



Organizational profile:

Annual Report

Jaipur Rural Health And Development Trust is a registered organization under Rajasthan Public Charitable Act of 1950, concentrating towards community based organization, international NGOs, and Govt. agencies in the different part of social development such like SHG formation, health, sanitation, education, vocational trainings for communities of children, youth and women etc.

The mission of trust is to reach out to the adolescent youth at risk and to

highlight, healthier and protective communities of all the age people capable of

experiencing self-directed growth, positive leadership and disaster free environment

and the livelihood promotion models which combines financial education, health

care and vocational training.

The trust has been providing preventive primary

and secondary health and health services including MCH, RCH, and family

planning services to the underserved or underserved communities of Jaipur district of

Rajasthan through an experimental mode so as to develop confident individuals in

the community.

The trust was initiated in the year of 1983 as an innovative public

charitable trust to disseminate a model to address poverty alleviation through

self-help groups of educated unemployed youth at risk to establish and promoting

self-reliant vocational training opportunities and also to support the women

through formation of SHGs on the part of who was having no financial capital and

was dependent on health to make this community disease free and healthy

environment.

The trust has successfully implemented several health, family planning,

MCH, MCH, and health related projects with the help of many national and

international agencies like Norway in Embassy, NORAD, NABARD, CAPART,

UNICEF, UNODC, UNFPA, National commission for population etc, Govt. of

Rajasthan, Ministry of Health and Family Welfare, Jaipur.

Jaipur Rural Health And Development Trust

Jaipur



Organization profile:

Jaipur Rural Health And Development Trust is a registered organization under Rajasthan Public Charitable Act at no. 9-jp-85 demonstrating between community based organization, international NGO's, and Govt. agencies in the different part of social development issues like: SHG formation, health, sanitation, education, vocational trainings for communities of children, youth and women "at risk". The mission of trust is to reach out to the adolescent youths at risk and to build safer, healthier and productive communities of all the age people capable of supporting self-directed growth, positive citizenship and diseases free environment and the livelihood promotion module which combines formal education, health issues with vocational training, skill development training, preventive promotive and curative medical and health services including MCH, RCH, and family planning services to the underserved or unserved communities of jaipur district of Rajasthan through an experimental mode so as to develop confident individuals of the community.

The trust was initiated in the year of 1983, as an innovative public charitable trust to demonstrate a model to address poverty alleviation through livelihood needs of educated unemployed youth at risk to equitable and promising market oriented vocational training opportunities and also to support the women through formation of SHG's on the part of various income generation opportunities and awareness on health to make this community diseases free and healthy environment.

The trust has successfully implemented several health, family planning, RCH, MCH, and health related projects with the help of many national and international agencies like: Norwegian Embassy, NORAD, NABARD, CAPART, USAID, UNODC, UNDP, National commission for population etc., Govt. of India, Ministry of health and family planning, Ministry of social justice and



Empowerment, Social welfare department, Dept. of science and technology, Mahila Aayog etc.

The trust has rendered outstanding services to the poor and provided possible facilities by imparting people participation method. The trust has embarked to the rural women SHG for their better upliftment by providing social related services.

Core committees:

1. Shri. L.C Gupta - Chairman
2. Shri. Arvind Gotewala - Vice chairman
3. Shri. N.L.Kanoongo - Hony. Secretary
4. Shri. Ram Aytar Shah - Treasurer
5. Dr. R.S. Goyal - Member :
6. Shri. Dinesh Goyal - Member
7. Dr. Vivek Agarwal - Member

Activities Description:

1. 15 bedded de-addiction hospital:

Jaipur Rural Health and Development Trust is running a 15 bedded de-addiction hospital at Shastri Nagar, Jaipur. This is running with the assistance granted by Ministry of welfare and social justice Govt. of India and under the guidance of Social Justice & Empowerment Deptt., Govt. of India. This 15 bedded deaddiction hospital was established in 2001. Before that this centre was functioning as counseling centre in field of de-addiction and worked successfully for about 6 years. Looking at the very good performance of de-addiction counseling centre. Govt. of India converted it into a full-fledged 15-bedded hospital in 2001. This centre is pioneer in the field of de-addiction in Jaipur because of its quality services this centre is considered as a reputed name of management of addicted patients. The reputation of this centre can be ascertained



by the fact that in his centre, Patients are not only coming from Jaipur but also from other far off place like Delhi, Ajmer, Alwar, Jhunjhunu, Sikar etc.

This Hospital has a qualified team of Doctor and de-addiction specialist, Nurses, Compounder, Social worker, Counselor, Yoga therapist in the staff. All the personnel are adequately qualified, Competent, experienced and dedicated to handle all kind of patients coming for de-addiction and can handle all complications (if any), arising in these patients. All the necessary equipments and medicines needed for management of patient are available on the Hospital.

This hospital provides outdoor and Indoor services to the Patients suffering from every kind of addiction like alcohol, Bhang, Ganja, Smack, Opium etc. the hospital provide free of cost treatment, admission and medicine are provide free of charge.

This center provides comprehensive management of patients addicted to any substance beside medical treatment. The center also Provide adequate Counseling, Psychotherapy, Behavior therapy, family therapy, yoga therapy etc. patient are treated to lead a normal life in family and society. For untrained and jobless patients the center provides occupational therapy. Training of Gems stone cutting was given free of cost. Many former patients have adopted gems cutting as their fully time Profession after training from this center.

The center has integrated itself with the society. The social worker, counselor and physician of the hospital regularly contact people in community itself. People in community are educated and motivated to identify the patients. The patients so identified are motivated and counseled by our staff - personally one to one in community for de-addiction when they agree they are referred or brought to hospital for indoor/ outdoor treatment as required. HIV/ AIDS and addiction usually go hand in glove. This center also successfully completed a HIV counseling project for two year. During this period our staff educated people about HIV/AIDS, how it spreads and all preventive measures to be taken for it.



During the year (2008-2009) under review the following activities were specially undertaken to spread the message of drug free life and curbing the drug menace from our society. On days related to drug, HIV, health we organized street shows, puppet show, seminar to spread our messages. We regularly print, publishing and distribute pamphlets, short booklets, banner or matters related to drugs and their treatment. We establish liasioning with all other people and agencies working in the field of drug de-addiction / social work to provide social, occupational, legal assistance to out patients and those family members.

During the Year (1st April 2008 to 31st March 2009) a total of 186 new and 350 old patients got them self registered at the center. Out of new patients almost all patients took indoor treatment. The average age of new patients registered at the center is 34 years. During the year under review 0 female patients got registered for treatment.

Out of the first time registered 32 patients were opium dependent and 117 were alcohol dependent. The most common method of drug intake in first time-registered clients was Oral 97% followed by sniffing 2%.

The patients were referred to the center by social worker 62.4%, Self 7%, Family member 7.5%, Ex-clients or their family members 20.43%, of friend 2.6%. 156 out of 186 patients who got registered for first time in year were married, 28 patients were unmarried and 2 were widow/ widower.

Most of the patients were low educated. 19.35% were Illiterate, 17.74% were able to read or write and 36.55% were educated up to primary or middle level. 18.27% were higher secondary educated. Only 7.5% were educated up to graduation or more.

During the year under review 186 patients were treated on indoor basis. Out of 186 Patients, 44 were admitted for duration of 1-10 days, 76 for 11 to 20 days, 49 for 21 to 30 days and 22 for more then thirty days.



Every effort was made to keep the drop out rate as low as possible. During the year under review 49 patients drop out of treatment. The reasons for drop out were mainly Lack of family support 61% or poverty 21%.

Counseling has also been the integral part of treatment at our center. We provided individual and group counseling as well as family counseling.

During the period under review a total of 1741 counseling session were held. The average duration is 30 minutes. Out of above 800 were individual counseling session 536 were family counseling sessions and 420 were group session. During the year under review 41 patients were referred to other treatment.

Out of 186 patients treated on indoor basis there is no new about 8 patient. Out of remaining 178 patients, 124 patients remained sober and 12 relapsed again. Every effort is made to locate the patient in society and follow him up. During the year a total of 570 home visits were undertaken by our counselors and social worker. A total of 210 former patients could be contacted during these visits. Their patients and their family members were provided counseling and motivation.

2. Self Help Group Program:

Jaipur rural health & development trust has formed 100 no. of SHG's with the assistance of NABARD in 1999 - 2000. The objective of this program was to make the women who are at risk in the adolescent areas of the district to be empowered. The purpose for this activity was to make the women to be independent in case of financially through various income generation opportunities.

The target groups were village women who are under threat of finance but a long distance vision to be empowered women in the society. Where as it's common fact that villagers are poor and need money for every purposes. In this circumstance they go to local "Sahukars" for the money purposes on the basis of high interest rates that is a panic for the village dwellers. Eyeing on this, the trust



empowered women members in the villages through self - help group method. Under this program, the trust is operating in 5 blocks (Dudu, Phagi, Sanganer, Amer, Jhotwara) of jaipur district. In the following areas the field supervisors are being appointed to roam in their respective areas to create more no. of self - help groups and do the awareness about the income generation schemes.

To get more attention among the gram sahelis the trust organizes a common meeting in the respective blocks for every 3 months where all the gram sahelis were gathered and discuss their different problems, opportunities. In the meeting the trust distributes the medicines and transportation allowances to the gram sahelis. The concerned authority of the organization delivers various income generation opportunities schemes to get more strengthen themselves. All the following SHG's are linked with the local banks and got the loan. After getting the loan they distributed themselves and some of them do their enterprising activities like: Garment selling, Dairy, Sewing & stitching. The support of the trust in the field level is doing all the activities.

3. Indian Gurukul Public School, Champapura:

Education is not only filling of a vessel but kindling of a flame also. Education is the right for all categories of people. It is the biggest casualty in medieval India. In our country, child education is the big problem because of financial crunch of their families. Due to fill up with the poverty they send their children for the daily wages and forcing them to earn money to strive out of the financial crisis of families. Rajasthan is the state of India where in the interior villages of the state is still in the dark side of education paradigm due to lack of awareness, traditional force, poverty, lack of educational facilities. With the eyeing of the problem Jaipur rural health and development trust, a voluntary organization realized that the salvation lay in education masses. The trust constructed a building in the own huge space, which is suitable for the school. The



focused activity is child education. Trust laid down the school for the guidance of humanity, eradication of ignorance and illiteracy through the spread of education, brighter future. The school promises to students a better education, brighter future by providing them all the latest research & computer science facilities with nominal charges. The school aims at providing an environment, which is conducive for the overall development of a tiny tot into a balanced and cultured adult. The infrastructure is located on a prime location, which has easy approach routes and pollution free environment. The school is having a well equipped classes, computer lab, conference hall, library, playground to do the activities in discipline manner. The age group of the children is from 5 years to 12 years. To aware the community for education the trust appointed field supervisors who go to the field and talk with the communities regarding the importance of child education in the current scenario. The main objective of this activity is to provide them their fundamental rights. The supervisor covers the community regularly. To get more attention among the children the trust organizes weekend non-curricular activities where all the tiny blossoms take participation and shows their internal talents. The trust also provides a bus for the children to get easy transportation from their respective houses. For the far away community the trust provides residential facilities to the children with all the basic facilities. The emerging service of the trust draws a great attention among the communities.

4. Six - bedded OPD Center, Champapura:

In the premises of the champapura campus, the trust has initiated a six-bedded OPD center for the community in case of primary health purposes. This provides services for absolutely free of cost. The OPD center has experienced & qualified doctor, counselor who counsels & treatment the patients. The trust also provides accommodation facilities to the employees for providing services to the communities in case of emergency. The OPD is not only a medical center but also



an emergency shelter for the communities. Since the last 10 years all total of 90000 patients has been treated.

5. Rural Health care services through Gram Sahelis in 100 Villages:

Jaipur rural health and development trust is presently providing preventive, promotive and curative (minor ailments) in 100 villages of Jaipur Dist. One (female) Gram Sahelis was selected for 1000 population. Imparted intensive training and they are providing free services to rural poor masses in their own village nearest to their doorstep. They are providing family welfare services (motivation of eligible couples to adopt small family norm) they are distributing Nirodh and Oral pills, motivating for Copper 'T' insertion and sterilization operations. Pregnant mothers are looked after any they are given T.T. injection and Iron Folic Acid Tablets are given for Anemia. Motivates infants and children for complete immunization, death, birth and marriages are registered. Mamta Kits are distribution to be used during delivery. Emphasis is given of safe motherhood activities. They are also giving free Medical advise and Medicines are distributed free of cost to poor needy villagers. The program have treated about 60 Lac patients since inception.