



## South India AIDS Action Programme

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## ACTIVITIES UNDERTAKEN BETWEEN APRIL 2021 TO JANUARY 2025

**Areas of Work:** Relief of the poor, education, medical relief, health, nutrition

**Population:** Adolescents in slums/resettlement areas, children in government, grant-in-aid and private child care institutions, destitute women and sexual minorities

### **Project 1: Malarkal – A Million Buds Blossoming: Integrated Approach to Strengthening Health, Gender Safety, and Employment Preparedness of Adolescent Girls in Urban Slums**

**Donor:** Azim Premji Philanthropic Initiatives (APPI)

**About the Project:** The scope of the initiative is to strengthen agency of approximately 2500 adolescents (1800 adolescent girls and 700 adolescent boys) in All India Radio Nagar, Ernavur through building capabilities related to life skills, nutrition, sex and reproductive health, mental health and employability among primary and secondary stakeholders in a Period of 3 years. We built agency at two levels a) strengthen capacities of affected people to realize their potential and to pursue opportunities for their own development and b) strengthen capacities of service providers and policymakers to respond sensitively and adequately to need of all people. This is a participatory approach and the programme will be adolescent and family led in terms of fixing priorities, advocacy with government agencies and in monitoring progress. SIAAP will lead in terms of building capacities, linkages and mentoring support. The objectives are to strengthen nutrition, life skills, gender safety, sexual health, mental health through capacity building & establishment of service provision models for Sexual health & mental health, and employability preparedness among 4800 adolescent girls in urban slums in Chennai, increase parental and community support in well-being of adolescent girls in the community, for sexual health, Gender Safety, Mental Health and employability preparedness for girls and for planning, monitoring and advocate for sustainability of interventions, strengthen attitude and skills of service providers and establish systems for linkage and referral, strengthen evidence building about issues, services, challenges and cost-benefit ratios related to sexual health, mental health, nutrition and employment preparedness in the community and ensure sustainability of interventions & scale up of integrated model to promote agency and health of adolescent girls in Tamil Nadu.

#### **Key Activities:**

- Identification of adolescent girls and boys for the programme.
- Workshops for finalising topics for module development and prioritising identified topics.
- Develop adolescents appropriate training modules, work book, IEC materials on life skills, mental health and sexual and reproductive health for adolescents.
- Trainings on the identified 20 topics for adolescent conducted at school and community level.
- Conduct weekly psycho-social counselling sessions for the adolescents at the school & community.
- Conduct weekly sports coaching and 3 annual sports events for adolescents 8 -18 at the community level
- Conduct self-defence classes for adolescents (8-18 years) at the community level once a week.
- Develop materials on perspective building process and parenting skills for the community and parents.
- Conduct perspective building/sensitization with parents and other community members.
- Capacity building for parents on knowledge & attitudes related to nutrition, sexual health, mental health, gender safety and parenting skills.
- Provide individual counselling for children and parents in the community.

- Establish parents advisory committee (PAC) and conducted bi-monthly meetings to promote community participation in program implantation, review, and advocacy form 3 PAC.
- Identify services providers in government and private sector (in health care, education, and law enforcement) and conduct sensitization programs for adolescents in batches.
- Establishing partnership with government and private mental health and SRH service providers
- Develop referral pathways and establish linkages for services.

**Key Outputs:**

- Approximately 2500 children from AIR Nagar and Ezhil Nagar communities and 3 schools in Ernavur have undergone training on 20 topics in the areas of nutrition, gender, violence and safety, life skills, SRH, mental health through 2098 sessions.
- Approximately 400 children undergone comprehensive health screening and 286 children accessed services for nutrition, menstrual health, ophthalmology, dental, skin, ENT. reproductive health and mental health.
- About 20 children linked for sponsorship programme to prevent institutionalisation
- About 770 children and 530 parents of children undergone counselling services
- About 383 children undergone 9 months sports coaching sessions (536 sessions) and 506 children undergone self-defense classes (596 sessions) and attended 3 annual sports and 3 annual self-defence certification events.
- About 2855 parents especially mothers of children in AIR Nagar undergone perspective building on understanding adolescents and ensuring safe and supportive environment for adolescents in the family and community.
- Key 1956 mothers trained on parenting skills through 195 sessions on nutrition, gender, safety, menstrual hygiene, mental health, sexual and reproductive health & development stages of adolescents.
- About 75 service providers including officials from Tamil Nadu Urban Habitat Development Board, Teaches, Health Care Providers were sensitized on offering stigma and discrimination free sexual and reproductive health and mental health services.
- More than 10,000 sanitary napkins were distributed to adolescents' girls through community counselling centers in Ernavur with the support of Urban Primary Health Center of Greater Chennai Corporation in AIR Nagar.
- About 1500 families of children enrolled in the programme from AIR Nagar were provided dry ration kits as emergency relief during 2 waves of Covid-19 pandemic with the support of AAPI, Tamil Nadu Urban Habitat Development Board and Greater Chennai Corporation.
- 79 parents advisory committee meetings were conducted.

## **Project 2: Improving Adolescent Mental Health in Low Income Urban Settlements**

**Donor: UNICEF**

**About the Project:** Adolescence has been identified by many as a Period in which several specific mental health issues have high prevalence (poor academic performance, bullying, anxiety, depression, suicide, sexuality-related, substance abuse, guilt, love, conduct disorders, family strife, truancy, lying, emotional blackmail, etc.). However, adolescents also slip through the health care system because at the age 15 they stop going to the pediatrician, but they are not yet entering the adult psychiatry system. Since the lower age groups are already in touch with ICDS and SSA which can possibly be helped to identify mental illnesses, adolescents are the group which is not covered by any program. A community and school based, adolescent led, adolescent friendly, non-medical model, explicitly addressing mental health needs through promotive, preventive, and curative services among adolescents in Perumbakkam, Chennai is proposed. It's a resettlement project of the state government, situated on the fringes of Chennai, comprising 20,000 households. Residents are from a mix of fishing communities displaced during the 2004 Tsunami, squatter colonies within the city, and intra state migrants. This mix has led to a poorly developed sense of community and lack of accountable leadership, with severe consequences for adolescents and young people who live there. This has led to a large number of adolescents dropping out of school, and the risk of abuse and substance use and violence. **The proposed initiative addressed mental health needs and substance dependence among 1000 adolescents in Perumbakkam in collaboration with Department of Children Welfare and Special Services, Tamil Nadu Urban Habitat Development Board and UNICEF.**

### **Key Activities:**

- Desk review and sample survey on mental health status of adolescents (with special reference to intergenerational mental health disorder and low-income urban settlements) including substance addiction, socio-economic and environment factors affecting mental health and support seeking behaviour of adolescents in low-income urban settlement.
- Identifying and building cadre of child spokesperson to promote peer support systems, positive role models and advocate with policy makers about issues affecting them.
- Establish provision of community-based adolescent friendly counselling services to promote psychosocial support to adolescents and their parents.
- Linkages with existing mental health services through accompanied referral to promote access to mental health issues.
- Identify a team of trained volunteers/subject experts to build the social capital and mentoring support for career guidance, vocational/employment.
- Improve resilience of adolescents through building knowledge, attitude, skills, and life skills education.
- Networking and partnership with schools and colleges in the neighborhood to leverage institutional and social support to conduct and promote sports, arts, cultural and meaningful engagement activities.
- Develop age-appropriate knowledge sharing materials such as posters and short video clips on prioritized them such as mental health, emotional wellbeing, substance abuse, sexual health, career guidance and self-care and share every month over social media and online platforms.

### **Key Outputs:**

1. Desk review report on mental health status of adolescents (with special reference to intergenerational mental health disorder and low-income urban settlements) including substance addiction, socio-economic and environment factors affecting mental health and support seeking behaviour of adolescents, nutrition, education, SRH, child marriage and teenage pregnancy in low-income urban settlement completed.
2. 63 CSPs were and 50 Child Spokes Persons including 20 and 30 adolescent boys and girls respectively were recruited with skills and qualities such as leadership skills, assertiveness and ability to communicate information.
3. 50 CSPs were taken through induction training to discuss and explore the needs and concerns of

adolescents in the community currently facing and roles and responsibilities of child spokes persons and training sessions were also facilitated for the CSPs on the themes around violence and staying safe, relationships, and peer support system.

4. 19 counselling session parents, friends, emotions, family conflict facilitated for children, 3 PAC meetings with 12 stakeholders for each meeting, 8 online tutoring covering 12 adolescents, 2 dance therapy sessions covering 40 children were conducted at counselling centres.
5. Service providers have been sensitised about adolescents and oriented on the support required by children of the adolescent age and the healthy ways in providing services to the particular age group.
6. Over 500 children and adolescents attended life skills sessions on various topics like handling emotions, effective communication, relationships, self-esteem and gender.
7. Nearly 1078 parents (862 female/ 216 male) and 882 children and adolescents (573 female/ 309 male) have been engaged in one-to-one and group sessions about perspective on children between ages 8-11, and the physical and mental changes they go through during this Period.
8. 12 children connected with volunteers to enhance knowledge in Spoken English and Mathematics.
9. Age-appropriate knowledge sharing materials on mental health, substance addiction, career opportunities and self-care shared every month through social media and online platforms.

## **Project 3: Urban Programming for Children and Adolescents**

**Donor:** UNICEF

**About the Project:** Slightly less than half of the adolescent population of India live in urban areas, according to the National Family Health Survey (2019-21). Evidence suggests that over two-thirds of adolescents in urban areas live in low-resource settings such as slums, chawls, or government resettlement colonies.<sup>1</sup> In these settings, multiple barriers related to living conditions, education, health, safety, social capital, and social cohesion, intersect to produce and reproduce inequalities that can result in multigenerational poverty if left unaddressed. For example, literacy levels in slums are significantly lower than national/state averages, chronic water and power shortages threaten hygiene and safety, crime rates are twice as high, slum youth contribute disproportionately to sexually transmitted infections including HIV/AIDS, and suicides/attempted suicides. These factors limit their access to and use of critical education, health, safety, and welfare services. The scope of the proposed initiative is strengthening the agency of approximately 500 children and adolescents aged 10 to 18 years in an urban resettlement community, Perumbakkam, in Chennai city through building capabilities related to life skills, nutrition, sexual health, mental health, teenage pregnancy, child marriage, gender safety among primary and secondary stakeholders in a Period of 7 months from June 2022 to December 2022.

### **Key Activities:**

- A situation analysis on nutrition, sexual and mental health, education, relationships, protection and mobility, child marriage and teenage pregnancy, substance abuse among children and adolescents in Perumbakkam community.
- Community Perspective building - Perspective building with parents, youth groups, SHGs and other community members.
- Knowledge, attitude and skills development of children and adolescents through training on life skills, nutrition, mental health, sexual health, reproductive health, child marriage, teenage pregnancy, gender safety and education outcomes.
- Sensitizing service providers including health care providers, Anganwadi Workers, teachers on SRH and Mental Health needs and concerns of adolescents.
- Training parents on pressing issues related to their children and adolescents and as peer trainers.
- Establishing infrastructure for one stop counseling center for children and adolescents and sensitization for parents and other community members.
- Accompanied referral and linkages for mental health, sexual and reproductive health and employment of adolescents.
- Establish platform to foster alliance between community collectives and policy makers and service providers.
- Identify children, adolescents and adults interested in volunteering their time and skills for the development of adolescents in their community for sustainability planning and capacity building.

### **Key Outputs:**

- A sample survey among 123 adolescents covering nutrition, education, mental health, sexual and reproductive health, gender, safety, abuse, bullying, personal hygiene, domestic violence, child marriage, teenage pregnancy and child labour was conducted. In addition, a comprehensive check-up of vital health parameters was also conducted through organising a health camp with 83 participants.
  - Over 500 individuals including parents, youth groups and SHGs reached out through perspective building sessions and parenting skill training on the themes of teenage pregnancy, child marriage, mobility of girl children, school attendance, substance abuse, mental health, sexual and reproductive health, nutrition, access to services, and other issues affecting children in the community.
  - 2 counselling centers established for boys and girls and 50 persons accessed counselling services.
  - A session on Human Rights Day was also facilitated for the children at school, where the history of
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rights, child rights and human rights were explored.

- Life Skills Education sessions were organised at the school for 6th and 7th graders.
- A sensitization program for 15 teachers at the Govt. Higher Secondary School, Perumbakkam was conducted to impart knowledge about understanding adolescence, the biological and psychological changes that they undergo, the psychosocial aspects and their attitude towards school and teacher.
- 20 children were accessed services for ophthalmology at Chettinad Hospital and 47 accessed services for oral hygiene and teeth related issues at Vels dental College.
- 3 parent volunteers and 2 adolescents volunteers went and met the authorities to address their key issues such as irregular buses, poor street lighting and poor road conditions around the community and handed over petitions and spoke to them about the issues. The authorities also responded in a quick and agile manner towards taking action.
- 300 parents and community leaders and Key 100 SHG members and 100 youth sensitized.
- 500 children and adolescents trained in life skills, nutrition, mental health, sexual health, reproductive health, child marriage, teenage pregnancy, gender safety.
- 7 children were trained to attempt their supplementary exams with the support of volunteers. Children visited the centre to attend these classes for almost 20 days.
- 14 parents and adolescents advisory committee meetings conducted, and 20 volunteers trained.

## **Project 4: Strengthening Access to SRHR and Well Being among Female Sex Worker Community in 3 States in India**

**Donor:** Amplify Change. European Union, Stitching Fidel

**About The Project:** India has nearly ten million female sex workers (FSWs). Sex work is not illegal but the current law (Immoral Traffic Prevention Act) criminalizes related activities, with devastating consequences. We have found that the intransigent stigma and discrimination of sex workers is a major barrier to their access to public SRH services, especially for abortion and contraception, intimate partner violence (IPV) and mental health. This has become even more difficult with the pandemic crisis. To tackle these issues more effectively and within the new COVID-19 environment, we have shaped our drawing on project learning, experience of adapting to COVID-19 and the findings from our research within the SW community. Firstly, we shifted emphasis from our own advocacy on behalf of SWs to empowering SWs to advocate collectively themselves. Secondly, we advocated more pointedly at state and regional level to make the ground fertile for later national change. We have taken forward 4 areas of work such as growing a stronger SRHR movement by empowering sex workers to advocate as a community, improving access to comprehensive SRH and well-being services and information through policy and community advocacy, organizational strengthening to enhance the effectiveness, particularly in the COVID-19 context and generating evidence of the impact of COVID-19 on SRHR in the SW community in Tamil Nadu, Karnataka, and Maharashtra

### **Key Activities:**

- Capacity building of sex workers for collective advocacy.
- Cross-learning advocacy initiatives between SW and non-SW collectives.
- Continuing to build leadership for SRHR through peer leader training.
- Establishing sex worker community-based crisis response teams.
- Advocating at state level for the acceptance of the SW-sensitive SRH service guidelines.
- Facilitating acceptance of the SW-sensitive SRH service guidelines to be embedded in state and regional health facilities.
- SRHR Education among FSWs on safer sex in the context of COVID-19.
- Establishing Online platforms for outreach and advocacy, and trialling within the SW community.
- Establishing Online Financial and Human resource management systems.
- Developing policies and procedures on: Financial and Legal compliance, safeguarding staff well-being, and online safety.
- Developing Fundraising and Communications skills and capacity.
- Collecting, analyzing and disseminating data on the impact of Covid-19 on SWs.
- Developing narratives on this impact for advocacy, sharing and policy development.
- Using evidence to push for the inclusion of SWs in COVID-19 prevention and relief measures.

### **Key Outputs:**

- More than 10,000 sex workers trained on SRH including cancers, mental health, pleasure and sexuality, SRH rights, ITPA, and advocacy skills through nearly 200 meetings at CBOs.
- More than 1000 women accessed SRH and MH services.
- More than 50 sex workers trained on advocating for SRH rights.
- Crisis teams established in 20 CBOs and more than 50 FSWs trained on crisis intervention.
- More than 50 crisis interventions made with regard to intimate partner violence, stigma and discrimination at health facility, family issues of Sex Workers Visited Government Vigilant Homes in Tamil Nadu to conduct survey on SC order and submitted report to the Directorate of Social Defence
- 10 women from 4 CBOs visited Asshodaya in Mysore as part of cross learning exercise.
- Online consultation workshop conducted with representatives of national and state level networks, supports of networks, policymakers.
- Draft SRH policy guidelines shared with and presented to Technical Resource Group of NACO
- SRH training module with session flow, PPT and handout was developed for 12 topics and shared with TANSACS and NACO.

## **Project 5: Reduce Risk of Sex Workers to HIV/AIDS, Strengthen Sex Worker-Led Interventions to Access their Rights as Workers; Access Social Entitlements and Government Covid Relief Packages as Informal Sector Workers.**

**Donor:** FUND FOR GLOBAL HUMAN RIGHTS (FGHR), European Union, Mariwala Health Initiative

### **About the Project:**

Sex workers and social protection Sex workers are doubly discriminated against in the context of social protection. While short term measures such as emergency relief are rolled out during times of distress, the right to social protection is missing and, in many cases, actively denied when the person is a sex worker. Secondly, protection including maternity benefits, sick leave, and other benefits available to workers are actively denied to sex workers because of their stigmatized and criminalized work. The main factor that prevents access to social protection systems is the lack of identification documents. Since many women leave their homes to practice sex workers or travel outside residential districts, they do not have any identification documents. This in turn prevents women from accessing social protection programs, opening bank accounts, accessing small loans. It renders them vulnerable to taking loans from private money lenders at very high interest rates. Children of sex workers are not able to access any support through scholarship schemes. This initiative assisted sex workers to leverage and access social protection safety nets, access better health outcomes, legal assistance by strengthening community-based organisations who are members of the National Network of Sex Workers (NNSW) in operating help desks at the district level.

### **Key Activities:**

1. Operationalize Peer Help Desks in 4 districts to assist sex workers access government entitlements
2. Train peers in the evidence needed and documentation to implement the help desk
3. Baseline survey of ID proof and social entitlements of the community
4. Review of centrally and state sponsored schemes

### **Key Outputs:**

- Four help desks established in Theni, Madurai, Kanyakumari and Tirunelveli through FSW CBOs Vadamalar Federation in Tamil Nadu
- Baseline Assessment Completed for Key 1476 FSWs.
- 209 social entitlements such as Pan card, Ration card, Bank Account, Aadhaar card, Community Certificate, Voter ID, UDYAM –MSME Certificate, and Death Certificate were availed and Key 156 more were applied by FSWs.
- 33 welfare schemes CMs Health Insurance Scheme, Widow Pension, Welfare Board Membership card, Destitute Pension, Old Age Pension, CM Green housing scheme and PLHIV Pension Scheme were availed and 353 were applied by FSWs.
- 133 FSWs were provided with legal support, access to health services and psychological support.
- Covid-19 Relief was provided to 159 FSWs through GFATM Covid-19 Grant for KPs in India and 578 more FSWs were provided dry ration kits through Mariwala Health Initiative, EU and Individual donors.

## **Project 6: Reintegration of Children with their Families and Preventing Re-Institutionalization**

**Donor:** UNICEF

**About the Project:** Phase 2 of this project builds upon the learnings from 2019 and will cover the two areas of continuum of care such as 'reintegration with family' and 'follow-up support to successful adulthood'. In particular, the Phase 1 interventions prepared the stakeholders for reintegration and the Phase 2 interventions will ensure successful reintegration of children with their families and prevent re-institutionalization. In addition to reintegrating children with their biological parents, efforts will also be taken to reintegrate children with other forms of cares such as foster care, kinship care and adoption as appropriate. The objectives are to strengthening families and empowering caregivers and management staff for successful re-integration of children in Government Children's Home for Boys, Ranipet, building impact tracking systems and providing evidence based successful reintegration strategies for scaling up, promoting reintegration and preventing re-institutionalization by empowering children, building mechanisms, and capacity building of child protection functionaries.

### **Key Activities:**

- Developing crisis intervention directory for children reintegrated with families.
- Identify children by parental status explore conditions to thrive if considered for re-integration.
- Awareness and capacity building sessions for staff of Ranipet Home to promote reintegration and strengthen families for reintegration and preventing re-institutionalization.
- Family visits to provide psychosocial support, access financial sponsorship, crisis intervention, school enrolment and post-reintegration assessment for families.
- Parenting skills training and support group meetings.
- Sensitization on Reintegration & family-based care in Village Child Protection Committee.
- Create a database of children in Ranipet Home.
- Create Data Tracking systems with dashboard indicators to track intervention related progress.
- Developing guide on critical intervention for reintegration.
- Research and Evidence building on successful intervention strategies for reintegration and preventing re-institutionalization.
- Empower children on child rights to promote participation and inclusion in decision making for successful reintegration.
- Psychosocial support for children in Ranipet Home through Individual Counselling and Family therapy during pre and post reintegration.
- Secure school admission for children reintegrated with families and willing to continue studies.
- Capacity building workshop for 21 mentors in the communities of reintegrated children.
- Ensuring convergence of allied agencies through monthly follow up with DCPUs, CWCs and POs.
- Support for CCI staff and POs in updating ICPs of reintegrated children.
- Monthly assessment of Reintegrated children on safety, schooling, relationships, behavioural issues and community environment.
- Support group meetings for children pre and post-reintegration.
- Crisis intervention post-reintegration.
- COVID-19 Impact assessment study.

### **Key Outputs:**

- About 33 potential children out of 84 children residing in the CCI were identified and a database of children was prepared.
- 30 children from 25 families were prioritized for reintegration, about 56 family visits were made to families of 17 children to carry out pre-reintegration assessment.
- About 30 care staff in Ranipet home were trained on basic counselling skills, active listening, gathering information, attitude towards reintegration, alternative care, positive discipling, importance of reintegration, roles of care providers in reintegration and of alternative care,

meaningful engagement of cci children during Covid-19 pandemic, importance of family-based care for cci staffs of Vellore district, reintegration processes and addressing challenges and meaningful engagement with children during Covid-19 pandemic situation.

- 46 individual counselling session with parents and 15 joint sessions with children and parents were conducted to ensure psychosocial support before reintegration.
- About 100% of the families of reintegrated children were in psychological distress and hence provided with counselling support, about 69% of the families supported through capacity building workshops and support group meetings, 50% of the families undergone family counselling to handle issues between parent and child, 31% of the families provided support during crisis and 13% families supported for legal issues.
- Developed comprehensive resource directory on state and central government sponsored welfare schemes and 10 children eligible applied for ICPS sponsored sponsorship scheme based on their age, economic and family status, child was linked for educational assistance of Rs.9700/- to pursue Diploma in Computer Education at private polytechnic college, 3 children were provided health services on different issues especially during COVID-19 lockdown, 4 mothers applied to the widow pension scheme, 10 families received the income certificates to apply for required social benefits and two mothers supported with employment with starting salary of Rs. 6000 per month.
- Child specific crisis intervention directory was prepared for each of the 12 children reintegrated with their families and 4 Crisis issues were resolved effectively.
- 10 children out of 12 reintegrated children were enrolled in schools near their home while two children continued with the same school as their houses are located closer to it.
- 27 family visits, 31 interactions with parents, 29 interactions with children and 27 interactions with community members were made to assess, monitor and support the families and children.
- A one-day parenting skill training programme was conducted in January 2021 for 11 parents of 12 and 1 guardian of reintegrated children.
- 1 in-person support group meeting with 11 reintegrated children and 10 online support meetings with 5 children were conducted.
- A study to assess the economic and health impact of Covid-19 on caregivers, family's attitude towards re-integration and map the resources required for successful re-integration of children in CCIs in the aftermath of the lockdown was conducted with 400 families from four districts in four Zones of Tamil Nadu.
- 182 individual counselling sessions (121 sessions through phone calls and 46 sessions in-person sessions) and 15 group sessions were facilitated to offer psycho-Social Support for Reintegrated Children and Children in CCIs.
- 64 individual sessions and 1 group meeting were organized with 10 mentors to strengthen the abilities of the mentors in guiding and monitoring the child.
- A total of 12 visits to allied agencies (12 out of 36 - 33%), 3 intra-departmental convergence meetings (100%), 1 inter-departmental meeting (100%) were conducted.
- 281 online/telephone interactions were made to strengthen networking, convergence and linkages with allied agencies.

## **Project 7: Building Alternative Care for Children in Institutional Care in Tamil Nadu**

**Donor:** UNICEF

**About the Project:** In two phases of the pilot project, SIAAP collaborated with Department of Social Defense, Government of Tamil Nadu, and UNICEF, and completed strategic process of engagement with the children at the Government Boys Home, Ranipet, their families, the institutional staff, communities, and allied agencies, prepared the stakeholders and successfully reintegrated 12 children in institutional care with their families. The scale-up phase of this project builds upon the above learnings and will cover the four areas of continuum of care such as 'Entry level', 'duration of stay', 'reintegration with family' and 'follow-up support to successful adulthood' in selected CCIs and districts in Tamil Nadu. In short, it will prepare the stakeholders for reintegration and will ensure successful reintegration of children with their families, foster care, kinship care and adoption and prevent re-institutionalization. The objectives are to support role out of 5-year action plan and promotion of alternate care and de-institutionalization in Tamil Nadu, developing Social and Behaviour Change Communication materials, Standard Operating Procedures and Guidelines to promote alternate care in Tamil Nadu, building capacities of select Child Protection Functionaries to empower children, strengthening families and empowering caregivers and management staff for successful reintegration of children in selected CCIs, establishing cadre of child protection functionaries delivering reintegration services to children in institutional care, establishing linkages mechanism to foster family strengthening services to promote reintegration in the state, building impact tracking systems and providing evidence based successful reintegration strategies for scaling up, to support Multipurpose Resource Center for child friendly single window service delivery.

### **Key Activities:**

- Identifying priority districts and developing implementation roadmap, in consultation with the Directorate of Social Defence, for the promotion of alternative care in selective districts of Tamil Nadu.
- Develop social and behavioural communication materials, monitoring and evaluation tools, reporting formats and reporting tools.
- Building capacities of CPF towards effective and efficient implementation of reintegration activities in the prioritised district.
- Build consensus and commitment among stakeholders and strengthen linkages with related agencies and ensure convergence.
- Assist CPF to create database of prioritized children, explore conditions to thrive in the family (SIR and ICP based), initiate contact and assessment with families, prepare children and families, reintegration, and post reintegration follow-up.
- Refresher training for DCPU counsellors of prioritized districts and onsite support supervision to strengthen psychosocial services for reintegrated children and their families.
- Establish effective monitoring and evaluation system to track and report progress of the intervention  
Establishing Project Management Committee and conducting meetings on schedule.

### **Key Outputs:**

1. 7 high priority districts to implement alternative care for children in institutional care identified.
2. 7 district specific alternative care plan for children in institutional care developed.
3. 70 child protection functionaries trained.
4. 100 children and their families prioritised for alternative care and data base is developed.
5. 100 families provided with Family strengthening services (Psycho-Social, income generation, linkages for social protection schemes and mentorship) to foster sustainable family-based care.
6. 48 children in institutional care placed in alternative forms of care and post reintegration support and monitoring ensured for 1 year and also linked for social protection schemes.
7. Rapid assessment of children in kinship care due to Covid-19 in Tamil Nadu conducted among affected children in 6 districts and the report with recommendations submitted to DSD. Based on the report, the government of Tamil Nadu conducted the study across the 38 districts in the state.

## **Project 8: Building an Alternative Care System to Promote Family-Based Care**

**Donor:** UNICEF

### **About the Project:**

SIAAP worked jointly with the Directorate of Social Defence, child protection functionaries at the district level and UNICEF, to enable the successful roll-out of a 5-year strategic plan on building an alternative care and de-institutionalization plan across 38 districts in the state for a Period 7 months from June 2022 to December 2022. As the proposed activities are in line with 5-year strategic plan, the objectives, activities and time frame of this intervention for the above mentioned 7-month Period. This alternative care project builds upon the earlier phase (March 2021 to March 2022) learnings and draw upon the **capabilities approach** to frame the interventions. SIAAP worked together with key stakeholders to strengthen the capabilities of CPFs including improved knowledge and skills related to enabling and empowering children, addressing their needs and concerns, commitment to child rights, and developing an enabling environment.

### **Key Activities:**

- Prioritizing CCIs and developing district-specific implementation roadmap in consultation with the Directorate of Social Defence to roll out of alternative care programme across 38 districts in Tamil Nadu.
- Establish resource group and think tank from government departments, domain experts and NGOs that will review existing resources for usability and create the new tools for evidence- based content around parenting and family strengthening systems, SBCC materials, alternative tool kit and review the progress of the programme, skill-based trainings and revision of content wherever required.
- Empowering child protection functionaries delivering alternative care services to children in institutional care and their parents.
- Assist CPF to create database of prioritized children, explore conditions to thrive in the family (SIR and ICP based), initiate contact and assessment with families, prepare children and families, reintegration, and post reintegration follow-up thereby establishing replicable and scalable model for deinstitutionalization through onsite support supervision.
- Building consensus and commitment among stakeholders to promote alternative care and synergy with social protection platforms in the district level.
- Establish effective monitoring and evaluation system through resource group to review and create resources and to review progress of the intervention.

### **Key Outputs:**

- Data from 37 government CCIs and Key 147 Grant-in-Aid CCIs with 1419 children and 8961 children respectively were collected. Based on the number of children in CCIs and the observations made during Support Supervision visits (on the potential opportunities exists at the district level to promote family-based care), 15 priority districts were identified for intensive implementation of the Alternative Care programme. The rest of the 23 districts will also facilitate the alternative care programme in the best possible ways.
- The revised State Action titled 'Building an Alternative Care System to Promote Family-Based Care in Tamil Nadu' has been developed and shared with the district level teams.
- The district specific action plan for 2023 indicating the number of children reintegrated with biological parents and placed in foster care, opportunities to promote family-based care at the district level, expanding the scope of alternative care to private CCIs were developed. Thereby, 38 district specific alternative care road maps with milestones were in place.
- The specific roles and responsibilities of a DCPO, PO (NIC), PO (IC), and social workers in Building Alternative Care System at the district level were developed.
- 6 online orientation sessions and 5 residential 3 days training were conducted for child protection functionaries attached to 38 DPCUs were conducted on basic counselling skills and facilitation skills and steps and processes in alternative care and reintegration.

- A total of 97 support supervision visits were carried out from the month of August 2022 to December 2022 to 19 districts and 37 case workers and 36 case managers were equipped with the skills required to implement the alternative care programme activities.
- 608 children were deinstitutionalized in 17 districts, 17 children are ready to be re integrated and 158 prospective foster care parents identified in 24 districts.
- 51 families were assessed for the feasibility of reintegration and post placement follow conducted for 8 children who were placed in families in 2021.
- Wellbeing of 12 children reintegrated into their biological family by SIAAP in the year 2020.
- 2 SOPs covering 16 SBCC topics developed and shared with district teams.
- A Management Information System (MIS) was established to monitor the progress of the alternative care activities at the district level. This allowed to analyse the trends and document strengths, challenges and gaps and critical learning to adopt improvements and modifications to the intervention process.

## **Project 9: Promoting Inclusion and Welfare of LGBTIQ Communities**

**Donor:** Astrea & AJWS

**About The Project:** The project aims to strengthen and empower members of the LGBTQIA+ community. This includes facilitation of support groups for social workers and community leaders with the participation of LGBTQIA+ community members and women in sex work, activities to create awareness, prevent discrimination, and promote understanding, sensitize legal and media persons, healthcare and mental health professionals, facilitate communities to come together and work toward inclusive policies, raise visibility through initiatives like the LGBTQIA+ Pride, film festivals, cultural events, etc, to address issues within the subgroups of LGBTQIA+ community, and to provide community support, as well as intervene in crisis situations faced by the LGBTQIA+ community members. Additionally, relief work for the affected LGBTQIA+ community members during coronavirus lockdowns in 2020 and 2021 and Chennai floods 2023 were undertaken as part of this project.

### **Key Activities:**

- Relief work by distributing food, dry rations, essential home needs, medicine, hygiene products, etc., for over 50 community members affected by COVID lockdowns.
- Facilitating eligible transgender women avail the government schemes for corona relief.
- Peer counseling and psychosocial support for affected community members as per their needs.
- Continued support group meetings over a year for about a dozen social workers and community leaders, including those from diverse members of the LGBTQIA+ community as well as some women in sex work facilitated by a professional psychodramatist and expressive arts therapist.
- Online sessions with legal professionals, social workers, mental health practitioners, etc.
- Regular programs with (LSA, Tirupur, to sensitize legal practitioners about LGBTIQ. Continued engagement with DLSA, Chennai to promote the welfare of LGBTIQ community.
- More than dozen sessions for about a dozen community workers facilitated by a professional therapist to address stress and prevent burnout.
- Gender and Sexuality Awareness programs conducted regularly every year with dozens of colleges in tier-two cities like Trichy and Coimbatore, in addition to those in Chennai.
- Colleges reached include various departments of Bharathiar University, Coimbatore, including social work, sociology, and economics, Coimbatore Law College, CMS college, Coimbatore, Vinayaka Mission Medical College, Salem, Bharathidasan University, Trichy, University of Madras, Madras Christian College, Loyola College, Saveetha School of Law, Chennai, etc.
- Capacity building workshops for the LGBTIQ community: training on speaking with media, leadership skills, addressing issues between subgroups within the community, etc.
- State-level consultations for the transmaculine community.
- A two-day in-depth workshop on understanding LGBTIQ organized in collaboration with the Department of Physiology, Dhanalakshmi Medical College and Hospital, Perambalur.
- Helped organize Chennai Rainbow Self-Respect Pride Marches every year since its inception in 2009 and the Rainbow Self-Respect Pride Marches in Coimbatore in 2022 and 2023 About half a dozen programs to sensitize children and adolescents about transgender.
- The support provided to community members during the crisis of coronavirus lockdowns have helped them survive the most challenging period and given them hope to look for opportunities as the lockdown restrictions were being relaxed.
- Several students interned and continue to volunteer with us. For example, a former intern helped organize a 6-day online program for social workers which was very well received by the participants.
- Greater inclusion of and increased visibility of transmen, which also resulted in formal inclusion of transmen in the Tamil Nadu government transgender welfare board.
- We had limited success with online sessions for legal professionals, but we were later able to get the participants to come for physical meetings when it was safe to organize them.
- Developed customized modules for students of different disciplines like medicine, psychology, social

work, sociology, etc

- **Institutional Outreach:** The organization successfully conducted numerous gender and sexuality sensitization programs across various institutions, including educational institutions, government bodies, professional groups, other social welfare organizations, and community organizations. This has significantly contributed to raising awareness about LGBTQIA+ issues and promoting inclusivity.
- **Legal Sensitization:** We have sensitized legal professionals and students to promote the legal rights and protections of the LGBTQ+ community.
- **Community Support:** We have provided essential support services to community members, including legal assistance, mental health counseling, and information on livelihood options.
- **Coimbatore Pride (4 June) and related events:** We successfully organized Pride and related events (like cycle rally) with the support of local community groups and allies. Our team members actively participated in the event, providing support to community members, raising visibility of the community, and contributing to the overall success.
- **Chennai Pride (25 June) and related events:** We coordinated with local community groups and allies to organize Pride and related events. Our team members actively participated in the events, providing support to community members from various districts, raising visibility of the community, and contributing to the overall success. We took the initiative to organize the Press Meet.
- **Leadership Trainings:** Multiple leadership training programs were conducted in various locations, empowering community members to become effective leaders and advocates.
- **Workshops and Consultations:** Workshops on gender and sexuality were organized to raise awareness and provide support to community members. Consultations were held to address specific issues faced by the queer community, including crimes against community and livelihood options.
- **Gender and Sexuality for Media Persons:** Workshops were conducted to educate media professionals about gender and sexuality issues, promoting accurate and sensitive reporting, as well as creating meaningful narratives about the community through stories, poetry, etc. We have also developed specialized modules for such sensitization programs.

## **Project 10: Promoting Right to Sexual Consent, Acceptance of LGBTQ people, and Access to sexuality education, and SRHR and Mental health facilities and services for young people in low income urban settings.**

**Donor:** Amplify Change

**About the Project:** The overall objectives of this project is to Promote Right to Sexual Consent as part of SRHR policies/programmes for young people; Acceptance of LGBTQI persons; and Knowledge/utilization of quality facilities/services for SRHR and Mental health by young people. This project attempting to address the issues such as Non-consensual sex and related SRHR and MH problems, Stigma/discrimination of LGBTQI people; Absenteeism from schools by adolescent girls, and Low utilization of services despite symptoms among 1500 children and adolescents in Perumbakkam and Ernavur in Chennai. This project would lead to reduced sexual violence, acceptance of LGBTQI people, high use of SRHR and mental health services; and low school absenteeism by young women, especially during menstruation. SIAAP Action Programme will collaborate with the Directorate of Social Defence to protect the rights and aspirations of children and adolescents in Perumbakkam to transition into successful and responsible adulthood. With the support of DSD, SIAAP is coordinating the responses of multiple stakeholders (child protection, health, education, habitat development, law enforcement etc) to the complex and multifaceted problems of children and adolescents.

### **Key Activities:**

- Printing 100 materials for advocacy meetings for meetings with policy makers to promote sexual consent into Adolescent Education Program.
- Print 5000 pamphlets to Disseminate information on Crisis intervention team.
- Print 1500 IEC materials on Puberty, Menstruation, Sexual Consent, Pregnancy and contraception, Safe abortions, RTI/STI/HIV, SRH Rights, Communicating around SRH with partners/ parents/ peers, mental health, and safety and pleasure in romantic/ sexual relationships.
- National laws and policies on sexual consent mapped.
- Meeting with 10 stakeholders including UN organizations for acceptance of introducing sexual consent into AEP.
- 2 meetings with 10 policy makers for acceptance of integrating sexual consent into AEP.
- Revised AEP with topic on sexual consent implemented in 5 schools in Chennai.
- IEC Materials to educate/sensitize adolescents and their parents Potential partner agencies to improve SRHR services/ information and products identified IEC materials to sensitize service providers on delivering rights respecting, nonjudgmental, nondiscriminatory SRH services developed.
- 1500 adolescents and 600 parents have knowledge and favourable attitude towards Puberty, Menstruation, Sexual Consent, Pregnancy and contraception, Safe abortions, RTI/STI/HIV, SRH Rights, Communicating around SRH with partners/ parents/ peers, mental health, and safety and pleasure in romantic/ sexual relationships.
- 30 service providers sensitized and have understanding and deliver rights respecting, non judgmental, nondiscriminatory SRH services.
- 130 adolescents will be accompanied to receive SRH/ MH services and products
- 60 adolescents and their parents counselled on SRH/MH issues.
- SOP and reporting format for crisis intervention developed
- At least 20 abuse/violations related to SRHR handled by Crisis Intervention Team

## **Project 11: Strengthening Urban Child Protection System**

**Donor:** UNICEF

**About The Project:** In our work in the resettlement colony of Perumbakkam, Chennai, for over 22 months from March 2021 to January 2023 we have attempted to improve the overall wellbeing of the 500 children including mental health, sexual health, nutrition, education through skill building, sensitizing and networking service providers, training parents and community counselors on adolescent behavior and delivering psychosocial services and linkages with existing resources. These interventions have been curated based on the based on the field realities and needs. Between March 2023 and December 2024, South India AIDS Action Programme collaborated with the Directorate of Social Defence to protect the rights and aspirations of children and adolescents in Perumbakkam to transition into successful and responsible adulthood. With the support of DSD, SIAAP coordinated the responses of multiple stakeholders (child protection, health, education, habitat development, law enforcement etc) to the complex and multifaceted problems of children and adolescents.

### **Key Activities:**

- Establish multi-stakeholder platform to coordinate responses of stakeholders.
- Building resilience of children through building capacities on safety and security, child marriage, teenage pregnancy, life skills, nutrition, gender, mental health, sexual health, reproductive health, and education and accompanied referral to access services.
- Training 200 parents on the concept of 'parenting adolescents.
- Strengthening community counseling centers for children and adolescents, their parents and other community members.
- Establish community collectives & platform to foster alliance between communities & policy makers.
- 200 children and adolescents undergo capacity building sessions in 5 thematic areas.
- 7 quarterly stakeholders' meetings conducted.
- 50 children and adolescents accessed services.
- 200 parents undergo parenting skill training on 3 thematic areas.
- Feedback 200 parents collected and collated.
- 50 children and their parents provided counselling services.
- 37 children trained as part of the Ilam Mottukal initiative.
- 42 advisory committee meetings conducted with adolescents and parents.
- Police patrol initiated to ensure safety and promote mobility of adolescent girls
- Supply of water once in two days ensured
- Sports field established and 60 children are attending sports sessions

## **Project 12: Building family based alternative care for children in institutional care. Strengthening Alternative Care System to Promote Family-Based Care in Tamil Nadu and Kerala**

**Donor:** UNICEF

**About the Project:** In the year of 2022, the Department of Social Defence envisaged to expand and establish the system of transition from childcare institutions to family-based care in 15 high priority districts in the state. In September 2022, the Director of Social Defence and other officials of Tamil Nadu participated in the 'National Workshop on Deinstitutionalisation and Family Based Alternative Care' held at Thiruvananthapuram, Kerala. Based on the experiences and learning from the best practices of other states that participated in the workshop,

- the revised State Action Plan to promote family-based care has been developed,
- 15 high priority districts (Chennai, Chengalpet, Kanchipuram, Ranipet, Cuddalore, Coimbatore, Salem, Trichy, Mayiladuthurai, Sivagangai Dindigul, Madurai, Thoothukudi, Tirunelveli and Kanyakumari) were identified for intensive implementation family-based care programme in 2023,
- district action plans have been developed by the 15 high priority district teams with targets and timeframe to promote accountability and ownership.

Between March 2023 and December 2024, the South India AIDS Action Programme will work closely with Integrated Training Centre for Social Empowerment to support Department of Social Defence in effective implementation of family based-care programme at the district level and suggest recommendations on state specific policies around family-based care.

### **Key Activities:**

- Establish think tank group/task force with representatives from government departments and domain experts to provide online and offline support and consolidate the family-based care model.
- Assist Child Protection Functionaries (CPF) in implementation of non-institutional care programme through capacity building trainings and onsite support supervision in Kerala and Tamil Nadu.
- Conduct high level thematic consultations to recommend policy guidelines on family-based care.
- Design and create a newsletter on Child Protection System of Tamil Nadu and share it with stakeholders at state and national level.
- 12 support supervision carried out in 15 high priority districts.
- 14 child protection functionaries responsible for promoting family-based care supported.
- 1 thematic workshop organised to develop SOPs for foster care and sponsorship.
- 1 newsletter developed.
- Over 800 children are placed in family-based care across the state.
- 1 training session with 30 child protection functionaries conducted in Kerala.
- 1 review of district action plans conducted with 39 DCPU staff members
- Revised 5 year state action developed
- SOPs for foster care and reintegration with biological families developed
- 2 short films launched Honorable Minister and Secretary of Department of Social Welfare

### **Project 13: Promoting Inclusion and Welfare of LGBTIQ Communities**

**Donor:** Astrea & AJWS

**About The Project:** The project aims to strengthen and empower members of the LGBTQIA+ community. This includes facilitation of support groups for social workers and community leaders with the participation of LGBTQIA+ community members and women in sex work, activities to create awareness, prevent discrimination, and promote understanding, sensitize legal and media persons, healthcare and mental health professionals, facilitate communities to come together and work toward inclusive policies, raise visibility through initiatives like the LGBTQIA+ Pride, film festivals, cultural events, etc, to address issues within the subgroups of LGBTQIA+ community, and to provide community support, as well as intervene in crisis situations faced by the LGBTQIA+ community members. Additionally, relief work for the affected LGBTQIA+ community members during coronavirus lockdowns in 2020 and 2021 and Chennai floods 2023 were undertaken as part of this project.

#### **Key Activities:**

- Relief work for community members affected by 2023 Chennai floods - target about 200 community members - one time work.
- Sensitization programs for media persons (about 3 events yearly)
- Programs for intercommunity dialog (about 2 events yearly)
- Trainings for community leaders (about 2 programs yearly)
- Queer Film or Art Festival (in Chennai and in Coimbatore every year)
- Pride Events in Chennai and Coimbatore every year
- Sensitization programs in colleges, universities and other institutions (average of 2 per month)
- Crisis and Community Support (based on need and situation)

### **Project 14: COVID-19 Response Mechanism**

**Period:** May 2023 to November 2024

**Donor:** SANGRAM (GFATM)

**About The Project:** The project aims to reach nearly 1600 FSW in accessing Identity cards and Bank account services with through 80 Community Facilitators (CF). SIA and train them in facilitating the application for ID cards, bank accounts and various centrally and state sponsored social protection schemes. The trained CFs reached out to the target beneficiaries based on their needs and assist them to apply for and obtain ID cards, bank accounts and for social protection schemes based on the community needs. South India AIDS Action Programme (SIAAP) was selected by SANGRAM as Sub-Sub-Recipients (SSR) to implement the C19RM project in 5 districts of Tamil Nadu namely Tiruvannamalai, Theni, Kanyakumari, Tirunelveli, Madurai by selecting and training 80 Community Facilitators.

#### **Key Activities:**

- 52 Community Facilitators be trained.
- 2863 ID card services delivered.
- 321 Bank/post office account opening services delivered.
- 1313 schemes linkage services delivered.

## **Project 15: Assessment and Review of Consent of Adult Women held under Trafficking Laws in Government Protective and Vigilance Homes in Tamil Nadu**

### **About The Project:**

Sex work in India is wrongly perceived as illegal, even though the law only criminalizes trafficking and/or exploitation of individuals for sexual purposes. Thus, raids by the police and the (wrongful) detention of female sex workers (FSWs) in protective homes are common phenomena across the country. The Supreme Court of India issued a directive in May 2022 to respect the rights of adults to practice sex work voluntarily. As part of its directives, the SCI has asked State governments to “do a survey of all ITPA (Immoral Trafficking Prevention Act) protective homes so that cases of adult women, who are detained against their will can be reviewed and processed for release in a time-bound manner” (SCI, CrI. Appeal No. 135/2010).

To promote this order, SIAAP (South India AIDS Action Programme), conducted two surveys (August 2022 and May 2023), of all government run ITPA protection homes in Tamil Nadu state, in collaboration with the Department of Children Welfare and Special Services (DCWSS). The findings show that regular monitoring with government can promote the Supreme Court’s initiative to protect the rights of sex workers. Going forward, we proposed to conduct a set of four (4) additional surveys in five Protection Homes across Tamil Nadu between October 2023 and September 2024, in collaboration with the DCWSS.

### **Key Activities:**

- Assess consent of adult women detained in ITPA Protection Homes in Tamil Nadu as per SCI directives.
- Facilitate early release of women held without their consent, and who wish to leave in collaboration with DCWSS and DLSA.
- Sensitize National/State Human Rights Commissions, and the National/State Commissions for Women to the issue of illegal detentions of sex workers.
- Sensitize FSWs detained in Protection Homes about their rights as per the Supreme Court directives.
- Trend analysis report on detention of adult women under ITPA developed.
- Stronger commitment and capacity of government agencies (DCWSS, DLSA, NHRC/SHRC, NCW/SCW) to uphold sex worker rights ensured.
- Strategic plan for sensitization of law enforcement agencies developed.



இன்று (12.02.2024) தலைமைச் செயலகத்தில், மாண்புமிகு சமூக நலன் - மகளிர் உரிமைத் துறை அமைச்சர் திருமதி. பி. சீதா ஜீவன் அவர்கள், சமூக நலன் மற்றும் மகளிர் உரிமைத்துறையின் கீழ் இயங்கும் சமூகப் பாதுகாப்புத்துறை, யூனிசெப் (UNICEF) மற்றும் சியாப் (SIAP) அமைப்பும் இணைந்து குழந்தைகள் பெற்றோருடன் ஒரு குடும்பமாக வளர்வதன் முக்கியத்துவத்தை பற்றியும், வளர்ப்புப் பராமரிப்பு சேவையைப் பற்றியும் விழிப்புணர்வை ஏற்படுத்தி, தமிழ்நாட்டில் உள்ள அனைத்து குழந்தைகளும் குடும்ப அமைப்பில் வளர்வதை உறுதிப்படுத்த உருவாக்கப்பட்டுள்ள "விதை" மற்றும் "நிழல்" ஆகிய இரு குறும்படங்களை வெளியிட்டார். இந்நிகழ்வில் சமூக நலன் மற்றும் மகளிர் உரிமைத்துறை அரசுச் செயலாளர் திருமதி ஜெயபுர் முளிதான், இ.ஆ.ட., சமூக நலன் மற்றும் மகளிர் உரிமைத்துறை கூடுதல் செயலாளர் திருமதி இரா.சீதாவட்சுமி, இ.ஆ.ட., இணை இயக்குநர் திரு.தளசேகர பான்டியன் மற்றும் சியாப் நிறுவனத்தின் நிர்வாக இயக்குநர் முனைவர் சியாமளா நடராஜ், திட்ட இயக்குநர் முனைவர் கே.கவாமிநாதன் ஆகியோர் கலந்து கொண்டனர்.



World

Child's Day celebration, adolescent girl trained by SIAAP shared stage with dignitaries



IEC Materials Prepared by SIAAP launched by the Chengalpattu District Collector



Adolescent girls trained by SIAAP won first prize in 100 meter race conducted Greater Chennai Corporation



SIAAP

in collaboration with National Health Mission and District Mental Health Programme established community based psychitrac and psychological service center in AIR Nagar Ernavur and Perumbakkam.



Sports field established and football conducted for adolescent at Perumbakkam



Training on family based alternative care for Protection Officers of District Child Protection Unit



Amplify Change Donor representative, Ms. Hannah, interaction with adolescent girls and boys, their parents and SIAAP associates



HPV vaccination for adolescent girls and screening of cervical and breast cancer for their mothers



Vadamalar Federation board election meeting held at Madurai