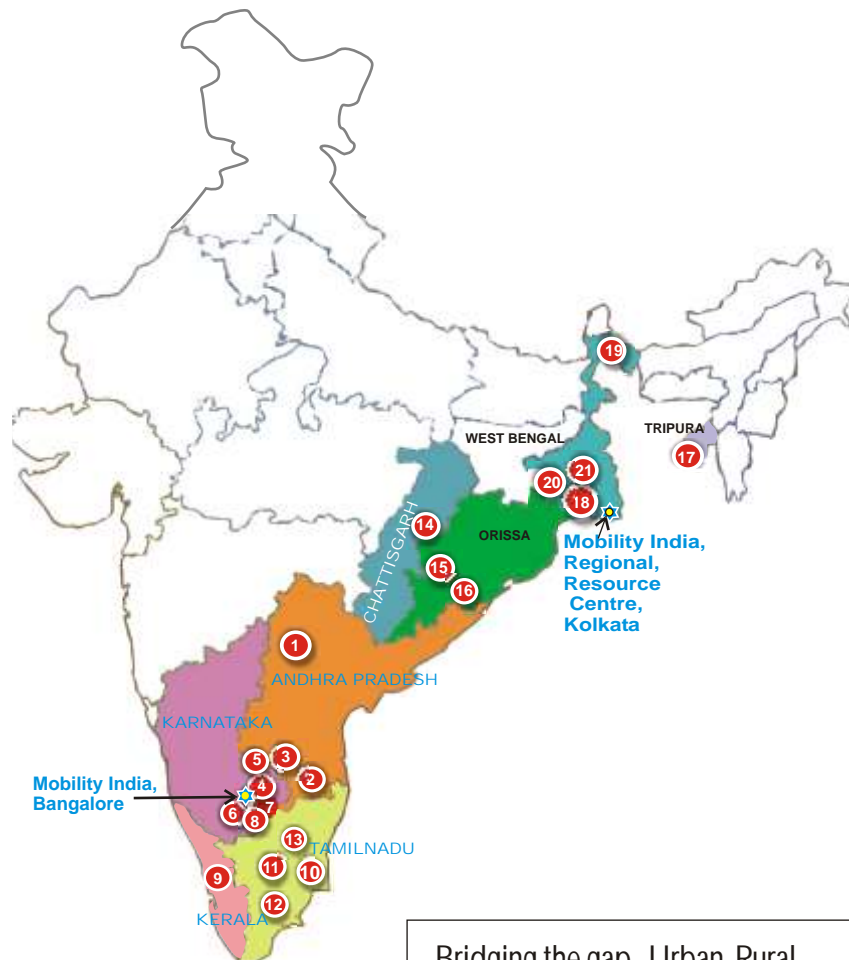
Our staff who has a visual impairment taught Ashwini how to walk independently using a white cane and in using



Braille. Within 2-3 months Ashwini was back in school and continuing her class 5 studies. Her family is very happy to see Ashwini doing her chores independently

Partner Support - to grassroot organizations

“To build an inclusive society for people with disabilities, by strengthening the capacity of partner organizations (Disabled People’s Organizations, Community Based and other Organizations) to work effectively with people with disabilities, their family members and the community in a holistic manner.”



SOUTH INDIA

ANDHRA PRADESH

1. Gram Abhudya Mandali (GRAM)
2. Movement for Rural Emancipation (MORE)
3. Rural Development Trust (RDT)

KARNATAKA

4. Grameen Abudaya Seva Samasthe (GASS)
5. Narendra Foundation
6. NIMHANS
7. Rehabilitation Aids Workshop by Women with Disability (RAWWD)
8. SAMUHA

KERALA

9. Tropical Health Foundation (THFI)

TAMIL NADU

10. Society for the care of the handicapped (SCH)
11. Joseph Eye Hospital (JEH)
12. Voice Trust
13. CSI Rehabilitation Centre

NORTH EAST

CHATTISGARH

14. Raigarh Ambikapur Health Association (RAHA)

ORISSA

15. Asha Bhavan (Holy Cross Convent)
16. Home for the Physically Handicapped

TRIPURA

17. Fernando Rehabilitation Centre

WEST BENGAL

18. Asha Bhavan Centre
19. Howrah South Point
20. Makhla Muktadhara
21. Association for Women with Disabilities (AWWD)



Post fitment gait training, JEH

Bridging the gap- Urban-Rural

Since its inception in 1994, Mobility India has worked to provide appropriate rehabilitation services to rural areas. We reach out to more and more number of persons with disabilities irrespective of age, sex, economic status, caste and creed.

In our work this year we supported 17 existing partners (9 through Bangalore & 8 through Kolkata) and 3 Government Programmes. Mobility India staff made regular visits (71) to partner organisations. The support included setting up of orthotic and prosthetic workshops (4), conducting training programmes for their staff (12), assessment and fitting of aids and appliances, therapy support as well as follow-up, repairs and maintenance. A total of 3559 people with disabilities were assisted - 3329- Bangalore, 230- Kolkata.

Organisations like RDT, GASS, HSP, RAHA, Narendra Foundation and Vikash Bhavan serve as good centres for placement for long-term trainees.

Research and Development

“To research and design rehabilitation devices and its components which meet the needs of our priority groups within India and other Low Income Countries.”

Innovate to integrate

23rd September 2003- was an important day in the history of Mobility India, SATHI was launched.

SATHI is the Trans Tibial Plastic Modular Component. Mobility India worked for three years to develop a light weight plastic modular component of prosthesis, which could be assembled quickly, light in weight, adaptable to all kind of feet available including bare foot model- i.e., Jaipur foot and made available at a very affordable rate.

A definite effect of these innovations is the large numbers of physically challenged individuals seeking a certain degree of independence and getting integrated into mainstream society with their new found mobility.



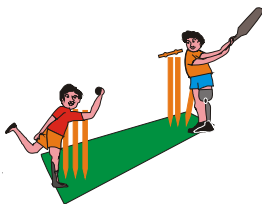
Girish Kumar

The cost of the prosthesis is beyond the limit of affordability for the poor and the middle class families in India where around 33% of total population is below poverty line and most of them reside in rural areas and urban slums. In today's world, where mechanization has conquered almost all the fields of industry even agriculture, workers are prone to accidents.

Such is the case of 23 year old Girish Kumar. He is a trained motor mechanic. In March 2000, he met with an accident while he was at work. He was rushed immediately to the hospital where temporary medical relief was given by bandaging the wound. Lack of proper medical follow up resulted in gangrene formation. His left leg had to be surgically removed. Ever since the amputation occurred he was pursuing to get the appropriate limb to make him mobile. After a lot of perseverance he managed to get the same from Mobility India. Girish Kumar was fitted with SATHI.

Girish is now satisfied with the limb and he wants to move on with life by setting up a business of his own.

Other Activities



Pitching in for the cause-Indian fast bowlers came together to support Mobility India. Javagal Srinath laid the foundation for Mobility India's Rehabilitation Centre in 1999. He visited the fully functional centre in August 2003 and was inclined to support the activities. He called in Ajit Agarkar, Zaheer Khan, Ashish Nehra & Avishkar Salvi. All of them featured in a 30 second Public Service Message for Mobility India. The message has been aired on Doordarshan, NDTV, and Udaya.

Through our mobile service we have made 270 trips. 39 service users have availed wheelchairs and walkers from our wheelchair bank. 5 articles were printed in the leading newspapers to bring awareness about the mobile service.



Mobility India's Jaipur Foot production unit is the first and currently the only one of its kind in the world, which is managed and run solely by women with disabilities. This year the women produced 657 foot pieces from the unit.

External evaluation of Mobility India for the period 1998 - 2003 was conducted and the recommendations have been incorporated in our work.

RECEIPTS & PAYMENTS ACCOUNT FOR THE YEAR ENDED 31st MARCH-2004

RECEIPTS	AMOUNT	PAYMENTS	AMOUNT
OPENING BALANCE		Personnel Cost	2913940.99
- Cash On Hand	24227.98	Operating Expenses	2967714.60
- Cash At Bank	13094471.16	Governing Body Meeting	33452.00
GRANTS FROM		Support To Grassroot Organisation	1720960.77
- Christoffel Blinden Mission	6288920.00	Rehabilitation Service	5250309.42
- Jaipur Limb Campaign	4006086.00	Training	2131894.61
- MIBLOU	1617133.90	Research & Development	1828274.26
- Misereor	1601785.67	Urban Community Based Rehabilitation Project	2216325.03
- Abilis Foundation	428124.00	Capital Expenditure	2666659.35
- Zurich Financial Services	1599644.00	Advances & Deposit	
- Supraja Foundation Limited	1500000.00	Advances	2161809.99
- Action on Disability & Development	1135240.00	Fixed Deposit	15424864.00
- Stichting Liliane Fonds	158000.00		
- Terre des hommes	899311.00		
- Indian Society of the Church of Jesus christ of latter day Saints	25870.00		
- International Committee of the Red Cross	903730.00	CLOSING BALANCES	
- Handicap International	69600.00	- Cash on Hand	9715.36
- Motivation(Sri Lanka)	503784.00	- Cash at Bank - Canara Bank	6318927.23
- Give Foundation	14881.82		
- Fehrenbach	25000.00		
- Community Education and Regeneration	13226.00		
- International Society Prosthetics & Orthotics	113865.00		
- Sir Dorabji Tata Trust	900000.00		
DONATION RECEIVED			
Donation	7988940.60		
State Government	200000.00		
Membership Fees	70.00		
Advance & Deposit	604939.00		
Interest from bank	1927997.48		
Grand Total	45644847.61	Grand Total	45644847.61

K.S. Umarhantkar

PRESIDENT
Mobility India

Veda Zakharia

TREASURER
Mobility India

AS PER OUR SEPARATE REPORT OF EVEN DATE
IN FORM FC-3 ATTACHED,
for CHARLES PRABHAKAR & ASSOCIATES,
Chartered Accountants

(Signature)

(DR. CHARLES PRABHAKAR)
MEM NO. 18391



Donate generously towards-

Physical /Medical Rehabilitation

- | | | |
|--------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| <input type="checkbox"/> Jaipur Foot Rs. 350/- | <input type="checkbox"/> Artificial limbs (prostheses) Rs. 5,000/- | <input type="checkbox"/> Calipers/Splints (orthoses) Rs 2,500/- |
| <input type="checkbox"/> A pair of Ankle joints Rs. 70/- | <input type="checkbox"/> A pair of elbow/axillary crutches Rs. 1200/- | <input type="checkbox"/> A pair of Knee joints Rs. 370/- |
| <input type="checkbox"/> Wheelchair Rs. 5,500/- | <input type="checkbox"/> Development Aids for children with multiple disabilities, eg toilet seat Rs. 1,500/- | |
| <input type="checkbox"/> Therapy for a month per person Rs. 1000/- | | |

Educational Rehabilitation

- | | | |
|-------------------------------------------------------------------------|-----------------------------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> Sponsor education/fees for a child Rs. 2,000/- | <input type="checkbox"/> Computer Training of a child Rs. 600/- | <input type="checkbox"/> Coaching class of a child Rs. 800/- |
|-------------------------------------------------------------------------|-----------------------------------------------------------------|--------------------------------------------------------------|

I am donating Rs..... by Cheque/ Demand draft number towards.....

I would like you to mail me / my friend information on your work.Name and address.....

.....

.....

Pin.....Telephone: E-mail :

**All donations are eligible for tax exemption under section 80G
(DD/Cheques to be made in the name of Mobility India)**

TRAINING SCHEDULE

Long term training (one year)

- ◆ Orthotic Technician
- ◆ Prosthetic Technician
- ◆ Rehabilitation Therapy Assistant



5th of July 2004 to 11th June 2005, (3rd Batch)

4th July 2005 to 10th June 2006 (4th Batch)

Short term training(six weeks)

Training Programme for
Community Based Rehabilitation Workers

27th September, 2004 to 6th November, 2004 (6th Batch)

11th April, 2005 to 21st May, 2005 (7th Batch)

Short term training(two weeks)

Training Programme for Community Based
Rehabilitation Managers

16th to 27th November, 2004 (5th Batch)

7th to 19th February, 2005 (6th Batch).



MOBILITY INDIA

Respecting people's abilities

Rehabilitation Research & Training Centre

Post Box No. : 7812,

1st & 1st 'A' Cross, 2nd Phase, J.P. Nagar, Bangalore - 560 078.

Phone : +91-080-26492222, Telefax : +91-080-26494444 Email : e-mail@mobility-india.org

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Website : www.mobility-india.org