



VASAVYA MAHILA MANDALI, Andhra Pradesh

Agreement number: 11/IEC – MS/08

HIV/AIDS Stigma and Discrimination Reduction Programme

Reporting Period: 1st February 2009 to 31st January 2010

Cover Page:

Mr. Chandra Mouli I.A.S, Director General of National AIDS Control Organisation interacting with a child living with HIV at Vasavya Mahila Mandali, Vijayawada on 8th February 2010. Others seen in the photograph are (left) Mr. R.V. Chandravadan I.A.S, Project Director, Andhra Pradesh State AIDS Control Society, Mrs. Chennupati Vidya Former Member of Indian Parliament and President Vasavya Mahila Mandali (VMM), Dr.P. Deeksha Medical Director VMM, (right) Dr. TVSN Sastry Additional District Medical and Health Officer Krishna District, B. Keerthi Technical Support Manager VMM and Dr.G. Samaram National President Indian Medical Association.

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HIV/AIDS Stigma and Discrimination Reduction programme through Child Centric Community Driven Approach for 12,000 people in three AP urban/rural areas

Introduction

Vasavya Mahila Mandali (VMM), is established in 1969 by Gandhians and social reformers with a vision to promote comprehensive social, economic and political development for women and children in vulnerable situations, thereby empowering communities in Andhra Pradesh to improve their quality of life and to build a better India.

VMM has been working with child centric approach since 1999 in HIV/AIDS prevention, care, and treatment with a network of 61 Implementing Partners, reached to about 18000 children affected by HIV/AIDS. VMM promoted Children Leadership and Development Association, OVC network, and the sustainable reduction of stigma and discrimination in target communities by increased welcoming of house visits, no discrimination in schools and playgrounds and inclusion of HIV positive children in get together.

VMM as lead organisation the programme was initiated with designing, grants recipient, forward grant to implementing partners and provided technical support and did monitoring and evaluation.

Implementation of the project is by VMM (Krishna district), AIRTDS (Guntur district) and RAKSHANA (Prakasam district) in Andhra Pradesh.

Objectives:

- To reduce stigma in educational institutions, communities, families by sensitizing about HIV transmission
- To create an enabling environment by formation of children support groups
- To build the capacities of OVC network to improve quality of life of their peers by reduced stigma

Situation of HIV related stigma and discrimination

Issues:

Stigma among children leading to trauma, school dropouts, child labour and increased risk behaviour - thereby putting others at risk of transmission. Discrimination against HIV positive children is more visible.

At schools

Teachers have varying degrees make the children sit separately in class; avoid touching the child; Prevent children from attending school; keep separate plates in mid day meal Parents of the children from HIV non-affected families do not accept CLHA to be in the school. Classmates not sitting by these children, not playing, not sharing meals, harassing them, labeling them as AIDS child.

In community

Do not allow to play with peers, not to fetch water, no invitation for social get together Non-acceptance in employment.

In family

When the HIV positive parents are alive child is kept at a distance from parents, neighbours neither allow their children to talk to AIDS affected children nor do house visit After the death of the parents, child placed with extended families and is discriminated by disallowing to sit besides other family members, no sharing of food vessels/toilets/bed and separation of siblings due to HIV positive status.

At individual level

Self-stigma make child to withdraw from school/social get together/worship places, isolation. Some children become trouble-shooters as they expect attention of community/teacher/family.

Response:VMM provides psychosocial support as part of a comprehensive set of services, including medical, education, and nutrition support. VMM reached 9,703 People Living with HIV, 15538 children affected by HIV in 5,892 households. 37% of children affected by AIDS are orphans, 36% have single parent.

Children's network and support groups are promoted in school/community with children to sensitize through cultural teams, play way methods and group meetings with communities and schools regarding stigma and discrimination for children.

VMM's are the first models which put positive children themselves at the center of the advocacy, awareness raising, child support systems and child care guides. This model is appropriate to make the children's community to own and sustain to improve the quality of life of children affected by HIV in a high prevalence state of Andhra Pradesh as per National AIDS Control Programme III in India.

VMM has initiated Stigma and Discrimination reduction programme in certain communities in three districts on AP from February 2009. The programme initiated number of strategic interventions for reducing the stigma and to improve the quality of life of the children affected by AIDS and children living with HIV.

VMM has facilitated for formation of a orphan and vulnerable children network titled "Children Leadership and Development Association (CLDA)" keeping in view of VMM's experience in child - to - child approach, an effective strategy for community sensitization and mobilization, VMM has kept CLDA at the forefront of programme planning, monitoring and review.

Operational area

The project is implemented in three coastal districts Krishna, Guntur and Prakasam in Andhra Pradesh. The project was implemented in 23 urban slums and seven villages with coverage of 340,512 urban population and 84,344 rural population.

The project is supported by National AIDS Control Organisation (NACO) and UNDP.

Objective-I : To reduce stigma in educational institutions, communities, families by sensitizing about HIV transmission

Sensitization Programme through cultural shows

Participatory cultural shows were organised in the communities, institutions and families for sensitization to reduce stigma. Three implementing partner NGOs of VMM formed nine cultural teams and exhibited 77 cultural shows in ten urban and 63 rural communities; three in schools, 20 for families by reaching to 22039 adults, youth and children. Children were committed by sparing their time for a social cause during their vacations.

Murals by children on stigma related to children-issues

School Support group members developed 76 Murals in urban and rural communities and were able to sensitise 21009.

The Community People were sensitized through observation of the Murals. 80 per cent of support group members from affected families and children have great passion to develop murals to reduce stigma among the community. Children had training on designing murals and Children developed 76 different Murals on stigma & discrimination, modes of HIV transmission, impact of the stigma- discrimination. Children painted murals on churches, factories, corporations, schools, libraries, post offices and residences, Panchayat offices, community halls and street junctions.

80 per cent of the Community People got awareness on basic of HIV/AIDS and Stigma & Discrimination through observation of Schools teachers, House owners, Anganwadi Teachers, NGO Staff, Support Group members, local Doctors. Corporators, Sarpanches and village officers. Mural is locally accepted cost effective tool to create awareness among the community.

Knowledge sharing to the unreached communities

Children Support Group members have adopted four remote villages and sensitised 14667 community people on HIV/AIDS and Stigma & Discrimination through 7348 one to one and one to group sessions, Participatory community theatre shows, four Rallies and 129 Mobile exhibitions.

Venkamma, an illiterate middle aged rural women going by walk to the fields with her peers in a village of Tenali, has made a pause and looked at the pictures on the walls has influenced her to initiate a discussion at agricultural workplace about HIV related discrimination. That has led to the ventilation of the feelings by one of her coworkers in farming, sharing that she is living with HIV and sent out of the house with her daughter by her in laws after the death of her husband due to AIDS. Murals have aroused the feelings of illiterate populations as a powerful tool for knowledge building.



Murals in Vodarevu Village, Prakasam District



Children Creating Awareness by Rally and Oath in Adapting a Village Programme in Vellaturu Village, Krishna District

ACCEPTANCE BY CO-FISHERMEN



Babelu (35) and Bangaramma (30) hails from fishermen community are living with HIV at Krupanagar village, Vodarevu, Chirala Mandal. Their marriage was held in 2000. He was going for fishing on his own boat. He earns INR 2000 per day from sale of fish. The family lead happy life with three children Maha Lakshmi (13), Danalakshmi (12) and Manga (7). Babelu had fever for few days, when Blood test was conducted at VCTC in Government Hospital the report has revealed him as HIV Positive. Immediately his wife also underwent HIV test and was HIV positive.

When the report came Bangaramma was pregnant. The exposed child was also tested and found positive in the second year. After knowing that Babelu and Bangaramma are living with HIV, their relatives started keeping them at distance. When Babelu goes for fishing, the co-workers discriminated in the boat by keeping separate glass, plate and make him to sit separately. Babelu was disturbed at co-workers attitude towards him.

Rakshana staff has formed Support Groups in the village with elders and children and organized Awareness meetings every month on HIV/AIDS. Gradually those who have earlier shown discrimination towards Babelu family members realized their mistake and changed their attitude towards family and now taking lunch along with them. Babelu felt very happy to share this news. In this way through Awareness we could change the attitude of elders towards PLHA and resulted in reducing in discrimination to some extent.

CAN SOLVE PROBLEMS COLLECTIVELY

Master Devalla Koteswara Rao, 11 living with HIV/AIDS, studying 4th class in RCM School, Ranigaritota, Vijayawada staying with his grand parents Koteswar Raju (69) and Dhana Lakshmi (62).

His father worked as lorry driver and his mother worked as daily labour. Both got marriage of their choice and taking care of him very well. Gradually his father habituated to vices by his friends and died, by infected from his father, her mother also died. He has four uncles but they are unable to taking care of him caused by their financial problems in leading the lives.

At present both grand parents are unable to do the work as they attained old age. One day the child's aunties were known that both of his parents are died with HIV/AIDS. From that day onwards, his family members are discriminating him, therefore he felt miserable. While he is playing with his friends, one of his friends informed to other friends that his both parents died of dangerous disease. Thereby if we play with him, we could get the disease from him. By hearing those words he felt sad and not used to play with any one of his friends.

Ajay, child care guide from Vasavya Mahila Mandali went to Ranigarithota and created awareness to the children on HIV/AIDS. Then he initiated a children support group with those children. Koteswara Rao is also one of the members in that group. During the group meetings, Ajay informed to the children that we can solve any problems with collectively. All his friends are talking and playing with the child now. Also he initiated one adult support group in that area including with the child's grand parents and created awareness on HIV/AIDS among them. VMM is providing support to his family along with educational support for continuing his education. His grand parents are also taking care of him very well and the child is being very happy now.

SINCE THEN ALL THE CHILDREN ARE FRIENDLY

Kanaka Yesu Babu (9) living with HIV/AIDS is studying fourth class in National child Labour Elimination Programme (NCLP) School at T.R.Nagar, Vijayawada, Krishna district of AP. His mother Nagamani had fallen sick and two siblings' brother and sister are working as daily labourers and leading the family.

Both of his parents had disputes now and then. At that time, his father Srinu left the house for 2-3 days. He had extra marital relations with other women. Both of his parents became HIV positive. Extended family members came to know Srinu's health status and discriminated him. By this reason he addicted to alcoholic and died. His mother worked as daily labor and taking care of the children. As she was suffering with HIV, she could not do the work, therefore the child's brother Guru Swami aged 16 years and sister K.Thirapathamma, 15 years old started working for leading the family. By revealing his mother health status in the community, neighbours and family members are discriminated them especially his aunty has taking care of them. While he is studying 1st class, one of his friend Sai abused him i.e. "you and your mother are suffering with HIV/AIDS, so you don't come along with me by saying these words he hit him on stomach with leg". At that time he felt very sad and decided to die.

Ajay and Rasi, child care guides from Vasavya Mahila Mandali went to T.R.Nagar and conducted an awareness programme on HIV/AIDS among the community people and children. Then they have facilitated for initiation of children support group and explained the cause and consequences of HIV/AIDS with the children in that area. One day Yesu Babu shared to Ajay about how he faced discriminated from his friend in the school. Immediately VMM staff went to the school and initiated children support group with the school children and explained them about HIV/AIDS. Through creating the awareness among the children, since then all the children are friendly with him. Accordingly, the neighbours are also treating them friendly.

Objective II: Formation of the Support groups

Parents support Groups in schools

Seven Child Care Guides and three social workers facilitated thirty parents support groups with 486 parents and caregivers from urban and rural areas. About 30 per cent are male and 70 per cent are female members between 40- 60 years. The Child Care Guides and social workers introduced the Stigma and discrimination reduction programme and role of the parents in stigma reduction programme through one to one sessions and one to groups. Parents' group meetings are conducted monthly once in the late evening hours between 6.30 - 8.00 as per the convenience of communities, as most of them go for work in the day time. Regular attendance of parents/caregivers for support group meetings is a challenge as they have concern for many things at home like care of sick, cooking food and livelihood.

Children Support Groups

Formed 57 Children support groups in 19 Villages with 1052 Children among them 38 per cent are girls and 62 per cent boys. 40 per cent of children are from families affected by HIV/AIDS and 60 per cent are non-HIV affected families. Support group members aged group between 12-18 years. Child Care Guides capacitated the support group members counseling, communication skills and documentation skills and networking among them as an association under CLDA. Sometime parents do not allow their children to attend for support group meetings due to the work burden at home.

School support groups

Three partners NGOs formed 25 school support groups in 25 schools. 556 Children are in School Support Group. Among the 556 children 28 per cent are in urban areas and 72 per cent are in rural sites. 40 per cent of the children are from affected families and 60% of children are from non HIV families. Teachers from the respective schools also played a vital role in strengthening the groups.

Counseling and Backstopping Support for children

A Readmission of the dropouts

106 children (45 boys and 61 girls) were identified as drop outs from school due to stigma and care giving responsibilities at family. After a repeated counselling only nine children were back to school and getting education.

Counseling to Community, children and parents by Child Care Guides

Seven Child Care Guides have provided counseling to 6619 Community people, 4688 children and 5978 family members on the impact of the stigma discrimination and reduction of the stigma discrimination and role of the Community and the importance of schooling. As the child care guides hail from peer community they have maintained sensitivities during counselling.

Interaction with School Teachers by Child Care

Child Care Guide have given counseling to 82 school teachers on the stigma prevailing in the schools and also suggested them the ways to convince other children's parents by telling about how HIV will not transmit and also clarify their myths and misconceptions.

Community Core Groups

Twenty Community Core groups with a size of 10-15 were facilitated in urban and rural with 325 members that consist of 58 per cent of women and 42 per cent men of middle age. Community Core group members hailed from various walks of life like representatives from Local self government of Panchayat Raj institutions (PRIs), Health workers, Auxiliary midwives attached to Primary Health Centers, teachers of early child hood centers popularly known as *Anganwadis*, representatives from various faith based organisations, youth leaders, members of women self help groups, education volunteers (known as *Vidya volunteer*) and local influential people from political parties. Community Core group Members were conducted monthly once. With the meaningful participation of influential people in the community the message has reached in a positive way and has reduced stigma among communities and were able to refer the needy for appropriate

services with the facilitation of the child care guides. The challenge faced from this intervention is that due to the busy work schedules they could not maintain timings to attend for the meeting and also to come to consensus regarding meeting venue.

Capacity Building

Conducted Participatory Community Assessment at the initiation of the programme with community, families, school teachers, school students, children affected by AIDS. The issue of disclosure was prominently evident from the findings hence they could not ventilate their feelings of agony / trauma with neighbours. It is found that stigma is prevalent at some of the public places like water taps, public distribution fair price shops and not inviting for social gatherings. Hence the families affected by AIDS felt isolated. It is expressed by caregivers that they admit their children in schools not disclosing their HIV status but a feeling of insecurity was chasing them on one side and they aspire to give education for their children living with HIV. Family members and neighbours maintain physical distance with HI positives as they think that if they touch a HIV positive then HIV will be transmitted. As in day in and day out they face some face stigma which is both self and enacted and sometimes it is in the form of discrimination that is hurting them even to continue their life.

Media interface

Print and electronic media reporters had shown lot of interest in hearing to the human stories and also they have played a vital role for the dissemination of the positive stories. Media personnel has interacted thirteen times with Children Leadership and Development Association (CLDA) and described the participation of children in reducing the stigma as child care guides from the communities.

Recreational Activity

Involvement of Children Support Groups in recreational activities like games and fun to reduce trauma

As a part of psychosocial support games and fun are used. Recreational activities were organised 26 times for 1715 children among them 846 boys and 869 girls. Games, songs, elocution events have reduced the trauma of children and also as they talked of other issue other than HIV they had at ease.



FETCH WATER FROM COMMUNITY BORE WELL

Hepsiba (8) is living HIV and living in Vijaya Nagar colony of Chirala. The neighbouring families in the village do not allow Hepsiba to play with their children. Even her Uncle and aunty do not allow their children to play with Hepsiba and her mother felt very unhappy at the prevailing situation. NGO Staff has formed Children Group with children living with and or affected by HIV and vulnerable children. NGO has organized awareness meeting on HIV/AIDS every month. This resulted in gradual interaction between Hepsiba and other children. Hepsiba mother felt very much contented to see her daughter playing with other children in the community. Awareness

about HIV/AIDS has removed many myths in Community. Devamani, mother of Hepsiba felt very happy to share NGO staff that the community members are allowing to get water from common bore well which they are using. NGO facilitation has led to improved wellbeing of the communities with reduced stigma and discrimination.



Children in Support Group Meeting



Recreation to Children



Birthday Celebrations by WOCKHARDT, Pharmaceutical Company

ATTITUDE TOWARDS SIRISHA CHANGED AND TREATED HER EQUAL

Katta Sirisha (12) hailing from a Scheduled tribe community lives in Padmanabhunipet, Epuripalem mandal of Prakasam District. Sirisha was born to Bulli Babu and Vimala. Bulli Babu was engaged in meat-selling and maintains his family. Prior to marriage Bulli Babu became alcoholic. Even after marriage he continued to have multiple sexual partners in contradiction to the thought of his parents that Babu will quit his vices after marriage. His parents thought by his marriage he will relive from these bad habits. They performed his marriage with sister's daughter Vimala. She gave birth to Sirisha, a girl baby. After three years of birth of the baby, a local NGO has conducted medical camp in the village and facilitated HIV Tests. The test results revealed that all the three in family Bulli Babu, Vimala and Sirisha were living with HIV. The villagers come to know about the HIV status of Bulli Babu Family. As the disease was in advanced stage in 2005 Sirisha's mother died and father died in the consecutive year. Sirisha became an orphan at the age of eight.



Sirisha's grandparents have taken care of her. As Sirisha became HIV positive through vertical transmission from her mother but community members showing Stigma against her by disallowing their children to play with her. The Children in classroom also not sitting by the side of her. Sirisha was totally depressed with the discrimination shown in the communities on the other she faced lot of trauma by losing her loved parents.

During the out reach activity by VMM child-care guides reached to Sirisha and found that she is living with HIV and an orphan. As the Iqbal Children Support Group was formed in village Sirisha was included as a member in that group. NGO has organised a workshop for the members of children support group on modes of HIV transmission and clarified the myths among the group members. This has provided an opportunity to reduce their myths on HIV transmission normally that led to reduced discrimination. Since then children are involving Sirisha in combined studies and at play. Their attitude towards Sirisha was changed and they treat her equal to them.

Objective-III To build the capacities of OVC network to improve quality of life of their peers by reduced stigma

Training to support group members on cultural skills

Forty children are trained in cultural activities with equal participation of boys and girls. The script was locally developed by NGO team and children support group members. Hence they were able to capture the local issues while presenting the theatre shows at community level. Hence the community people were able to accept the issues which they see daily and that made them to think and reflect. Resources Persons have provided in puts on what is play, street play training for children, Problems identification, script moderation, Songs preparation, voice modulation and profile.

Capacity building to CLDA and Support group Members

For the effective programme delivery 170 staff and 159 support group members were capacitated during ToT on Community Sensitization - Community Mobilization, Support Group Strategy for Community ownership, Organizational development, Advocacy and lobbying. VMM has utilised the module developed on Children support groups during the capacity building events.

Advocacy meets with district officials

Advocacy meetings were organised with District Education Officer (DEO) and officers from Sarva Siksha Abhiyan that has paved the way for visibility of the issues of stigma and discrimination at schools and also the support required for creating an enabling environment at schools for increasing the retention rate of Children living with HIV. The sensitised DEO has provided additional study material to Children affected by AIDS.

Monitoring

The child care guides tracked the strengthening of support groups by attending to its meetings and mentoring them with regard to the strengthening. They had desk monitoring by verifying the registers and minutes of the meeting.

MARRIAGE WITH HIV POSITIVE YOUNG WIDOW

Keziya (17), agriculture labourer belongs to backward community and hails from Burlavaripalem village, Chirala mandal Prakasam district. Keziya got married to Venkateswarlu at the age of 12 years. Her parents do not know that Venkateswarlu had T.B. after one of the family member known that he is HIV Positive. Venkateswarlu was torturing her by beating severely and lighting cigarette on her body. As there was no change in his behaviour Keziya has taken divorce from him. Kezia became upset with the situation and mentally disturbed. Parents kept her in church assuming her get peace. She was working in the church spending her days. Mean while Ruben (handicapped) working in church developed liking towards her and proposed to marry her. Keziya after liking his behaviour accepted to marry him.



RAKSHANA has identified Keziya as HIV Positive. Keziya's parents who were staying in other village have come to Burlavaripalem village and refused for proposed marriage with Ruben. Ruben parents also threatened him that they will die if he marries HIV positive person. Both Ruben and Keziya approached RAKSHANA and shared their problem and requested for help Rakshana Staff visited both parents and given counseling about HIV/AIDS. Parents have refused for the marriage. Keziya was sent out of church.

Neighbours families in the village also reprimand them. This made the couple not to come out side from the house no body speaks to them or invite them to functions. Rakshana organized sensitisation meetings consecutively for couple of months in the village and brought awareness about HIV/AIDS among Villagers that resulted in reduced discrimination. Keziya and Ruben felt very happy to the change in attitude of neighbours towards them.

COLLECTIVE EFFORT FOR A HUMANE CAUSE



The humane act of Children Support Group is to be encouraged for a collective effort for a humane cause. A Children support group is formed with 20 children affected by HIV and vulnerable children from Burlavaripalem Village in Chirala, Prakasam district and named it after 'Mother Theresa' known for her charities. The monthly meetings paved the way for sharing and learning about the issues around HIV and AIDS as stigma, discrimination at community, diluted economic resources for families due to investment on health needs for HIV illness. The support groups have also taken up

the task of mobilising the resources from the communities to support the families in need. As a part of that activity, they approach the sensitised families those who can contribute and raise donations by way of kind as rice, linen and sometimes cash. The resource mobilisation is distributed to the needy families in communities. One such incident is: Ruhtamma (21) a women living with HIV has died leaving behind two children and husband and the family does not have resources for bereavement ceremony. Then the children's support group has went round the village and raised resources ten kilos of rice worth of INR 600 and INR 300 cash that was a boon for the family to conduct the ceremony in memory of the diseased Ruthamma.

NOW MY PEERS ARE AGAIN FRIENDLY WITH ME !!!!

K. Sangeetha Rao and his wife Hemalatha both are living with HIV. Sangeetha Rao died, as he was known his status at AIDS stage. Hemalatha died in 2008 leaving behind her three children and husband. Siluva Kumari (18) the eldest daughter in the family studying in a school observed that the neighbours are discriminating her and not allowing the children to play with her. Normally other children reprimand her and exhibit negative attitude towards her, which is quite visible in body language and facial expressions as her mother died of AIDS. In Burlavaripalem



the community members feel that HIV is a dangerous disease, one should not talk with persons living with HIV or from their families and maintain physical and mental distance. As a part of the out reach activity the Child Care Guides observed the discrimination being practiced in those communities and organised awareness meetings every month separately for children and adults. The meetings has given knowledge to communities on basics of HIV and reduced the myths of HIV transmission that has resulted in reduced stigma. So again now, the peers in the community are friendly with Siluva Kumari and her siblings and all the children in the community and school play without any discrimination.

Child Care Guides to check bias against HIV-affected

Vasavya Mahila Mandali has deliberately picked children from HIV-affected families for the project

P. Sujatha Varma

VIJAYAWADA: In their new role of 'agents of change', the youngsters are determined to bring about a positive transformation in people's mind-set.

"Initially, I was afraid to accept what I thought will be a daunting challenge. Today, when I look back, I feel happy to see that I have done my bit to prevent the AIDS monster from engulfing fresh victims in its dreaded stigma and discrimination fold," says 18-year-old Ch. Ajay Kumar.

Like many others of his age, Ajay Kumar is a Child Care Guide (CCG) working for a pilot project of the National

AIDS Control Organisation (NACO), which is being locally implemented by Vasavya Mahila Mandali (VMM) as lead partner in the region.

The project aims at reducing stigma against HIV-affected and infected children in educational institutions, families and community by kicking up a campaign on sensitising people about the actual modes of the virus transmission, create an enabling environment by forming children's support groups and take up capacity-building programmes to improve the victims' quality of life.

The VMM has deliberately picked children from HIV-affected families to take up the

role of 'child care guides', as they have a better understanding of the issues confronting them in the community.

"We speak to school managements, identify the affected children and form support groups to sensitise people around them. The idea is to make the community empathise with the children subjected to discrimination for no fault of theirs," says M. Swami, 17.

Twenty one-year-old Santosh Kumari shares an experience of how members of a child support group at Giripuram persuaded a reluctant priest of a church to let out a small portion of the building

for holding peer group activities.

"That is the change we find in them. Besides educating them on key issues related to their welfare, we also motivate them to take part in community activities," adds Swamy, explaining how the support groups organised rallies and collected rice for distribution among victims of flash floods in the city.

"Convincing people that our activities are aimed at serving a good cause is difficult.

But once they are convinced, it is easy to make them part of the endeavour," says Narasimha Rao, a social worker associated with the

project.

The project includes conduct of participatory cultural shows in community, encouraging children to draw murals on stigma-related issues, knowledge-sharing with those not in the know of things, participatory community assessment, constitution of community core groups for planning, monitoring and evaluation of the project and formation of parents support groups in schools.

The child care guides are working in Vijayawada, Tenali and Chirala bringing into the project fold thousands of HIV-infected and affected children in need of dire support.

విజయవాడ తూర్పు 4 సెక్షన్ 247

'హెచ్ఐవి నివారణకు కృషి అవసరం'

ఎడమ దాగినది

తూర్పు విజయవాడ తూర్పు 4 సెక్షన్ 247 లోని హెచ్ఐవి నివారణ కార్యక్రమం

హెచ్ఐవి నివారణ కార్యక్రమంలో పాల్గొన్నవారు

హెచ్ఐవి నివారణ కార్యక్రమంలో పాల్గొన్నవారు

హెచ్ఐవి నివారణ కార్యక్రమంలో పాల్గొన్నవారు

హెచ్ఐవి నివారణ కార్యక్రమంలో పాల్గొన్నవారు

TUESDAY, FEBRUARY 9, 2010

HINDU CITY

State has highest number of HIV cases: NACO

'However, its incidence is on the decline across the nation'

State has highest number of HIV cases: NACO

'However, its incidence is on the decline across the nation'

Children's Village set up by the VMM...

నిశ్చబ్దాన్ని ఛేదించారు

అనేక ఆరోగ్య సలహలు... ఇందులోని వివరాలను చూడండి.

- యర్రు సోమశంకరావు

కార్మిళ్ళు విదేశాలకు వెళ్ళడం

కార్మిళ్ళు విదేశాలకు వెళ్ళడం...

- రమేష్

వ్యాధి గురించిన తెలుసు

వ్యాధి గురించిన తెలుసు...

- శిశు, మలేశంకర్

సెలవులోకొద్ద వస్తుకాం

సెలవులోకొద్ద వస్తుకాం...

- సూర్యవంశీవర్తి, శ్రీకాంత్

వేయించుకోగల వేయించాం

వేయించుకోగల వేయించాం...

- బ్రాంబి

వీటెన్ని నుంచి తప్పుకోవాలి... వీటెన్ని నుంచి తప్పుకోవాలి...

వీటెన్ని నుంచి తప్పుకోవాలి... వీటెన్ని నుంచి తప్పుకోవాలి...

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