Father Vicente Ferrer and Sister Anne Ferrer founded Rural Development Trust (RDT) in the year 1969 at Ananthapuram, which is a chronic drought – prone district in terms of lowest rain falling area in India. The RDT has extended its programmes and interventions to all 63 revenue mandals which helped the Poor, Backward, SC/ST and persons with disabilities (PWD) in this district. Now the trust has expanded its programmes to neighboring Kurnool district.

Anna Ferrer words about Establishment of RDT in Anantapuram

I was born and grown in London, our father is Industrialist, mother house wife. When I was student, I always thinking and working for the people who lost every thing in calamities. I am very much interested working in media/journalism after completion of 12th standard. I am very much influenced by reading books about India and finally came to India to do B.A. Journalism in Mumb in 1963 and I finished my studies in 1968, while studying I am working as a part-time reporter in English paper ‘Maharashtra Current’. I worked in major metropolitan cities like Mumbai, Kolkata focusing on poor people life that time I met ‘Vincent Ferrer’ while he is doing some social activities in Maharashtra. Some people rejected the activities of Ferrer and discar ded his Visa on that time the then Prime-minister Smt. Indira Gandhi called both of us and suggested to do activities expect Maharashtra, then the Chief-Minister of Andhra Pradesh Sri Brahmananda Reddy and other eminent suggested Mr. Vincent Ferrer to serve in Anantapur District. Then we both came here to start the work.

The RDT functions and its Implementations

The RDT trust has been co-operating the public from past 5 decades since 1969. Firstly the people are not trusted us, slowly they understand our aim and objective and themselves cooperated to us. Now the RDT has been inventing and implementing several programmes for the welfare of people of Ananthapuram district, some important programmes are implemented by the trust namely food-for-work programme in 1970-75 with funding from CASA (Wells/ nutrition centre/ leprosy centre, housing and began collaboration with EZE/ ICCO); started community health, community organization and land development programmes 1976-1978; initiated sponsorship programme with action aid and began education and cultural programmes 1978; launched women sector 1982; sponsorship programme Collaborated with Aide et Accion (AeA) in 1985; began Community based Rehabilitation (CBR) and Ecology Programmes 1987; constituted women’s core team; origin of CBR institutions in 1993; launched foundation Vicente Ferrer (FVF) in Spain 1995. With huge incoming funding they have launched several health programmes which upgraded Rural Hospitals in 2000-06; RDT school of Nursing in 2004; Care and Support Centre for HIV/ AIDS patients in 2006; setup base in Srisailam region to work with Chenchu Tribes in 2010; Launched Resource Mobilization centre in Mumbai; started shelter home for women and initiated hundis as part of India for India programme in 2012 and opened two orphanage centres for children with HIV/ AIDS and so on’.

RDT has sought to provide interventions by focusing on such critical aspects as education, women and community based rehabilitation, rural hospitals, ecology, community health and habitat and sports and cultural activities. Education for children and especially for girls belonging to poor communities in rural areas since its inception, which enhances their scope to get diversified job opportunities, bust also prevents their dropping out of schools due to social factors. Education for orphan children its aims to achieve gender equality and justice and facilitates women to not only improve socially and economically bust also to fight against gender based discrimination and violence.

The services which are being provided by RDT include counseling, police protection, legal guidance, educational assistance, health support, vocational skills and other services. Regarding a total of 2496 villages spread across 35 areas in 7 regions are covered under the community health sector headed by director Anne Ferrer. Transforming the semi-desert land into a land capable of sustaining its population and sensitizing people to live in harmony with natural resources contributing for sustainable livelihoods, ecological regeneration and environment developments is the main goal of the ecology sector.

The concept of India was conceived by Father Vicente Ferrer and Anne Ferrer when they reached Ananthapuram in 1968, but only materialized in 2012, when a group of rural poor in a few villages inspired by the services of the Ferrers and came forward to share something of their own to others through RDT. Since, they cannot pay lump-sum amounts they proposed maintaining the traditional system of saving coins in hundis which are generally used by them to keep part of their savings for the ditties of their choice. This concept of Hundis, with the catchy slogan ‘Spandinchu Sayam Andinchu’ (స్పండించు సయాము అండించు) (Let your hearts respond and hands help), stems out of this idea. It is named ‘India for India’ since an Indian in any part of the country can share something for another Indian who is in need.

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Where is RDT work?

RDT has its base in Ananthapuram, which is a chronic drought prone district in terms of lowest rainfall received in India, it expanded its programmes in 2010, it initiate its work with the Chenchu Tribes of the Nallamala Forest area which cuts across Andhra Pradesh and Telangana States. Ananthapuram district is a poorest revenue area, agriculture is the main occupation of this area people, the agriculture is mainly based on rain-fed farming which is a gamble in the monsoon. There is a dearth of irrigation facilities and this only a fraction of the land available in cultivated under irrigated conditions. There is also over dependence on groundnut, a mono crop grown under rain-fed conditions which often fails due to inconsistent rainfall and pestilence. As a result there is extreme poverty and suffering which is manifested in various forms viz., malnutrition, anemia, ill health, migration, dropouts of children and trafficking of women in some parts.

RDT Approach

The aspects on which RDT works significant impact on the communities for instance, recognizing that education and schooling can open up for the children from marginalized communities not only attend school but also stay in school and complete their schooling within a reasonable time. This has the added consequence of lowering the instances of child labor, which is highly prevalent in the region of our focus.

RDT observed that empowering women to be the chief actors within their communities for that started some programmes for self-help groups to training in vocational skills, from counseling centres to raising awareness about violence against women. Another consequence of poverty is the condition of persons with disabilities, providing rehabilitative services to such individuals is a significant challenge, which RDT first took up in 1987. Today we provide special schooling and schooling related assistance to a number of children with disabilities besides running self-help groups for older persons and mobilizing governmental resources to ensure the protection of their rights.

An important precursor to any human activity and one which tends to get neglected most in poverty ridden regions health. In RDT’s project areas, access to health care is a serious challenge to address which RDT have setup rural hospitals and also initiated community health programmes. These ensure that marginalized populations are not only able to access affordable healthcare options but are also kept aware of critical healthcare choices. The provision of housing for poor and tribal families succeeding very broader way. Protect ecology and environment is thus another area of concern for RDT.

Rural poor with low socioeconomic status castes are constitute RDT target group. This includes scheduled castes, scheduled tribes, backward classes and persons with disabilities, HIV/ AIDS, women and children. In case of ecology, RDT adopts a whole-village approach covering small and marginal farmers and landless agricultural labors. RDT consider people as the main actors in the process of their own development. Major emphasis is on strengthening community based organizations (CBOS) so that they play a major role in identifying and dealing with social and developmental issues.

When the RDT first began its development work in Ananthapuram, the poor considered education, who were struggling hard to make two square meals had not considered enrolling their children in schools a priority since they needed additional hands to supplement family income. It was for their reason that the enrolment rate among boys and girls was less than 10% to 5% respectively. Another major challenge was enrolled children complete primary education between 1985-1991 was 18%, while 30% children are taking 2 to 3 additional years to complete their primary education. During 2005-06 overall retention rate rose to 95%. Non-enrolled and dropout girls were either taking care of sibling in the family or assisting mothers in domestic work, while the boys were turning out to be laborers at an early age. Years of efforts by RDT to rural poor recognized importance of education which is the key to their socioeconomic transformation. Supplementary schools are now being managed and monitored by community development committees (CDCs). There are 3242 CDCs, including 127 solely composed of women, across 2737 villages which are covered under the education programme initiated by RDT.

The percentage of enrolment of children was increased 99% in 1st and 6th standards during the academic year 2013-14. Supportive measure such as providing school materials, bicycles, school uniforms, saving grants etc. It was observed that persons with very low socio-economic profile were occupying mostly lower level jobs due to low educational qualifications. RDT felt that the need for providing quality education to meritorious poor rural children through a screening procedure to enable them to pursue two years intermediate courses in reputed corporate colleges and continue supporting them till the completion of their technical professional courses, at both the graduate and postgraduate level through the special education scholarship scheme introduced in 2004.

A total of 2140 students consisting of 1176 boys and 964 girls were enrolled between 2004-05 and 2013-14 under this scheme, from them 589 (28%) students successfully completed their courses such as graduation and post-graduation, in engineering-420; medicine-11; dental-3; nursing-106; bachelor and master of pharmacy-19; bachelor of psycho therapy-6; general graduation-12; post graduation in electronics-2; horticulture science-5; diploma in education-3 and other-2. 195 students comprising 116 men and 79 women have secured decent jobs in government-36 and in private/corporate sectors-159 earning a good salary.

A professional school running by RDT is training youngsters to learn foreign languages such as Spanish, French and German along with computer and communication skills to enhance the scope of their getting employment in multinational companies.
About the Community Development Committees as per annual report 2013-14 towards eradicating poverty and suffering, beneficiary’s statements hereunder mentioned.

Mrs. Nagamma (2013) said that, she had four children (2 boys and 2 girls). Her elder son got married while other three are graduating. Since I am illiterate I don’t want my children to be like me instead I want them to be highly educated and lead a good life.

Mr. Thirupal one of the beneficiary of RDT working as a mandal coordinator in Saaksharbarath and having two kids, he hopes to give them good education. RDT schemes for the SC/ST communities in his village in order to develop such that castes. He is also actively participating in the educational programmes as a CDC member 2013-14.

Mr. Y. Yohan a Ph.D. research scholar in Agriculture who is getting benefit from RDT and expressed his sincere thanks to RDT.

Ms. Keerthi doing her doctor studies at narayana medical college, Nellore, A.P. expressed her sincere thanks to RDT which was supported financially 2013-14.

About Schooling for Orphan Children

Manohar Nayak studying 7th class at Sri Sai School, P. Bhalapalli of Puttaparthi Mandal, who’s father was murdered for some reasons while his mother committed suicide. His grand parents aged above 50 years are taking care of him. They both work as agricultural labors. At that time RDT organization is taking care of him giving help for his education.

Vijay studying 7th standard, while her father died, then few months later her mothers also died. Her grand mothers aged above 65 years is taking care for this girl, she said that, it became burden to feed us both. RDT organization put a hand to the girl to join in a good school and promised to educate her sister also when she cross 5 years age. The girl thanks the RDT for the help.

Hemalatha from Segalapalli of Kundurpi mandal said that, her father addicted to alcohol, in a quarrel he died and her mother also died with the depression. Her grandmother is taking care of her and her brother. His brother is under the her uncle care. The RDT organization is supporting her for her education, she is studying 9th class at Gnana Bharathi School of Kalyandurg, and her ambition is to become a doctor.

Education for Orphan Children

Vicente Ferrer followed and preached the message that good action for the poor and needy will always yield good results, and that strong willed and caring persons can play an effective role in bringing social change since they always carry out good actions in some form. People inspired by his message i.e. ‘Many Good Actions Together Make a Great Big One’ was something he said that will always echo in the hearts of people.

RDT introduced the Hundii concept in few project villages in 2012. with the catchy slogan ‘Spandinchu Sayam Andinchu -స్పండిచు సయం అండిచు (Let your hearts respond and hands help), stems out of this idea. The programme positively influenced everyone involved, especially the rural poor who even with little savings in their hundis, expressed their concern for the poorest and the neediest on their education of orphan children. RDT took on the responsibility of getting them admitted into schools and colleges, paying their tuition and hostel fees and giving them books, clothes and money for personal use as well as their health needs. This hundi movement (India for India) has continues to have many donors³.

Women Empowerment

Although women in India constitute 50% of the total population, women are still disproportionately poor when compared to men. RDT has therefore been working for the integrated development of women belonging to very poor rural communities since 1982-83. Women are now formed into self-help groups (SHGs) which play an important role in their empowerment, unity and socio-economic advancement.

RDT lays equal emphasis on the social and economic progress of women. Today over 100000 women in 7899 SHGS in 1651 villages are able to discuss their various socio-economic health and their development and are taking collective action. They have their own individual savings accounts and carrying out financial transactions independently. They are also successfully running mini banks, monthly savings rotate the money among themselves as credit, by the end of march, 2014 it was crossed Rs.17,00,00,000/- (Rupees Seventeen Crones only) Improved leadership and managerial skills among rural women is evident in their accessing the women development fund (WDF). During 2013-14, 8788 rural women had obtained loans totaling more than rupees nine crores. A total of 819 women were trained as of march, 2014 in various vocational skills which include tailoring, embroidery, herbal phenol/ making, incense sticks, note book binding, chalk-piece making, kalamkari printing, working on power looms and making napkins, earning an average income of Rs.125 to Rs.150 per day³.

Dairy is considered an alternate sustainable subsidiary occupation in the chronic drought prone Ananthapuram district. Rural women are encouraged to rear one or two milk-cattle especially graded murrah buffaloes and cross breed jersey cows to supplement their family income. By the end of March, 2014, 5587 rural women, owned 7016 milk cattle, each providing a monthly income of Rs.2500/-. Another important programme dealing with violence and harassment against women and girls is being implemented since 2010. A separate team was set up to deal with the issues of gender based violence and discrimination social action teams comprising 2 to 3 women and at least one man was completed in 351 villages with as many as 1025 members trained to identify women facing violence and extending necessary help and support to them with guidance from RDT.

Housing for Poor

RDT emphasis on quality construction and involving the community in the construction not only creates a feeling of
ownership among them but also a feeling of empowerment that they took part in building their own houses. RDT has also undertaken reconstruction works in areas affected by natural disasters in different parts of India.

Housing is one of the primary requirements of a human being. Owning a permanent shelter not only provides safety and security in all seasons but also enhances socioeconomic status and gives an identity. RDT housing focuses mainly on the construction of decent houses consisting of 2 rooms and a veranda and also provides water fetching points in the villages. It has been encouraging women to obtain house sites from the government in their names since it builds houses in the name of women who don’t inherit any property either from their parents or in laws. A permanent house owned by a woman gives her social recognition both within the family and in society and is considered an important element in the process of her empowerment.

Success Stories
I (Sruuti) very happy that I am back to school again. I felt very sad when my parents didn’t consider my views at all. I am glad to that ‘RDT understand my feelings and came to my rescue and stopped my marriage’.

Pullamma – savings through milk cattle helped me perform my daughter’s marriage. RDT provided me a permanent shelter. Our family is ideal family in our colony.

Anjali aged 13 years, belongs to a tribal community and was married off to a person aged 26 years from Dharmavaram town. Her father who was addicted to liquor performed her marriage without her consent. She was unable to bear her husband’s harassment. One of the elders advised her to meet RDT staff who would guide her in the right direction. She stayed in the RDT shelter home, till the issue was settled and now she pursuing her 8th class at KGB residential school at Konagani palli.

Community Health Programmes aim to create wide spread awareness on various health aspects and especially focus on reproductive healthcare, nutrition, immunization, sanitation apart from provide health care at the grass root level at affordable price through rural and mobile health clinics. RDT focus in Srisailam and Madakasira region is on training selected women as health volunteers, popularly called community health workers (CHWs) and giving them periodical inputs on basic health aspects including treatment of minor ailments. The organization strives to reduce morbidity and mortality especially among women and children belonging to poor rural communities creating awareness for regular antenatal checkups. Institutional deliveries, immunization and nutrition.

Mobile Health Clinic in Srisailam Region
In Srisailam region RDT has started mobile health clinics with two ambulances. Two doctors each supported by a health organizer will be conducting health checkups in strategic locations. Cases requiring special medical attention are referred to nearly govt. hospitals or the RDT referral hospital at Bathalapalli. Chenchu tribes in interior forest areas are also accessing service which are provided at their doorstep.

Success Stories
Suneeth studying 8th class in a local govt. school. Every body calling her a blind girl but, she used to tell them that she could see them with both the eyes. The problem was the closure of her right eyelid. She forcibly opening the eyelid to see the others and to read the contents written on the black board. This caused severe pain in both eyes. Her parents took her to Bangalore hospital, doctors suggested for surgery that time RDT extend great help her for the surgery to overcome the difficulty which she is facing.

Pallavi from a poor tribal family from a remote settlement in Nallamada Mandal in Anantapuram district. She was a premature baby, it is a really a boon to have NICU at RDT hospital at Bathalapalli. In her mother words, NICU really saved my daughters life while nutrition provided by RDT, now she is aged 3 years and her weight is 10 Kgs. Many children and pregnant and lactating mothers get nutrition at the centre in our village, we get regular input from both the health organizer and the community health workers.

Community based rehabilitation, disabilities in India as per census 2011 is 2.21% with slight variation between male (2.41%) and female (2.01%), as well as between rural (2.21%) and urban (1.93%). The Scheduled Caste have a higher percentage of persons with disabilities than the others (2.45%). Of these disabilities 26.4% are speech and hearing impairments, 20.3% are locomotors, 18.8% visual, 5.6% intellectual disability, 2.7% mental illness, 7.9% multiple disabilities and the remaining 18.4 are other disabilities.

Face to Face Interviews
While writing this article the researcher has met and interacted with some village people i.e. Akkim Naramma (76), Akkim Peddaranayaswamy (58) and Balanarasimhulu (33) of Gantapuram village; Maatangi Narayanaswamy (60), Maatangi Veeraiith (55) of Gummalakunta village; Nanavath Krishna Naik (65), Nanavath Gundu Naik (66) of Pullugutta Palli Tanda; Ramaavath Narayana Naik (60), Ramaavath Somla Naik (58) of Kamalapadu Tanda; Banaavath Nagendra Naik (60), Maatangi Veeraiah (60), Ramaavath Narayanaswamy (60), Ramaavath Somla Naik (58) of Kamalapadu Tanda; Banaavath Nagendra Naik (60), Banaavath Veeramani (62) of Nekkanadoddi Tanda and Mallikarjuna (28) Research Scholar, Setturu village and Nanavath Gopinath (22) M.A. History Student studying in Dravidian University Ananthapuramu district, and known about their experiences and benefits received from RDT. The villagers expressed their happiness and their gratitude towards RDT; they feel very happy that the organization has helped them for their future life. They feel lucky to have such organization in their district to help the poor and weaker sections.

Conclusion
In my view the RDT is doing tremendous works towards the welfare of Poor, Backward classes, SC/ST’s and PWD’s (persons with disabilities). A couple who were not born in India, but doing a great job for the welfare of the public without any financial benefit is shows their nature and which influence all the Indians to think about the Social Services towards poor and weaker sections, we all should salute the couple for their commitment. From this dais I request the all educators and human hearts to extend their knowledge and
part of their income for the welfare and benefit of our brother and sister of the beloved nation which bring our nation to become from developing country to forward country and stands proudly in the rows of forward countries. I request all the politicians and priests of various kinds of religions to extend their activities to serve and develop the poor and weaker sections of our beloved country India.

References

[3] Internal Bulletin, RDT, August 2015. Face to Face oral Interviews