

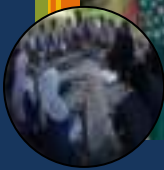
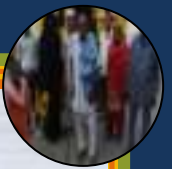
SHARE SOCIETY

Service for Health and Rural Education

Annual Report

Community Based Mental Health
& Development Programmes

2019-2020



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SERVICE FOR HEALTH & RURAL EDUCATION (SHARE) SOCIETY

Annual Report

2019 -2020

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GLOSSARY

<i>ACSM</i>	-	<i>Advocacy Communication Social Mobilization</i>
<i>ADO</i>	-	<i>Assistant Development Officer</i>
<i>AIDS</i>	-	<i>Acquired Immune Deficiency Syndrome</i>
<i>ASHA</i>	-	<i>Accreted social Health Activist</i>
<i>BDO</i>	-	<i>Block Development Officer</i>
<i>BPL</i>	-	<i>Below Poverty Line</i>
<i>CMOs</i>	-	<i>Chief Medical Officer (at district level)</i>
<i>CBO</i>	-	<i>Community Based Organization</i>
<i>CDO</i>	-	<i>Child Development Officer</i>
<i>CHC</i>	-	<i>Community Health Centre</i>
<i>CHDP</i>	-	<i>Community Health Development Project</i>
<i>DMPH</i>	-	<i>District Mental Primary Health</i>
<i>DRDA</i>	-	<i>District Rural Development Agency</i>
<i>EHA</i>	-	<i>Emmanuel Hospital Association</i>
<i>FGD</i>	-	<i>Focus Group Discussion</i>
<i>GOs</i>	-	<i>Government Organization</i>
<i>HIV</i>	-	<i>Human Immunodeficiency Virus</i>
<i>IEC</i>	-	<i>Information Education & Communication</i>
<i>ICDS</i>	-	<i>Integrated Child Development Scheme</i>
<i>JSY</i>	-	<i>Jannani Suraksha Yojana</i>
<i>MBP</i>	-	<i>Micro Birth Planning</i>
<i>MDGs</i>	-	<i>Millennium Development Goals</i>
<i>MOV</i>	-	<i>Means of verification</i>
<i>MOIC</i>	-	<i>Medical Officer In charge</i>
<i>NGO</i>	-	<i>Non-Governmental Organization</i>
<i>NREGA</i>	-	<i>National Rural Employment Guarantee Act</i>
<i>NPE</i>	-	<i>National Policy on Education</i>
<i>NRHM</i>	-	<i>National Rural Health Mission</i>
<i>OBC</i>	-	<i>Other Backward Class</i>
<i>ORS</i>	-	<i>Oral Rehydration Solution</i>
<i>OVI</i>	-	<i>Objective verifiable Indicators</i>
<i>PHC</i>	-	<i>Primary Health Centre</i>
<i>PPSDs</i>	-	<i>People Psycho-Social Disability</i>
<i>PRI</i>	-	<i>Panchayati Raj Institution</i>
<i>RMPs</i>	-	<i>Rural Medical Practitioners</i>
<i>RSBY</i>	-	<i>Rashtriya Swasthya Bima Yojna</i>
<i>SHARE</i>	-	<i>Service for Health & Rural Education</i>
<i>SHG</i>	-	<i>Self Help Group</i>
<i>SSA</i>	-	<i>Sarva Shiksha Abhiyan</i>
<i>STD</i>	-	<i>Sexually Transmitted Diseases</i>
<i>SHG</i>	-	<i>Self Help Group</i>
<i>TBAs</i>	-	<i>Traditional Birth Attendants</i>
<i>TB</i>	-	<i>Tuberculosis</i>
<i>U.P</i>	-	<i>Uttar Pradesh</i>
<i>VHSC</i>	-	<i>Village Health Sanitation Committee</i>
<i>VHG</i>	-	<i>Village Health Guides</i>
<i>VHND</i>	-	<i>Village Health Nutrition Day</i>

2.0 Background Information:

The SHARE (Service for Health and Rural Education) Society was registered on 01st June 1993 under Societies registration act 1860 as a non-governmental organization. Although SHARE was started by Dr. Ted Lankester, in 1985 to make “HEALTH FOR ALL” a reality for the people living in the remote villages of the Tehri Garhwal district of Himalayas. Ever since the project came into service under the different leaderships, the emphasis has been to provide primary medical assistance and health education to the needy and suffering people for almost 20 years. SHARE made a complete shift of the project location from Janupur block of Tehri Garhwal to Chinyalisaur block of Uttarkashi district in 2005. With this change a paradigm shift was considered in order to make the communities self-reliant and self-sustaining through Cooperatives therefore SHARE focused on the formation of Health Co-operatives to ensure better health at the community level by the people, for the people and of the people to ensure sustainable development.

SHARE’ project location again moved to Seohara block of Bijnor district, Uttar Pradesh in 2007 under the efficient leadership of Mr. David Abraham after serving Tehri Garhwal and Uttarkashi districts more than 20 years and same time in the plain regions it was entirely different challenges with compare to hilly regions however SHARE successfully started its community health & development programmes in this new area where no voluntary agency was working to address the maternal health & rural development issues in those days. In this addition SHARE started community based mental health programmes in Bijnor district in 2014 and till date the programme has been functioning and more over the programmes kept operating from Seohara, the nuclear centre as per its strategic location to cover the nearby blocks and boarder districts of Uttrakhand. The mental health programmes’ influences even reached out to the nearby districts where communities ensured their participation within the programmes.

3.0 Project Details:

The Share project located in Seohara Block of Bijnor district of Western Uttar Pradesh and has been completed the 13th year in this current location after shifting from Chinyalisaur block of Uttarkashi district where SHARE served the communities of that area for nearly 2 years.

The Seohara block administratively consisted of 85 Gram Shabha and 10 Naya Panchayat. The government health infrastructure point of view: a community health centre/primary health centre has been delivering health services with the network of 2 additional PHC and 25 ANMs sub centres to the entire block of Seohara.

The project location has been comprises of 172 villages with a total population of 178902, proportionally block covered (rural) is 77.38. These villages have been further divided into 3 clusters to supervise & monitor the program effectively with the coordination of the project team and CBOs. In this year SHARE reach out 65 new villages to raise the mental health awareness and about the counselling and medications as per the need by the Govt. psychiatrist. TB programmes and CBOs formations remain part of the programme in the community circles.

3.1 Project Summary:

This is the 7th year SHARE continuing its initiatives in the domain of Mental Health¹ with the focus of community based mental health and development programme. SHARE started the work just in 01

¹ Mental disorders are a major cause of illness both globally and throughout India. About 14% of the global burden of disease is attributed to neuropsychiatric illness (Prince et al, 2007, WHO 2011, Patel et al 2007). Common mental disorders that are found in all communities include depression, alcohol

block in 2013 but now it expended in 07 blocks of Bijnor district and 02 blocks of Moradabad and even our work reaching in one of district of Uttrakhand. This year SHARE team also become very much confident while working in mental health component and even they earn the mutual respect of those having mental ill persons in the families.

SHARE also worked in the components of TB Programme, CBOs, along with community based mental health programme and during the reporting period youth resilience (emotional & physical) program has been implemented in the colleges/schools ((see Annexure No 01) to work among 66 adolescent groups- 18 girls groups and 15 boys groups comprising of 540 enrolments (female 286 and male 254).

It is not surprising, then, that the 'treatment gap' for mental disorders is large all over the country, but especially so in rural areas, and amongst the socially disadvantaged therefore SHARE made hundreds of referrals to the Govt. metal hospital Bareilly from the project locations during the period.

The objectives mainly included: To increase emotional resilience (knowledge & skills) among 800+ adolescents in schools/colleges. Focus will be on female adolescents; 02. To strengthening Health System/Network with government hospitals- CHC/PHC of Bijnor and Moradabad districts; 03. To empower PPSDs and their families with skills and knowledge on mental health problems; 04. To build network and awareness, skills and knowledge on mental health in 40 new villages;05. Promotion of mental health among religious/influence leaders of Bijnor districts. 06. To promote Disability Entitlements/Govt. Benefits in the community circles. 07 To strengthen the 50 CBOs of Bijnor district to increase skills in mental health literacy, first aid and positive mental health. promote disability entitlements in the community circles; 08 To run computer based functional adult literacy programme for 200+ rural women.

New self-help groups (SHGs) have been formed and some of the old SHGs have been closed and now project has 61 active SHGs in the targeted communities (see Annexure No. 01). TB programmes (RNTCP) have been carried in the rural villages.

Ms. Margaret Kurian, Mr. Papa Rao & Dr. George Clarence (Unit Management Committee Members) visited SHARE during the reporting period and made field visits to see some of programme progress taking place in the communities and meeting with people living with mental disorders (PPSDs) and their family members.

3.2 Project Situation Report:

SHARE has been running in seventh year of implementing community based mental health and development programme in Bijnor district operating from Seohara i.e. western Uttar Pradesh. Although SHARE approached remained very much integrated with other health and development component contributed towards the mental health programme and now it has been taken up the strong foundation. We started the year with the following outlines:

- ❖ The purpose of the meetings to have community get together and same time mobilize the participants that the mental health awareness may help the community to deal the problems of mental health issues, Tuberculosis patients' identifications and treatment, and disable people need may be

use disorder and anxiety disorders. Mental health is a hugely neglected are in health, and in all Low and Middle Income countries there are very high rates of under-presentation, under-diagnosis and under-treatment (Patel,V 2007 and WHO 2007).

sensitize through online processes and more over they may get disability entitlements. These are the steps to be enforced through them in the respective communities.

- ❖ The youth resilience training for SHARE' programme facilitators taken place in the month of April.
- ❖ SHARE organized Adult Literacy Facilitators' training to build their capacity that they may have computer based functional literacy (CBFL) skills and set up the literacy centres in their respective communities.
- ❖ SHARE participated in EHA Annual Reporting from 24th April to 27th April 2019 in Dehradun. SHARE has prepared the Annual Report in PPT and a vedio clip to be presented during the Annual Reporting Meeting.
- ❖ SHARE' Audit has been taken place in the month of May 2019.
- ❖ SHARE Society' compliances have been updated during the reporting period.
- ❖ SHARE presented its Annual Report and Audit Reports for the year 2018-2019 in the AGM meeting in the month of June 2019.
- ❖ Mr Puran Jha - Consultant at CPC Services Noida has been conducted the entire Due- Diligence Process of SHARE Society on 13-08-2019. The documents relating to Governance, Legal Compliances, Accounts & Finance, Internal Control and Programme have been reviewed on the sample verification method.

Youth Resilience Programme: This year also SHARE started youth resilience activities in the schools after gaining 05 years' experience from CORSTONE Foundation New Delhi. July onwards SHARE started youth resilience programmes in 08 schools with the group formation of male & female in which 540 adolescents have been enrolled.

Accessibility of Mental Health during the period April to March 2020: 51 trips have been organized during the period by SHARE in which 300 new patients-PPSDs (people with psycho-social disability) 191 male and 109 female patients have been visited to the Govt. mental hospital Bareilly. 02 patients are more with compare to last year for the same period. The patients are from the following communities: SC 128 (Male 77 & Female 51); OBC 83 (Male 60 & Female 23); Gen 22 (Male 14 & Female 08) and Muslim communities 67 (Male 29 & Female 28) and same time 929 old PSDs (531 Male & 398 Female patients) re-visited the mental health facility. This year 33 old PSDs numbers have been decreased with compare to last year for the same period. This shows that the families of PSDs taking up the responsibility to take their patients to the either Govt. psychiatrists or private psychiatrists by their own, so the accessibility of treatments have been increased during the period.

Online Registrations for PWDs to have Disability UID Card and E-Certificates April to March 2020: SHARE facilitated to have online registration for PWDs from the rural community circles during the reporting period 612 PWDs approached SHARE in order to file their online applications to be processed result of this 289 Disability UID cards and E-Certificates have been issued from the CMO office, Bijnor for all range of PWDs facilitated by the SHARE during 06 months.

Disability Entitlement Initiative April to March 2020: Mr David Abraham has taken the keen interest to have Disability Entitlements in the community circle where SHARE has been working last couple of years. Result of this 359 PWDs (Annexures 03) got disability entitlements from CMO office Bijnor in term to have disability certificates consisting of 38 trips for the said purpose. We made the efforts to reach out the marginalized communities as it shows what kind of disability got the Disability Entitlements: 14 disability entitlements for Mentally Retarded cases (Male 06 & Female 08); 08 disability entitlements for Cerebral Palsy cases among children (Male 06 & Female 02); 17 Speech and Hearing disability entitlements (Male 09 & Female 08); 113 Locomotive Disability (Male 69 & Female 44) and 08 Paralyse disability entitlements (Male 06 & Female 02). Majority of disability

entitlements belongs to Muslim and SC communities. SHARE also taken the support from DMHP Moradabad to make the disability assessments for the mentally retarded cases, prior to have CMO office Bijnor visit.

SHARE organized World Suicide Prevention Day 2019: SHARE Programs held in 06 different locations and among different groups viz people with disabilities (PWDs), adolescents, adult learners, stakeholders on 10th September 2019

New Village Initiatives:

During the reporting period, SHARE made mental health awareness in 39 new villages and made the contacts with stakeholders like Gram Pradhans, ANMs, Asha Workers, Aganwadi workers, rural health care providers etc.

Madarsha Intervention (Muslim Schools): 25 Madarsha have been approached and 05 programmes have been conducted during the reporting period in order to increase skills in mental health literacy, first aid and positive mental health.

SHARE organized Programme on World Mental Health Day 2019: Programme held in SHARE centre on Mental Health Day 2019, on the same day SHARE facilitated mentally ill people's visits to the Govt. mental hospital to make their accessibility to have care and medications. On the same day intellectual disable people facilitated to DHMP Moradabad to have assessment for the disability entitlements. Mental health programme also held in 5 communities of Seohara block and in the government hospital.

SHARE organized Programme on World Disability Day 2019: We dedicated this day to all People with Disabilities (PWDs) of our communities around us in Bijnor UP. In this addition during the year SHARE has been facilitated 343+ PWDs to be assessed by Government's doctors and have disability entitlements. Outcomes: 359 PWDs got disability entitlements in 12 months of 2019-2020.

Children Disability Assessment Camp in SHARE Centre: This camp organized by Latika Roy Foundation; Dehradun facilitated by SHARE on 7-12-2019 in which 24 children assessed.

SHARE Celebrated 11th Annual Function 2019: It was a wonderful Annual Function on 18-12-2018, in which 350+ community members participated and witness the changes taking place in individual lives as well in the communities we serve. Project Manager presented the SHARE Society Annual Report during the programme and same time media captured the programme activities.

SHARE organized Programme on International Women Day 2020: We dedicate this day to all People with Disabilities (PWDs) of our communities around us in Bijnor UP. In this addition during the year SHARE has been facilitated 445+ PWDs to be assessed by Government's doctors and have disability entitlements. Outcomes: 359 PWDs got disability entitlements in 2019-2020.

3.3 Programme Achievements:

3.3.1 ACTIVITIES:

What was Scheduled	Progress Made	Explanatory Narrative
Activity No. 01:		<ul style="list-style-type: none"> Project strategically

<p>Selection of participatory schools to conduct emotional resilience program in schools/colleges.</p> <p><i>Sub Activities:</i> Project will seek permission from college/schools to carry out emotional resilience programme among adolescents.</p>	<ul style="list-style-type: none"> 08 participatory schools have been selected. 14 colleges /school have been approached by SHARE to conduct group activities on emotional resilience programs among adolescents, need to include 04 more schools. 03 private colleges given permission to SHARE to conduct the Youth Resilience Programme. 	<p>identified participatory schools/collages as per project feasibilities to reach them out in planned manners.</p>
<p>Activity No. 02: Identification & assign of school facilitators to conduct the sessions in the participatory school.</p>	<ul style="list-style-type: none"> 11 school facilitators have been assigned to conduct the sessions in the participatory school. SHARE followed the methodology of CORSTONE. 	<ul style="list-style-type: none"> Project has 11 female school facilitators. Youth Resilience Program based on CORSTONE methodology.
<p>Activity No. 03: Orientation to master trainer.</p>	<ul style="list-style-type: none"> 01 time master trainer received the orientation. 	<ul style="list-style-type: none"> Orientation taken place in Seohara in May.
<p>Activity No. 04: Orientation for programme facilitators (PF) for emotional and health resilience programme.</p>	<ul style="list-style-type: none"> 11 school facilitators 	<ul style="list-style-type: none"> Built on last year experience & leanings.
<p>Activity No. 05: Formation of groups of girls and boys in the colleges/schools.</p>	<ul style="list-style-type: none"> 33 New groups have been formed during the period. 	<ul style="list-style-type: none"> Adolescents groups will be formed in school/colleges with the support of school managements.
<p>Activity No. 06: Group activities among adolescent in 03 schools/colleges.</p>	<ul style="list-style-type: none"> Plan made that the Programme facilitators will conduct the group activities among the adolescents in the 08 colleges/schools. 	<ul style="list-style-type: none"> Programme facilitators have been trained by master trainer.
<p>Activity No. 07: Pamphlets/IEC materials/workbooks for adolescents/students.</p>	<ul style="list-style-type: none"> The new copies of workbook for participating adolescents need to be printed for boys & girls. 	<ul style="list-style-type: none"> These booklets used to facilitate group sessions among adolescents in

		the school/colleges.
Activity No. 08: Refresher course for school mental health facilitators.	<ul style="list-style-type: none"> 10 refresher courses during the reporting period. 	<ul style="list-style-type: none"> Updating concern registers of each school facilitators to cope the youth resilience programs in the schools/colleges.
Activity No. 09: Reach out to the new villages for fiscal year 2019-2020.	<ul style="list-style-type: none"> SHARE reach out to the 81 new villages and programme conducted in 32 new villages during the reporting period to have relationship building with community stakeholders and raise mental health awareness. 	<ul style="list-style-type: none"> Details of new villages block wise: <ul style="list-style-type: none"> Afzalgarh (18); Kothwali (11); Dhampur (17); Takurwara (09); Chajet (04); Neataur (06); and Noorpur (16).
Activity No. 10: Networking with CMO office, PHCs and CHCs that they may aware about the progress of mental health programme in Bijnor district.	<ul style="list-style-type: none"> 04 meetings have been done with CMO Bijnor. SHARE developed networking with 03 Govt. CHC/PHC while working on mental health. Project interacted with the community people on these resource materials and received the positive response. 	<ul style="list-style-type: none"> Bijnor CMO has been changed during the reporting period. Project also developed relationship with Government mental hospital, Bareilly and new director of this hospital ensured us to provide maximum support to this mental health programme. PHCs have been responding positively with the project so far and willing to giving support to mental health initiative.
Activity No. 11: Developing and accessing resources for mental health literacy IEC materials-adolescent friendly (Banners, hand-outs, DVD, radio programmes, forms etc.) for capacity building/training.	<ul style="list-style-type: none"> Project developed mental health literacy (IEC Materials) like different kind of banners, handouts and have some movies on mental issues. 5000 Handouts are printed on the topics of depression, anxiety, schizophrenia, sleeping disorders assessment forms, fits, etc. 	<ul style="list-style-type: none"> Banners are used for conducting mental awareness meetings at community levels, in colleges even for giving trainings for stakeholders. During the field visits project found these resource materials very useful.
Activity No. 12: Capacity building of	<ul style="list-style-type: none"> 76 ANMs & 183 ASHAs workers 	<ul style="list-style-type: none"> ANMs & ASHAs workers are main grass

Nurses, ANMs, ASHAs, AWWs and in mental health issues (for identification of mentally ill and their treatment).	<p>capacity building have been through SHARE community work.</p> <ul style="list-style-type: none"> 225 AWWs 	<p>root workers in the community level.</p> <ul style="list-style-type: none"> Aganwadi workers responsible for mother and child care in the communities.
Activity No. 13: Cross Cutting Activities on different themes.	<ul style="list-style-type: none"> Programme on Cross Cutting themes have been conducted during the period and drew the public attention what SHARE does especially for mental health. 	<ul style="list-style-type: none"> World Suicide Prevention Day programme on 10-09-19, celebrated by SHARE in 06 different locations. World Health Awareness Day Programme have been organized on 10-10-2019, organized by SHARE Society in 07 different locations.
Activity No. 14: Group Meetings on Mental Health & Disability in the communities to raise the awareness and have accessibility.	<ul style="list-style-type: none"> 1109 Group Meetings took place in the community level during the reporting months till March 2020. Total Participants attended the group meetings- 13043 (Male 7741 & Female 5302) 	<ul style="list-style-type: none"> Long way to go in this direction as without psychiatric this is not possible even in district hospital there is no psychiatric.
Activity No. 15: Regular meeting with Gram Pradhans/VHSC at community level.	<ul style="list-style-type: none"> 267 meetings with Gram Pradhans/VHSNC on the issues of mental health. 	<ul style="list-style-type: none"> Gram Pradhans are positive about these mental health programmes and allowing the project team to organize meetings in the communities. All these meetings have been organised in the villages
Activity No. 16: Regular ACSM meetings with community people in the village levels.	<ul style="list-style-type: none"> 32 ACSM meetings have been conducted in the communities of 06 blocks to raise awareness on mental health. Afzalgarh 09; Dhampur 06; Noorpur 02; Seohara (03) and Thakurdwara (02); Chajlet (01); Neataur (02) and Noorpur (09) 	<ul style="list-style-type: none"> Basic awareness on mental health disseminated to the participants like what is mental health, how mental illness affect normal health

	<ul style="list-style-type: none"> 803 (Male 529 & Female 274) community people & stakeholders attended the ACSM meetings at the community level. 	behaviour, wrong conception about mental health problems in the communities, what factors leading mental health problems to a person & Treatment of mental illnesses.
Activity No. 17: House visits in the community circle	<ul style="list-style-type: none"> 21390 house visits have been made in the community circle. 	<ul style="list-style-type: none"> Period covered April to March 2020.
Activity No. 18: House visits of old & New People with Psycho –Social Disability (PPSDs) in the communities setting.	<ul style="list-style-type: none"> 2372 times SHARE made the house visits of PPSDs to motivate family member for care & drug adherence. 	<ul style="list-style-type: none"> Project received the positive feedbacks from the communities and mental health messages really penetrated in the community circle.
Activity No. 19: Case detection of People with Psycho – Social Disability (PPSDs) from the communities and registration in Project registers	<ul style="list-style-type: none"> As per project records new 87 common mental disorders, Epilepsy 236 and 122 severe mental disorders have been detected from the various communities/villages for the period April to March 2020. 	<ul style="list-style-type: none"> Project stakeholders & family members of PLWMDs also take part in detecting new cases from the communities.
Activity No. 20: 3.5 Facilitate the trips of PPSDs to the Govt. Mental Hospital Bareilly for consulting psychiatric over there and free medication for referred cases.	<ul style="list-style-type: none"> 51 trips have been facilitated by SHARE Project during 12 months on weekly basis to the Govt. Mental hospital Bareilly. 300 New PPSDs (Male= 191 & Female =109) and 929 revisits of PPSDs (Male= 531 & Female =398) to the Govt. Mental hospital Bareilly. 	<ul style="list-style-type: none"> SHARE facilitate Govt. Mental Hospital trip every Tuesday in group of mentally ill people & their family members travel together. April 2019 to March 2020.
Activity No. 21: Psycho-education will take place with the family of PPSDs with a needs assessment, care plan and support and development of	<ul style="list-style-type: none"> 3256 times Psycho-educations have done in the communities during the year. 563 care plans of PPSDs have been done with family members. 	<ul style="list-style-type: none"> Psycho-education for family members of mentally ill people in the communities.

skills in MH.		
Activity No. 22: Wall writing in the villages to spread the messages of mental health.	<ul style="list-style-type: none"> No wall writings in the villages taken place during the reporting period. 	<ul style="list-style-type: none"> Wall writings helped the project to have mass on mental health in the communities
Activity No. 23: Madarsha (Muslim Schools) Intervention to make m	<ul style="list-style-type: none"> 17 Madarsha intervention programme have been conducted during the period. 	<ul style="list-style-type: none"> In Nehtaur block (1); Kothwali block (1); Dhampur block (1) and Seohara block (14)
Activity No. 24: Monthly basis CBO meetings in the communities promoting mental health in the communities.	<ul style="list-style-type: none"> 23/41 functioning CBOs taken parts in monthly meetings & mental health awareness sessions taken place in these groups. Some of the CBOs members are community motivators of identify of mentally ill people in their villages. These CBOs manage their own groups activities and monthly basis they do saving, inter loaning & recovery of loans. 	<ul style="list-style-type: none"> Project facilitated CBOs documentation and account opening in the circular banks. There are 709 members in the 62 CBOs. Most of the CBOs have their own bank accounts.
Activity No. 25: Exposure trips to health facilities & training programme for CBOs in the communities.	<ul style="list-style-type: none"> 39 CBOs members of 06 groups participated in the training programme during the reporting period. 	<ul style="list-style-type: none"> CBO members are made well aware about Govt. mental hospital for the treatment of mental disorders.
Activity No. 26: Project facilitates CBO Linkages with financial institutions/ micro finance institutions.	<ul style="list-style-type: none"> 01 CBOs have not linked to the Banks because of demonetisation during the period. 	<ul style="list-style-type: none"> Most of the CBOs faced the problem of demonetisation.
Activity No. 27: Formation of new CBOs in the communities to support mental health programme.	<ul style="list-style-type: none"> 01 new CBOs formed in the communities. 	<ul style="list-style-type: none"> In some villages first project started identification of mentally ill persons and after that CBOs formed.

Activity No. 28: Training for Adult Learners	<ul style="list-style-type: none"> 05 times Adult Literacy Training taken place in SHARE centre in which 03 preraks (facilitators) have been trained. 	<ul style="list-style-type: none"> SHARE' master trainer given the training to the facilitators and how to use laptops.
Activity No. 29: Literacy Survey to enrol the women for adult literacy programs.	<ul style="list-style-type: none"> 03 literacy survey taken place in the villages in 75 women participated. 	<ul style="list-style-type: none"> Alcoholism is the major issues in the communities.
Activity No. 30: Opening of New Adult Literacy Centre in the community.	<ul style="list-style-type: none"> 03 Adult Literacy Centres have been opened in the respective communities. 	<ul style="list-style-type: none"> 03 Adult Literacy Centres in 03 Gram Panchayats.
Activity No. 31: Sensitization meeting TB with Gaon Kalyan Samiti (GKS) and other community groups- monthly meetings Community meetings /Street plays	<ul style="list-style-type: none"> 30 TB Awareness meetings have been conducted in the villages of marginalized people groups. In 30 GKS meetings 720 community people as well as stakeholders participated. 	<ul style="list-style-type: none"> Target was 15 TB Awareness meetings for April to March 2020.
Activity No. 32: Project facilitates to have Swasthya Samwad (House to House visits) in the marginalized communities.	<ul style="list-style-type: none"> 21390 Swasthya samwad (House to House) visits have been carried in Binjor for the month of April 2019 to March 2020. 	<ul style="list-style-type: none"> Target was 18000 Swasthya Samwad (House to House) visits for the 12 months.
Activity No. 33 Project makes referral of TB suspected cases to the nearest DOTs Microscopic Centers (DMCs).	<ul style="list-style-type: none"> 164 referrals made of TB suspected cases to the nearest DMCs during the period. 	<ul style="list-style-type: none"> Referral made of 59 villages - Bijnor district. SHARE has working relation with 03 DMCs.
Activity No. 34 People with Disability (PWDs) will be identified from the communities that they may get disability entitlements from CMO office.	<ul style="list-style-type: none"> Interaction and motivation to 1382 people with disabilities (PWDs) to have disability entitlements for the period April 19 to March 2020. 	<ul style="list-style-type: none"> SHARE covers all kind of disability from the communities.
Activity No. 35 Online applications to be processed for the People	<ul style="list-style-type: none"> 612 online applications have been done by SHARE for the People with Disability (PWDs) for the period April 	<ul style="list-style-type: none"> Male 420 & Female 192.

with Disability (PWDs)	19 to September 2019.	
Activity No. 36 Referring ENT & MR People with Disability (PWDs) to the Govt. Hospital in Moradabad for the disability assessments.	<ul style="list-style-type: none"> 87 both ENT & MR cases have been referred to the CMO Hospital, Moradabad. 	<ul style="list-style-type: none"> These facilities are not available in Bijnor
Activity No. 37 People with Disability (PWDs) will be facilitated to Govt. Hospitals and CMO office to have Unique Disability Identity Card	<ul style="list-style-type: none"> 38 Trips have been organized to facilitate the CMO office visits. 	<ul style="list-style-type: none"> For the assessment of the disability.
Activity No. 38 Mid-Media activities in the communities.	<ul style="list-style-type: none"> 2 Mid-Media activities have been conducted in the communities. 	<ul style="list-style-type: none"> As per plan 01 Mid-Media activity per quarter.

Outputs:

What was Scheduled	Indicators	Progress Made	Explanatory Narrative
Output 01: Identified colleges/schools will give permission to SHARE Project to run Emotional Resilience Program for students (adolescents).	<ul style="list-style-type: none"> No of permission receive by the project for emotional resilience program. 	<ul style="list-style-type: none"> SHARE received permission from 06 colleges/schools for emotional resilience programs. 	<ul style="list-style-type: none"> Colleges/schools are positive towards the work of emotional resilience programs. Project had the target to conduct 21 sessions for each groups in the schools.
Output 02: Emotional Resilience Program will be functional in the participatory colleges/schools.	<ul style="list-style-type: none"> No of colleges/schools participating in this program. 	<ul style="list-style-type: none"> SHARE selected 06 colleges/schools for this program. 	<ul style="list-style-type: none"> For this programs all private schools were selected.
Output 03: Project will have school facilitators to conduct the sessions and work with the girls & boys groups.	<ul style="list-style-type: none"> No of school facilitators project have to run the program. 	<ul style="list-style-type: none"> Project has 11 school facilitators to run this program during the reporting period. 	<ul style="list-style-type: none"> 11 female school facilitators were selected from community itself.
Output 04: SHARE team will	<ul style="list-style-type: none"> No of orientation SHARE team 	<ul style="list-style-type: none"> SHARE team orientation 10 training for the 	<ul style="list-style-type: none"> SHARE team received training to run the emotional resilience

have appropriate knowledge & skills for the promotion of youth resilience among adolescents.	received for capacity building.	capacity building.	programme among adolescents.
Output 05: SHARE will have master trainer while working on emotional resilience program for adolescent.	<ul style="list-style-type: none"> No of master trainer SHARE has. 	<ul style="list-style-type: none"> SHARE has one master trainer to monitor school facilitators' progress and give them feedback time to time. 	<ul style="list-style-type: none"> Master trainer helped the school facilitators in day to day activities.
Output 06: SHARE will have trained school mental health facilitators.	<ul style="list-style-type: none"> No of trained school facilitators. 	<ul style="list-style-type: none"> 11 trained school facilitators. 	<ul style="list-style-type: none"> SHARE has master trainer to conduct training for programme facilitators. CORSTONE Training manual use to conducted the training sessions.
Output 07: SHARE will have girls & boys groups with whom facilitators work on emotional resilience program.	<ul style="list-style-type: none"> No of groups SHARE formed. 	<ul style="list-style-type: none"> SHARE formed 33 new groups in the schools both girls groups & boys groups. 	<ul style="list-style-type: none"> Every year, schools give permission from July onwards as schools re-opens. Male 13 groups and Female 20 groups.
Output 08: Group activities will be in functional in the colleges/schools as per the plans	<ul style="list-style-type: none"> No of groups activities taken place. 	<ul style="list-style-type: none"> 303 groups activities taken place in 33 adolescent groups during the period. 	<ul style="list-style-type: none"> All the group activities taken place in the school levels.
Output 09: SHARE will have pamphlets/IEC materials/workbooks for adolescents/students.	<ul style="list-style-type: none"> Pamphlets and IEC materials. 	<ul style="list-style-type: none"> Project provided the workbook, pamphlets and IEC materials to be used for the programme. 	<ul style="list-style-type: none"> Workbook had the content of lesson.
Output 10: School facilitators &	<ul style="list-style-type: none"> No of adolescents 	<ul style="list-style-type: none"> 540 adolescents participated in 	<ul style="list-style-type: none"> Summer break, exams and in new admission in

students will be aware about the mental health disorders and strategies to increase their own mental health.	participating in emotional resilience program.	youth resilience programs.	schools hamper the sessions to be taken place.
Output 11: Project will have Network System with the Government Hospitals while working in the field of mental health promotion.	<ul style="list-style-type: none"> ▪ No of CHCs/PHC project work with while doing mental health education in the communities. ▪ No of linkages SHARE has to network with Govt. Mental Hospital 	<ul style="list-style-type: none"> ▪ SHARE has working relation with 3 PHCs and deliver mental health messages in ANMs session days. ▪ Project strengthens networking with Govt. Mental Hospital, Bareilly and Govt. Hospital, Moradabad. 	<ul style="list-style-type: none"> ▪ Project has good reputation in the primary health centres as they see project mobilization in the grass root level. ▪ Govt. Mental hospital supporting SHARE initiatives on mental health and treating mentally ill people of our communities.
Output 12: IEC Materials: Project will have IEC materials to facilitate/ address the mental health issues and it help in capacity building of stakeholders.	<ul style="list-style-type: none"> ▪ No of IEC materials project have developed. 	<ul style="list-style-type: none"> ▪ Project developed 05 IEC materials to conduct mental health activities in the field level. 	<ul style="list-style-type: none"> ▪ SHARE IEC materials are in pictorial forms and same time give information about Depression, Anxiety, Epilepsy, Schizophrenia, sleeping disorders and substance abuse.
Output 13: ANMs & ASHAs (Government team) give support to mental health programme.	<ul style="list-style-type: none"> ▪ No of ANM centres functional in the communities. 	<ul style="list-style-type: none"> ▪ Project reached 78 ANM centres during period and ANMs are providing support to the mental health programme. 	<ul style="list-style-type: none"> ▪ Project has working relationship with Govt. ANMs.
Output 14:	<ul style="list-style-type: none"> ▪ No of villages 	<ul style="list-style-type: none"> ▪ 49 new villages 	<ul style="list-style-type: none"> ▪ SHARE covered the

Stigma & discrimination relate to mental health will reduce in the communities.	<p>SHARE team reached to reduce stigma & discrimination on mental health.</p> <ul style="list-style-type: none"> No of volunteers identify/attend meetings to reduce stigma & discrimination of their respective communalities. 	<p>SHARE team reached out and did the programme in 21 villages during April to March 2020.</p> <ul style="list-style-type: none"> 37 volunteers identified to reduce stigma & discrimination. 39 volunteers attended the meetings. 	villages of 08 blocks comprising 04 from Bijnor district and 02 from Moradabad district.
Output 15: Families of PLWMDs have confidence to visit Govt. Mental Hospital Bareilly/Moradabad.	<ul style="list-style-type: none"> No of times families groups travel to Govt. Mental Hospital Bareilly. 	<ul style="list-style-type: none"> 51 times families groups-care givers travel to Govt. Mental Hospital 526 families' members involve in this. 	<ul style="list-style-type: none"> SHARE organized the trips every Tuesday to Mental Hospital Bareilly.
Output 16: There will be mass awareness in the communities about the mental illness, care & treatment.	<ul style="list-style-type: none"> No of mass awareness still present in the communities. 	<ul style="list-style-type: none"> World Suicide Prevention Day programme on 10-09-19. World Mental Health Day programme have been organized on 10-10-2019. 	<ul style="list-style-type: none"> Many affected families of mental illness have contacted SHARE centre and become the part of mental health programme through group meetings. During the reporting period 1927 community people (Male 1375 and Female 552) visited the SHARE Mental Health Centre.
Output 17: Accessibility of PPSDs (communities) in Govt. Mental Hospital will increase.	<ul style="list-style-type: none"> No of PPSDs accessed the facilities of Govt. Mental Hospital. 	<ul style="list-style-type: none"> 300 New PPSDs (191 Male & 109 Female) & 929 repeat cases (Male 531 & Female 398) PPSDs accessed the facilities of 	<ul style="list-style-type: none"> Both CMDs & SMDs have included in this. April to March 2020.

		Govt. Mental Hospital, Bareilly.	
Output 18: The skills of family of PLWMDs will improve in the communities setting.	<ul style="list-style-type: none"> No of family of PSDs' skills have been improved. 	<ul style="list-style-type: none"> 453 families of PPSDs skills have been improved. 	<ul style="list-style-type: none"> Through house visits strategy in the communities.
Output 19: Openness to PLWMDs who are living in various communities.	<ul style="list-style-type: none"> No of families of PPSDs talk about mental problems. 	<ul style="list-style-type: none"> 352 families of PPSDs are opened up and started treating of their mentally ill person in their families. 	<ul style="list-style-type: none"> Through care plans.
Output 20: CBOs members capacity will enhance that they may have knowledge & skills on mental health.	<ul style="list-style-type: none"> No of CBOs motivate care & support for PPSDs No CBOs start of early identification of PLWMD. No of CBOs visited mental hospital Bareilly. 	<ul style="list-style-type: none"> 41 CBOs motivate care & support for PPSDs 36 CBOs started of early identification of PLWMD. 04 CBOs visited mental hospital Bareilly. 	<ul style="list-style-type: none"> Project helped the CBOs to understand what is mental health and why community people visits wrong places like bhagats/witchcraft to get solutions and how can CBOs play key roles in the communities to overcome it.
Output 21: CBOs will be familiar about the services available in the mental health service centres (Government or private).	<ul style="list-style-type: none"> No of CBOs familiar with mental hospital Bareilly. 	<ul style="list-style-type: none"> 330 CBOs familiar with mental hospital Bareilly. 	<ul style="list-style-type: none"> SHARE focused community based mental health programme therefore motivating CBOs to be part of mental health initiatives and CBOs are turning up with this. Project facilitated the CBOs members visits in mental hospital.
Output 22: CBOs will Support to improve livelihoods e.g. small business, micro-enterprise.	<ul style="list-style-type: none"> No of CBOs access the loans from their groups. 	<ul style="list-style-type: none"> 12 CBOs access the loans from their groups. 22 CBOs members have been started livelihood activities. 	<ul style="list-style-type: none"> CBOs have capacity to have interred loaning within the group itself.
Output 23: CBOs' participation will	<ul style="list-style-type: none"> No of CBOs participation 	<ul style="list-style-type: none"> 07 CBOs participation 	<ul style="list-style-type: none"> CBOs also access loans from micro finance

increase in income generating activities.	increased in income generating activities.	increased in income generating activities.	company as their engagement increasing in the community circle.
Output 24: 1500 household will be sensitizing on the issue how alcohol consumption affects a person and his family life as well as community	<ul style="list-style-type: none"> No of community sensitize on alcohol problems. 	<ul style="list-style-type: none"> 04 communities sensitize on alcohol problems. 	<ul style="list-style-type: none"> So far we didn't make the progress where to send if family willing to rehabilitate such people.
Output 25: Community will be aware about sign & symptoms of TB and DOTs.	<ul style="list-style-type: none"> No of villages participated in GKS meetings. No of participants in GKS meetings. 	<ul style="list-style-type: none"> Main stakeholders of 09 villages participated in the 09 GKS meetings. 224 stakeholders participated in TB Awareness meetings. 	<ul style="list-style-type: none"> SHARE Project carry on Project Axshya in 02 districts- Bijnor & Moradabad. VHSNC members are the part of TB Awareness meetings.
Outputs 26: Poor & Marginalized houses will be reach out by Door to Door campaigning in the remote villages.	<ul style="list-style-type: none"> No of houses reached out by door to door to campaigning. 	<ul style="list-style-type: none"> 21390 houses have been reached out during the reporting period. 	<ul style="list-style-type: none"> These house visits comprising of 03 blocks of Bijnor visits.
Output 27: Referrals to the nearest DMCs will be increase and suspected cases reached to the nearest DMCs & have sputum examination.	<ul style="list-style-type: none"> No of referrals made. No of suspected cases reached to the nearest DMCs & have sputum examination. 	<ul style="list-style-type: none"> 187 referrals made during the 06 months. 69 suspected cases reached to the nearest DMCs & sputum examination. 	<ul style="list-style-type: none"> Referrals made in the GKS meetings and Axshya Samwad (House to House visits). Project has linkages with the 05 DOTs microscopic centres (DMCs) for the sputum examination.
Output 28: Sputum sample collected and transported to the nearest DMCs.	<ul style="list-style-type: none"> No. of sputum detected as smear 	<ul style="list-style-type: none"> 09 sputum detected as smear positive. 	<ul style="list-style-type: none"> ASHA workers of the respective villages become the DOTs providers.

	positive.		
Output 29: New Sputum Positive (NSP) will be deducted from the marginalised communities.	<ul style="list-style-type: none"> No of NSP registered on DOTs. 	<ul style="list-style-type: none"> 09 NSP registered on DOTs. 	<ul style="list-style-type: none"> Sputum sample collected from the rural villages and transported to the nearest DMCs, such DMCs covered 07.
Output 30: Training of Adult Literacy Facilitators	<ul style="list-style-type: none"> No of trainings No of AL Facilitators trained. 	<ul style="list-style-type: none"> 12 training for Adult Literacy Facilitators. 	<ul style="list-style-type: none"> All trainings taken place in SHARE centres.
Output 31: Literacy Survey in the villages.	<ul style="list-style-type: none"> No of survey in the communities. No of women covered. 	<ul style="list-style-type: none"> 05 AL surveys in the communities. 152 women participated. 	<ul style="list-style-type: none"> Survey motivated the women to know more about the AL programs and make the enrolment for the same.
Output 32: Opening of Adult Literacy Centres in the communities.	<ul style="list-style-type: none"> No of AL centres opened in the communities 	<ul style="list-style-type: none"> 03 AL Centres opened in the communities. 	<ul style="list-style-type: none"> 22 AL centres in 20 Gram Panchayats.
Output 33: Online application for PWDs	<ul style="list-style-type: none"> No of online Application 	<ul style="list-style-type: none"> 612 online Application 	<ul style="list-style-type: none"> April 19 to March 2020
Output 34: The PWDs assessment of ENT & MR from Moradabad.	<ul style="list-style-type: none"> No of PWDs assessment from Moradabad Govt. Hospital. 	<ul style="list-style-type: none"> 87 PWDs assessment from Moradabad 	<ul style="list-style-type: none"> April 19 to March 2020
Output 35: The Disability Entitlement for PWDs.	<ul style="list-style-type: none"> No of Disability Entitlements. 	<ul style="list-style-type: none"> 359 PWDs Disability Entitlements. 	<ul style="list-style-type: none"> April 19 to March 2020

Purpose-Outcomes:

What was Scheduled	Indicator	Progress Made	Explanatory Narrative
Purpose No. 01: To increasing mental health (knowledge &	<ul style="list-style-type: none"> No of college/schools have 	<ul style="list-style-type: none"> 08 college/schools have included 	<ul style="list-style-type: none"> This is the 05th year SHARE implementing the emotional resilience

skills-emotional resilience program) and resilience among adolescents in colleges/school and community levels.	<p>included for mental health-emotional resilience program.</p> <ul style="list-style-type: none"> • No of Master trainer trained. • No of School facilitator trained. • No of adolescent have enrolled in the programs 	<p>for mental health-emotional resilience program.</p> <ul style="list-style-type: none"> • 01 master trainer trained for emotional resilience program. • 11 School facilitators re-orientated ▪ 540 adolescent have enrolled in youth resilience programme. 	<p>program in the schools and this is the add up learning experience for SHARE team.</p> <ul style="list-style-type: none"> ▪ CORSTONE has been providing resource materials.
<p>Purpose No. 02:</p> <p>To strengthen government primary mental health services of 3 CHC/PHC of Seohara block by end of 3 years.</p>	<ul style="list-style-type: none"> • No of CHC/PHC have included in mental health programme. • No of networking with Govt. Mental hospital. • 80% ANMs, ASHAs Workers know what is mental health and mental illness. • 70% of VHSNC (50/71) know about mental health problems & have plans to help their communities 	<ul style="list-style-type: none"> • 3 PHCs have been approached in this regards and they are positive to work on this. • 28 ANMs of Seohara block have educated on mental health. • 120 ASHAs of Seohara block have educated on mental health. ▪ 31/60VHSNCs are made aware about mental illness. 	<ul style="list-style-type: none"> • 2 PHCs are additional one while Seohara PHCs is main one which also functioning as community health centre. ▪ On ANMs session day project team do mental health education with the ANMs. ▪ Some of the VHSNCs are not functioning at all however in such cases project approach Gram Pradhans and sometime it is because of village politics.
<p>Purpose No. 03:</p> <p>Empower People Living with Mental</p>	<ul style="list-style-type: none"> • No of PLWMDs are benefited by SHARE 	<ul style="list-style-type: none"> • 300 new PPSDs and 929 PPSDs 	<p>Project has monitoring system to make follow ups of the PPSDs.</p>

<p>Disorders (PLWMDs) and their families with skills and have knowledge for mental health.</p>	<p>mental health programme.</p> <ul style="list-style-type: none"> • No of families are aware about schizophrenia, epilepsy, substance abuse, depression, anxiety, sleeping disorders etc. • Number of PWMD who have accessed care at least once – since April 2015 • Number of people (CMD/ SMD/ epilepsy) who have attended Bareilly with team more than three times. • Number of people who now attend Bareilly regularly on their own- need to be work out. • Number of people who have resumed usual house or field/ mazdhuri responsibilities after starting treatment. • Number of PWMD who have returned to paid work. 	<p>(repeat) are benefited by SHARE mental health programme during April to March 2020.</p> <ul style="list-style-type: none"> ▪ 468 families of PPSDs are opening up in the problems of mental health and currently SHARE has mentally ill persons from 06 blocks. ▪ 300 PPSDs accessed once. ▪ 226 (CMD/ SMD/ epilepsy) attend more than 03 times. ▪ 127 PPSDs are regular on their treatment by their own efforts. ▪ 212 PPSDs resumed their work. ▪ 136 PPSDs returned to paid work. ▪ 87 epilepsy return to work. 	
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	<ul style="list-style-type: none"> • Number of people with epilepsy who have returned to work (including house responsibility and paid work). • Number of people with epilepsy who have returned to school or study. • Number of people with epilepsy who have died with a seizure related death. • Number of PWMD who have died prematurely linked to their mental illness. 	<ul style="list-style-type: none"> ▪ 08 epilepsy return to school. • No epilepsy who have died with a seizure related death. 	
<p>Purpose No. 04:</p> <p>To strengthen the 50 CBOs of Seohara block to increase skills in mental health literacy, first aid and positive mental health.</p>	<ul style="list-style-type: none"> ▪ No CBOs will function as a social support group in the communities for PPSDs/PWDs. ▪ No of CBO members have increased knowledge and understanding of mental illness ▪ No of CBO have increased openness and reduced discrimination to PLWMD 	<ul style="list-style-type: none"> • 34 CBOs functioning as a social support group in the communities. ▪ 276/354 CBO members knowledge & understanding have been improved through CBO meetings by using the pictorial picture and descriptions of mental ill persons. 	<ul style="list-style-type: none"> • There are good presence of CBOs in the villages and same time they are good support in reaching to the mental ill person in the communities. ▪ CBOs helped them to make visits in Mental Hospital.

	<ul style="list-style-type: none"> ▪ Utilization of services in the mental facility- Mental Hospital, Bareilly. 	<ul style="list-style-type: none"> • CBO members have basic understanding of mental illness. ▪ 14 CBO have increased openness and reduced discrimination to PLWMD 	
<p>Purpose No. 05:</p> <p>To improve the reach, visibility and effectiveness of RNTCP through SHARE Project support in Bijnor.</p>	<ul style="list-style-type: none"> • No of network with DMCs SHARE has for referrals in 02 districts. • No of community people SHARE reached during the reporting period. • No of new TB patients deducted by SHARE Project. ▪ No of TB patients registered in DOTs programme for free medication. 	<ul style="list-style-type: none"> • SHARE made network & it's working relationship with Govt. 03 DMCs for referrals from communities. • SHARE made 21390 houses aware about TB in the communities. • 09 new TB patients have been deducted by SHARE. ▪ 09 TB patients have been registered in DOTs programme during the reporting period. 	<ul style="list-style-type: none"> • SHARE Project working in 03 blocks of Bijnor. • 21390 houses in Bijnor district. • April 2019 to March 2020. • SHARE Society having the network with 03 DOTs centre.
<p>Purpose No. 06:</p> <p>To promote disability entitlements for the PWDs in the community circle.</p>	<ul style="list-style-type: none"> • No of PWDs got disability entitlements from the Govt. authority 	<ul style="list-style-type: none"> • 612 PWDs got disability entitlements from the CMO office Bijnor. • 359 PWDs have been received disability 	<ul style="list-style-type: none"> • PWDs have been directed facilitated by SHARE Society to the concern Govt. doctors for the assessments. • April 2019 to March 2020.

		entitlements from the CMO office, Bijnor.	
Purpose No. 07: To run computer based functional adult literacy programme for 100+ rural women	<ul style="list-style-type: none"> No of rural women completed 3 primers of the literacy 	<ul style="list-style-type: none"> 70 rural women completed 3 primers of adult literacy classes. 	<ul style="list-style-type: none"> 03 Literacy Centres have been ran by SHARE Society during the year.

Goal:

What was Scheduled	Indicator	Progress Made	Explanatory Narrative
To promote positive mental health & resilience among people in BIJNOR district, building on resources in the communities School facilitator trained.	<ul style="list-style-type: none"> De-stigmatize mental health problems from semi urban and rural communities of BIJNOR. Increase PLWMD' participation' in their community circle. Increase help seeking/ presentation to health services of PLWMDs Increase openness and disclosure of mental illness. Increase emotional resilience skills among adolescents. 	<ol style="list-style-type: none"> 556+ families support the mental health programme have been De-stigmatizing in the semi-urban and rural communities as informal community care and self-care among mentally ill people & family members have gone up through SHARE community based mental health programme. 1441 PPSDs are confident to 	<ul style="list-style-type: none"> When communities experience that PLWMDs are getting counselling, support/care or treatment in the mental health services and this surely De-stigmatizing in the communities. The role of care giver in the families is very important that PPSDs can continue the medication as per Psychiatrist advice. SHARE started the work from 01 block in 2014 but now project getting mentally ill people from 06 blocks of Bijnor and from

		<p>access Govt. mental hospital facilities to treat their mental illness through family support.</p> <p>3. From 178 village, PPSDs have been visited the mental hospital and community are aware about it. These success stories setting good example of reducing stigma & discrimination to mental health.</p> <p>4. 2167 PPSDs have been identified in the communities. Through their families participation, messages have been gone to the communities that mental illness are treatable and out of it 1434 PPSDs accessed the mental health</p>	<p>02 blocks of Moradabad and this is the positive impact of community based mental health work.</p> <ul style="list-style-type: none"> ▪ Free treatment from Govt. mental hospital during the year for new patients. ▪ CMD 33 accessed the treatment. ▪ SMD 127 accessed the treatment. ▪ Epilepsy 140 accessed the treatment. ▪ 929 PPSDs (Male 531 and Female 398) repeat cases accessed free treatment from Govt. mental hospital during the reporting period. ▪ April 2019 to March 2020.
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		<p>facilities since the beginning (2013).</p> <p>5. 6079 times repetition by PPSDs in order to take regular medication from mental hospital since the beginning (2013).</p> <p>6. 724 adolescents' youth resilience skills have been increased in the communities.</p> <p>7. 540 adolescent's youth resilience skills have been increased in the communities.</p>	
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4.0 Project Participant/Stakeholder Analysis:

The relationship building is one of the strategies of SHARE therefore from the beginning SHARE remained very much committed to have relationship with primary, secondary and tertiary stakeholders and same time reaching to the poor people living in various communities of the rural villages. We aimed to enhance their ability to cope with the mental health problems and empower & build the capacity of the poor families and landless labourers that they may address their mental health problem, resilience skills among adolescents and saving habits among poor community people through CBOs, utilization of mental hospital facilities.

Who are the main people and groups involved in the community development process?	How are they affecting the project, and what role are they playing in bringing about the desired changes?
1. Psychiatrists in Govt. Mental Hospital-Bareilly, UP	<ul style="list-style-type: none"> The psychiatrists see every Wednesday PPSDs mainly referred from Bijnor district by SHARE and this bring

	<p>positive changes in the lives of mentally ill and their family members.</p> <ul style="list-style-type: none"> Because of Govt. mental hospital help's SHARE able to bring changes among vulnerable families facing uncertainties of mental illness as a major disease burden.
2. Chief Medical Officer/Medical-in-charge of CHC/PHC	<ul style="list-style-type: none"> Bijnor has now new CMO, SHARE need time to build relationship with new CMO. First quarter report of new PPSDs who accessed the medication from Govt. Mental Hospital submitted to the CMO office.
3. People with Disability (PWDs)	<ul style="list-style-type: none"> 359 PWDs got disability entitlement from the CMO Office Bijnor directly referred by SHARE and most of the cases even assessed by Govt. Hospital Moradabad.
4. ANMs – Government (25)	<ul style="list-style-type: none"> They became the instrument to increase the immunization rate among children less than 2 years and ANC/PNC coverage to benefit the pregnant women & lactating mothers respectively in the targeted villages. So project also did awareness for ANMs on mental health and provided the resource kits to them. The ANMs certainly help the community people in identification of mental illness in their day to day work in the communities circle.
5. ASHAs workers (70)	<ul style="list-style-type: none"> Some of the ASHAs workers taken the mental ill persons to the mental hospital along with the SHARE team and this good example of other ASHAs workers that if in their village they such people they can also help the community to take them in mental health facilities. The ASHAs workers are the efficient community health worker in the villages.
6. Aganwadi Workers (43) & Aganwadi Assistant (47)	<ul style="list-style-type: none"> Aganwadi workers are made aware on mental through the training and field level work that how to identify mental health problems in children in the community, how to monitor child growth, how to maintain records in registers for children /lactating mothers if they develop post natal depression. Aganwadi workers will take this skills forward.
7. Rural Health Care Providers (24)	<ul style="list-style-type: none"> They refer the patients to government hospital in case of TB. Earlier they don't do but after receiving training from SHARE they developed these skills. Now they also received training on mental health and project expect that in coming days they will identify the mental ill person from the h and refer them to the Govt mental hospital.
8. Swasthy Mitre (Health Promoter) (54)	<ul style="list-style-type: none"> Many ordinary men/women got opportunity to become health promoter in their respective villages through SHARE work and now they have skills to promote health initiative and refer the patients to the government hospitals.

9. Village Health Guides (VHG) (05)	<ul style="list-style-type: none"> The village health guiders are once unknown to the community people before joining SHARE's programme but now they are much familiar in their respective villages and community people trust them to get help from them.
10. Village Head (Gram Pradhan) (45)	<ul style="list-style-type: none"> Their mental health knowledge have been enhanced to the Gram Pradhans through SHARE work which they will take forward certainly in coming days.
11. DOTs Microscopic Centre (DMCs) (7)	<ul style="list-style-type: none"> 3 DMCs became the partner of SHARE Project to conduct lab. Sputum examination to deduct TB patients from our targeted villages. This will keep on going even when project not working.
12. Community Based Organization (CBOs) Members (987)	<ul style="list-style-type: none"> The various communities have been organized in the CBOs and result of it 90% of targeted villages have been organized in the 93 CBOs. The poor people now have savings in respective groups which they can use in times of emergency and they have linkages with the banks. These groups are the model for the community people how to help themselves.
13. School Teachers (23) & Shiksha Mitre (15)	<ul style="list-style-type: none"> Teachers learnt the importance of mental health education in the schools that adolescents cope the stress, know about self-esteem, avoid bullying among peer groups and if they have mental ill person in their family then they can refer them to the mental hospital etc.
14. Families (430)	<ul style="list-style-type: none"> The behaviours of families towards mental ill persons have been initiated to be changed and become good care giver if they have mental ill person in the family.

How many people in the following groups have benefitted or participated in the project to date?

Category	Number of people		Percentage (of those involved)
	Direct	Indirect	
Men (over 18 years old) – non disabled	4610	7621	34.13
Men (over 18 years old) - disabled	80	320	1.12
Women (over 18 years old) – non disabled	6338	13227	54.60
Women (over 18 years old) – disabled	52	208	0.73
Boys (up to 18 years old) – non disabled	254	1270	4.25
Boys (up to 18 years old) – disabled	16	64	0.22
Girls (up to 18 years old) – non disabled	286	1430	4.79
Girls (up to 18 years old) – disabled	12	48	0.17

TOTAL	11648	24188	100.00
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We sought feedback from participants, stakeholders and beneficiaries in our project while working with them in fields or through meetings time to time we or they conducted. Yes, we had feedbacks from project participants or others with an interest in the project.

The feedbacks SHARE received & What we do about the feedback we received?

- SHARE make the changes in its planning or implementation of the programme based on the stakeholders/beneficiaries' feedbacks, e.g. SHARE time to time encourage care giver/family member of PLWMDs to follow the psychiatrist advice when to stop medication or have side effects of the medicines.

Yes SHARE encouraged the active participation of people who are often excluded from community or development activities, For example, people with disabilities in SHGs, SC, OBC women & older community members in CBOs.

Section E Impact and Sustainability Analysis:

E.1 Impact - List the main changes that you outlined in your original proposal in the table below and give a comment on the progress towards the changes. Think about the evidence you have for progress, factors that are inhibiting progress, and include numerical information (eg how many men, women, children), where appropriate. If it helps to explain the changes taking place, you could tell a story or provide a case study. You can refer to it in the table and add more information after the table or as an appendix.

Specific long term changes that the project will try to achieve (from original proposal)	What signs of these changes can be seen as a result of the project's work?
1. The communities are now well aware that so many mentally ill people go mental hospital for the treatment and the number of patients are also coming from blocks Bijnor as well from Moradabad district.	Reducing stigma & discrimination related to the mental health, e.g., Community people are not hesitating to take their family member who having mental illness to the mental hospital.
2. The communities may identify their local infrastructures that refer to physical resources such as public facilities especially mental hospitals, concerns development offices, ICDS, Bank etc, that community may access the facilities and be empowered.	<p>SHARE so far identified 1273+ PPSDs in 172 villages through community mental health awareness programmes, CBOs meetings, house visits etc. and same time developed the networking with the Mental Hospital- Bareilly and Govt. hospital- Moradabad to refer the cases over there and this direction project has been succeeded very well and during the reporting period SHARE organized 51 trips to the Mental Hospital Bareilly. in which 300 New Mental Ill people (Male = 191 & Female= 109) are facilitated to consult Psychiatric and get free medicines for the treatments.</p> <p>Communities have been mobilized through this programme and family members of mentally ill people started making re-visiting (follow ups) to the mental hospital which demonstrates that</p>

	<p>mental ill people are getting benefit of Govt. Supplied medication. Altogether 1056 people travelled with us to reach the mental hospital in those 51 trips.</p> <p>72 mentally ill people are going directly to the mental hospital Bareilly.</p>
3. Local network system will be developed among CBOs, community motivators, Panchayat/ influential leaders, village health & sanitation committees (VHSC), PHC staff to work together for the issues of Mental Health.	SHARE did the awareness on mental health in the targeted villages that the People Living with Mental Disorders (PLWMDs) may be supported by CBOs, ANMs, ASHAs workers, Aganwadi workers, community motivators etc. We will list signs of CBO involvement and promise for the future of the mental health work without SHARE in the picture.
4. Positive mental health seeking behaviour in the lives of the people will enable them to make better choices for themselves and there will be better access to affordable mental health care.	The community's knowledge and understanding have been improved on the mental health like what is mental health, causes of mental health, types of mental health and about the treatment of mental health this may take the communities forward on mental health.
5. The participation of community people in government health system enable CHC/PHC and sub centre keep on functioning.	The participation of community people in government mental health system has been increased by SHARE on-going programmes.
6. Community organization' skills will be enhanced that they play key roles for economic development of their respective communities.	The community-based organization has generated the confidence among themselves. The CBOs members also developed qualities like group relation, group commitment, group ability, group leadership along with the saving. 1077 community members have been organized in 93 CBOs which comprising of rural women and most of them are poor and belong to SC, OBC & Muslim communities. This lead to develop the confidence among women that they play major roles in family decision making in terms of health, children education, gender discrimination etc.
7. CHC/PHC ANMs will be more committed in health service delivering in the rural communities as their skills will be enhanced.	The movements of ANMs have been gone up in the targeted villages with the networking of CHC/PHC.
8. Advocacy will become effective tool for problem solving that community groups can use and local advocates who will make plans to update information on	Community based organization- CBOs have been developed certain skills to do advocacy at their village level, this may grow as time advance.

health & development schemes to ensure accessibility.	
9. Government organizational and administrative structures including policies, regulations and incentives will be exposed with stakeholders of the programme that the flow of the information is reaching to the communities and they make continue benefit without implementing partner involvement.	Project facilitated community people that they understand government structure like block office, Tehsil, district development offices, ICDS office administrative structures.

E.2 Are there changes that have occurred that have surprised you, or which were not planned? These might be positive or negative changes. Explain what occurred and why you think these changes happened.

1. Block office making lot of efforts to form BPL groups for women in the communities.
2. Toilet construction taking place in the communities by Government efforts.
3. 108 ambulance services are available that community people may ask for it in time of emergencies.

E.3 To what extent has the project contributed to bringing about lasting change by influencing the policies and practices of those in positions of power (i.e. from being involved in advocacy)? If you don't have direct evidence that you have changed policies and practices please report against the questions below:

- Describe any increase in the ability of communities / beneficiaries / partners / to approach, and access, government?
- **Accessibility of services from Mental Hospital:**
Family members are taking more efforts to take their PLWMDs (people living with mental disorders) to the Govt. metal hospital, Bareilly as SHARE impacted the community in terms of deduction the cases of mental health problems, thereof in order to mobilizing the communities that they may access the services from the mental hospital of free of costs.
- **Positive Mental Health:**
The community's knowledge and understandings have been improved on the various mental health issues like mental tension, depression, anxiety, epilepsy, headache, mania, insanity, phobia, aggressive behaviour, substance abuse, schizophrenia, dementia, family tension, mental retardation etc., this may take the communities forward on mental health seeking behaviour.
- Explain any increase in the dialogue between communities / beneficiaries / partners, and government?

SHARE increased dialogue with CMO Bijnor about the community based mental health programme.
- How has provision of, and access to, government services by communities / beneficiaries / partners been improved?

These are the main provisions have been reached to the communities by the government services.

- Jannani Suraksha Yojana (JSY): JSY under the overall umbrella of National Rural Health Mission (NRHM) play a significant role in reducing the maternal and infant mortality rates by increasing the number of institutional deliveries among the women from poor families. The number of institutional deliveries has been increasing in Seohara block through the effective intervention of the project.
- Integrated Child Development Scheme (ICDS): Under this scheme most of the villages getting benefits of ICDS.
- ANMs Services increasing the rate of child immunization and ANC in the villages.
- Several bank accounts have been opened under pradhan mantri jan dan yojana for the women.

E.4 Sustainability - Think about the changes that have already taken place, as well as the ones you hope will take place;

SHARE Project carried out its community based mental health & development programs in 171 rural villages of Seohara block & nearby blocks with specific strategy that is integrated approach, community mobilization/working group- CBOs and participation of rural women within the programme. Project primarily focused on empowering of poor people basically landless. Empowering various targeted communities like SC, Saini, pal, kumar & Muslims by enhancing their ability to cope with mental health problems which they see in their respective communities. Other side to increase the accessibility of mental health care for the PLWMDs and working with adolescents.

The following changes taking place ensuring the sustainability of the programme.

- SHARE has developed many of local volunteers from the communities and their capacities have been enhanced over the period with the project work.
- The facilitations have been provided to the communities that they may identify their local infrastructure that refer to physical resources such as public facilities like mental hospitals now communities have become empowered to access these facilities with the confidence.
- Local network system has been developed among CBOs, community motivators, village health & sanitation committees (VHSC), PHC staff to work together for the issues of Mental health and it is happening especially in case of deduction the cases of PPSDs.
- Positive health seeking behaviour in the lives of the people is taking place which leading them to access mental health from Govt. mental health facilities.
- The participation of community people in government health system have been increased that enabling CHC/PHC and sub centre keep on functioning.
- Community organization' skills have been enhanced over the period of project cycle SHG members have scope to take loans from the groups and this playing key roles for economic development of their respective communities.
- The project strengthened the capacity of local community, community leadership and motivators: like Gram Pradhans (village head), Rural Health Care Providers, school teachers etc.
- The project did capacity building of Accredited Social Health Activist (ASHAs) workers in terms of mental health, house visits and counselling, mental health related information and these will continue in long terms.
- The project has been Strengthened community-based organizations – CBOs in various communities and they will take forward their personal/community problems in coming days.

- The project has been strengthened the government health and development initiatives in the targeted communities like JSY, RNTCP/DOTs, SGSY, RSBY, NREGA, ICDS schemes etc.
- The project programmes have been improved people's access to government, NGO, and other services example formation of BPL SHGs from DRDA, social marketing of condoms and family planning camps with support of world health partners.
- School health teaching provided the enormous opportunity for school children to learn about mental health & basic health practices like cleanliness, hand washing, safe drinking etc.
- The project relation with all levels- individual, family and community-, helped people to work together and take care of each other.
- The project facilitated various training to the local volunteers with the strategy that they may play the leading role in their respective communities in coming time, example mental health training to the volunteers.

E.5 Gender - Think about how the project has made a difference in the lives of women in the communities in which you are working;

- How has the project contributed to changes in the position of women in their households and communities? In what ways have the changes contributed to promoting gender equality? What signs are there of changes in women's position in the communities, their ability to participate in decision-making, access resources and rights, or be involved in the development process?
 - *Gender issues and the differences in status of women and men: CBOs members are stimulated to work to reduce discrimination between male and female. Gender issues even address in college mental health sessions. SHARE mental health programs have been reached to the women through CBOs meetings and adolescent girls of the communities.*

Use case studies or stories to support your ideas where you think it is helpful to do so.

- How is the community, church or other group you are working with, developing the skills to keep changing and growing after the project is finished? What evidence do you have for this? What other things does the project need to do to help ensure this happens?

- The presence of CBOs, ANMs, ASHAs, Aganwadi workers, adolescents in the communities surely takes the changes forward in coming times.
- Families will take it forward that has mentally ill person in their family and experiencing changes in life styles of such people.
- Information centre in Mental Hospital Bareilly where patients or family member



Mental Health Awareness in one of the Muslim School



The group of mentally ill people travelling by train to access the mental health facilities for the treatments facilitated by SHARE



Community Participation in Mental Health Programme



People with Psycho-Social Disability are facilitated to the Govt. psychiatrists for the



People with disability are facilitated to the government hospital and CMO



Muslim Community Participation in Mental Health



Youth Resilience Sessions taking place in the groups as assign in the schools

Press Release toward SHARE



Cross Cutting Issues:

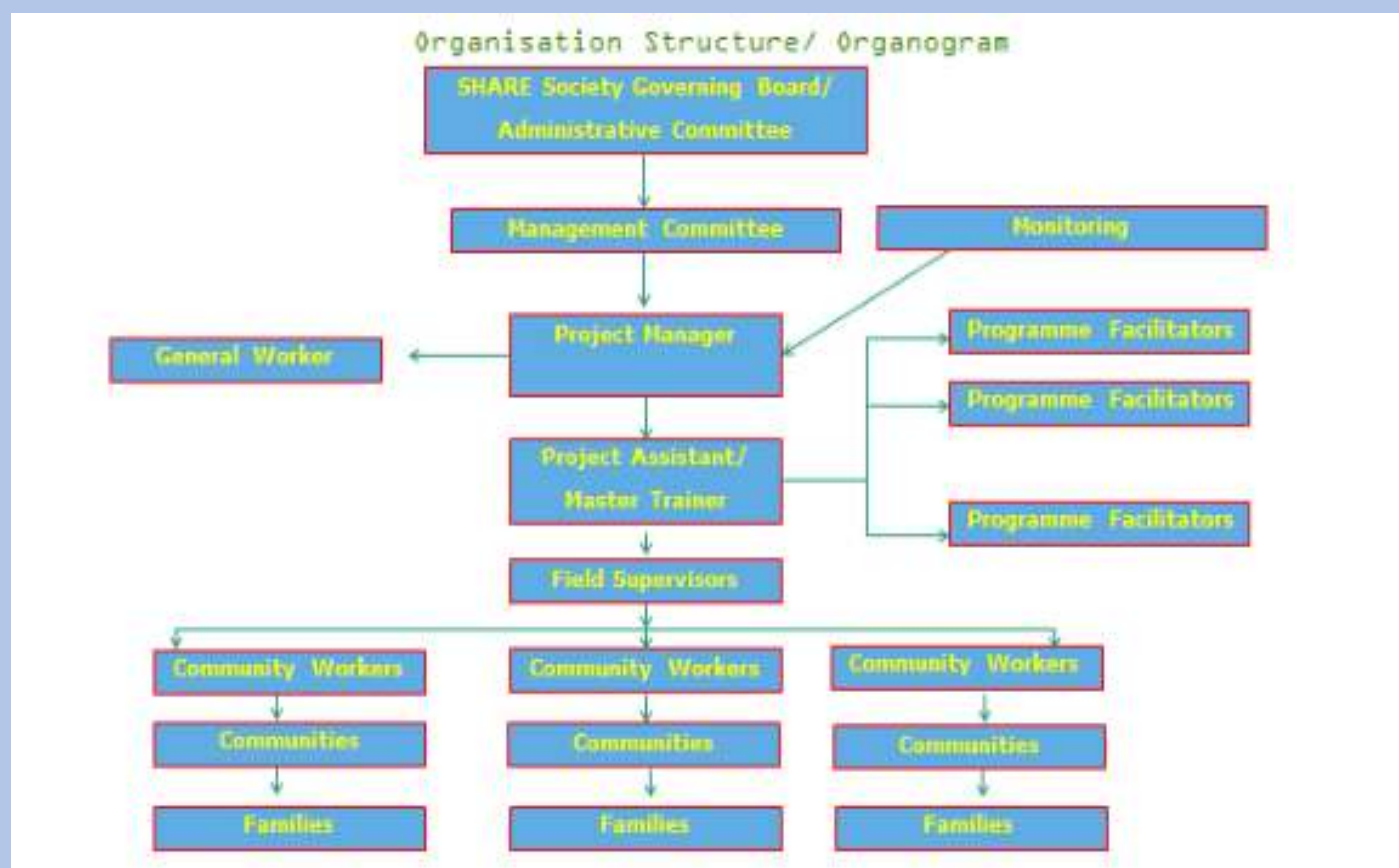
- a. Gender issues and the differences in status of women and men: CBOs members are stimulated to work to reduce discrimination between male and female. Gender issues even address in college mental health sessions. SHARE mental health programs have been reached to the women through CBOs meetings and adolescent girls of the communities.
- b. The special needs of children: Pre-schooling children are focused by the Aganwadi workers.
- c. People with impairment/disabilities: People with Disability (PWDs) are listed.
- d. Conflict: Social inequities and isolation based on caste, religion and community (gender and ability to work) are part of rural life and this creates the conflict in communities.
- e. People affected and infected by HIV: The people living with HIV are not seen in the communities, however SHARE address about HIV/AIDS in the communities.
- f. Disaster Preparedness: Project conducted some of disaster preparedness session in CBOs.

6.0 Lessons Learnt:

1. If a person- male or female suffering from epilepsy and kept hidden at the time of marriage then later marriage break because of fact that they have illness, so community should accept it and make it clear before the marriage to avoid the big problem start after the marriage.
2. In mental health, to know the side effects of the medication also very important to train the family members that at right time they may tell to the psychiatrist.
3. Analysis data of PPSDs help to make proper follow ups plan while working with families having mentally ill person.
4. There are enormous scopes for youth resilience programme to be run in the schools/colleges.
5. Poor People Linkages with Banks: Poor people get linkages with banks through CBOs/SHGs and their saving habits improve.
6. Coordination & Communication through mobile phone: We learn how to improve in this area to gain wide coverage of work on mental health.
7. Project Documentation: Our learning also improved in the documentation and appreciated by monitoring team of CBCI-Card, New Delhi.
8. Project integrity: Project should be honest in what communicating to the community people while working on mental health in the communities that the trust building will be maintain with families of PLWMD.
9. CBOs are an appropriate platform to address the community problem through them.
10. Communities are opening up on the issues of mental health; these will really help in reducing social stigma of suffering families/mental ill people in the villages.
11. Advocacy is an effective strategy that government should provide psychiatric drugs to the CHCs/PHCs.

12. Networking with Mental Hospital is a learning experience for the team as well family members of PPSDs and CBOs.

7.0 Management, Monitoring and Learning:



- Have there been any staff changes during the reporting period that are relevant to this project? **Yes**
- Are there any ways in which the supporting partner can help strengthen and develop your management or leadership capacity? **No**
- How have you monitored the programme's work?
 - Who has done the monitoring? Project Manager
 - How often? Weekly & Monthly basis
 - What is done with the information gathered during monitoring?

It goes to the management information system
- How have community members or project participants and beneficiaries been involved in monitoring the work?

CBOs members, ASHAs workers, ANMs, Aganwadi workers, rural health care providers'
- Has there been a mid-term review or evaluation of the work in the reporting period? What were the main conclusions? What will you do differently as a result of the evaluation?
 - Not during the reporting period, it happened last year.
- What changes to the programme have you made as a result of the monitoring you have done?

The significant changes to the programme have been made:

- Three tier monitoring system have been placed in the field level. The village health guides/animators (field workers) supervise the daily running of the program in the field level. The project assistant with the help of community coordinator or supervisors monitor the functioning of the field worker and program by visiting the targeted village once every 5-7 days. The project manager monitors the program and the functioning of the community coordinator and project assistant by weekly/monthly visits.
- Activities plans have transferred to weekly/monthly plans from annual work plan and this will provide the tools for monitoring the overall Programme.
- The project manager divided field into the 3 areas and staff given the responsibility to be the in-charge of the area that project should monitor practically.
- Coordination has been strengthened within the team through monitoring.
- The movement registers have been placed to monitor staff movement from project office to the targeted communities.
- Programme wise registers have been developed to monitor the project activities monthly wise.
- Through monitoring several team problems have been sorted out like what are team strength or weakness.
- Team member received the feedbacks/suggestions to improve the work on day to day basis.
- Project reached to its target through the monitoring.
- Monitoring helped the team members to make better communication within the team itself.
- The team also learnt the monitoring skills to monitor activities at field level and report to the project manager.
- Monitoring helped the project to collect project outputs/outcomes and to be compiled in the project reports.
- Monitoring even helped to give feedbacks to government people how to work together to achieve the target of mental health, DOTs etc.

8.0 Proposed Changes to the Project:

- SHARE Society has been working on community based mental health & development programme since April 2013 and this programme has now been reached out other blocks of Bijnor apart from Seohara and even nearby districts.
- SHARE Society has been implemented the Disability Entitlements Programme in the rural communities this is the 3rd year the programme has been keep on going.
- This year SHARE decreased the number of adolescent's groups from 66 to 33 in order to conduct Youth Resilience Programs in schools/colleges with the experience of 4 years from CORSTONE foundation, Delhi, supported by SAPHARA Trust.
- Adult Literacy Programme has been continued to finish the target of last year.

8.1 Application of Conditions/Recommendations:

Some of the recommendations by Ms Helen Morgan-a psychiatric nurse.

- Focus more on psychosis patients as they need more care and support.
- Epilepsy cases may be release once they have confidence of taking medication from the different sources.

- Family member of PPSDs should aware the side effects of medication that they adhere on it.

8.2 Good Practices:

Advocacy Communication Social Mobilization (ACSM) in the communities and Documentation.

SHARE Society promoted ACSM meetings in the communities to identify PPSDs as project find it effective tool.

Why this Good Practice?

1. ACSM meetings draw attention of community people to know what are the mental health problems exist among the population through banners and handouts etc.
2. Project penetrated the mental health messages to large number of families through ACSM.
3. ACSM provided the platform to identify PLWMD in the communities.
4. Community decides who will be the non-paid volunteers in respective communities through ACSM meetings.
5. After ACSM meetings it will helpful to make house visits in the communities because people support it.
6. The proper documentation of ACSM meetings takes place by the concern team members with photograph support.

8.3 What unanticipated changes (both positive and negative) has the programme produced?

1. SHARE Project has been regarded good NGO in Seohara especially in Govt. hospital, Block office and ICDS office.
2. Gram Pradhans have been providing support to conduct the mental health awareness activities in their respective Gram Panchayats.
3. Community based mental health & development programme has been reached to the rural villages of Seohara and communities' participations have been ensured in this.
4. SHARE has been able to mobilize the community on mental health in the rural areas of Seohara Block of Bijnor district and started referring the mental ill people to the Mental Hospital, Bareilly, UP.
5. Project able to motivate community based organizations (CBOs) to be instrumental in identifying mental ill people of their communities.
6. Developed mental health training programme for technical groups like ASHAs groups, Aganwadi groups, Rural Health Care Providers (RHCP) Groups, CBOs leaders' groups and Volunteers groups.
7. Project facilitated assistant block office (ADO) visits in BPL SHGs groups and linked these groups to the Govt. Aajivika NRLM schemes.
8. Project facilitated 6 CBOs linkages with the banks and given them identity in their communities.

8.4 What lessons have been learnt about partnership between the Implementing Partner and the Supporting Partner?

The following lessons have been learnt during the programme, which are as under:

1. Timely communication needs to be in place.
2. Supporting partner' proactive responses help implementing partner to keep on going.
3. Appreciating words by the supporting partners always help to take new challenges by the supporting partners.

9.0 Case studies and Stories of Change

Please provide one or two case studies or stories from your project, with photos if possible, that best demonstrate the changes that are occurring as a result of your work in communities and/or churches.

Story No. 01: Mamta



Mamta is 18 years old young woman from Pandiya Mandaio village in Bijnor district. She developed the psychosis symptoms when she was studying in 8th standard. She used to become violent in the class and was beating her classmates. Therefore, her parents discontinued her study. They had been taken her to various places like bhagats local healer and the private doctors for the treatments but no recovery from her psychosis problems. She remained without hope for last 05 years as no proper sleep, most to time running away from home, violent towards children. Her mother always made efforts to find her whenever she used to run away from home to alone in strange places.

Her situations became worse and she was creating more problems to the family members and the people around her. The wife of one of the PPSDs who has been helped by SHARE Mental Health Programme informed us about the Mamta psychosis problems and same time the family members approached to the team and got the counselling about her daughter and same time advice given to them to have psychiatrist visit and in such a way the medication of Mamta started and over the period her psychosis problems came down. Today she is alright; her mother is very happy to see the changes taken place in daughter behaviours, now no need to bother about Mamta as she said Mamta able do most of the household work.



Story No. 02: Valisha

Valisha is from Seohara. She has 06 children. She has been suffering from epilepsy for last 15 years same time they are poor people in the community. She was under the medication for two and half years through SHARE Mental Health Programs. But during her last pregnancy the psychiatrist stopped to give the medications. And after the delivery she again started to have seizures so SHARE team motivated her husband to re-start the medications and as the time passed by she developed the confidence to look after the children with proper care.

Story No. 03: Anupama

SHARE Society



Before

Before the Medication:

She developed psychosis during the pregnancy. Became very unrest like no sleep, running way from home, beating her elder daughter even daughter was frightened by seeing her. No feeding the new born bay.

She run away from the bus the day taking to the psychiatrist.

After the Medication:

Now she is taking care of children, loving them. Paying attention to the family norms and social life and doing household work happily.



After

Story No. 04: Manisha



Manisha is from SC community. Her district is Amhoroha . She has been suffering from epilepsy for last 05 years. She could not go to school due to her seizure problems. One of our beneficiaries helped her to start the medication facilitated by SHARE and this year she re- started her schooling after 05 years.



Case Studies: Mahender



Epilepsy Case: Got head injury due to have seizures. Even this is dangerous for life but today he is under the medication, the step towards to have safer life.

Case Studies: Pritam



SMD Case: He resumed his work of tailoring after 06 years.

Case Studies: Nizamuddin



SMD Case: Such people need long term medications. This is a relapse case. He got back his previous psychosis symptoms like withdrawal from family life, no interest in children even beating them, use bad words to others, violent, sometime become very quiet. No motive for work.

Reflection:



Like him there are so many psychosis people in the community circles but now in our communities there is awareness to take the responsibility of PPSDs and to have care or access to the medications.



The PPSDs are found most of time in the railway stations. They are the misplaced people from homes.



PPSD is in chain. He refuses to take medicines orally. He is very psychotic person. He bother his family members due to his mental problem, therefore they kept him under the chain to control his behaviour.

Adult Literacy Story: Asha Davi



शेयर सॉफ्टा स्योहार

प्रीति शिक्षा कार्यक्रम

शेयर का नाम - पुजा केन्द्र का नाम - बोखेडा

मैं आशा देवी जे. वनाम सिंह, बोखेडा की रहने वाली हूँ। मेरी उम्र ५० वर्ष है। और मेरे घर में पाँच सदस्य हैं। मेरे पास तीन बच्चे हैं। मेरी पति मजदूरी करते हैं। मैं भी गाँव में एक छोटी की मिर्चाना स्टोर की चलाती हूँ।

पहले मेरे मायके में निवाड़ था। किन्तु मुरादाद का होना हमारे घर की आर्थिक स्थिति बहुत कमजोर थी। क्योंकि हमारा परिवार बहुत बड़ा था। हम ठा. बहने और तीन भाई थे। वस ग्यार सदस्यों का परिवार होने के कारण हमारे घर की आर्थिक स्थिति ठीक नहीं थी। जैसे मैं पहले कि शाहरा भी कि ज़रूरतों को पढ़ना बेकार है। हम कारण हमारे घर में हम ठा. बहने में से किसी को नहीं पढ़ाया गया। हमारे तीन भाई पास के गाँव में पढ़ने जाते थे। मैंने छोड़ा बहुत अपने भाई में ही सीखा था। जो कि हमें मेरे भाई घर पर पढ़ता था। तो मुझे भी पढ़ना था। उसे पढ़ना बहुत अच्छा लगता था। उस में पुजा के घर पर [ई. ए. ए. टाय टी. टी. टी.] शेयर सॉफ्टा के माध्यम से चलने वाला प्रीति शिक्षा का कार्यक्रम में भाग लिया। अब मैंने हिन्दी बहुत अच्छे से पढ़ लेनी है। और अब मैंने अपनी दुकान का छोटा मोटा हिसाब-किताब भी अच्छे से लगाना सीख लिया है। पहले मुझे जोड़ घटाव में पेशानी होती थी। पढ़ने से अब मैं इस सबको के नामों से भी अच्छे से लिख लेती हूँ। मैं सुन्दर सुन्दर है। शेयर सॉफ्टा कि जिसने हमारे लिए सोचा मैं धन्यवाद देती हूँ शेयर सॉफ्टा को।

Principal



359 Disable People got Disability Entitlement from CMO office Bijnor, facilitated by SHARE during the period April to March 2020

10.0 Method of counting Beneficiaries:

The implementing partner (SHARE project) has been developed the system that help to calculate the numbers of beneficiaries especially the number of people living with mental disorders (PPSDs) and for that purpose there are number of registers, forms, formats at project office as well as field level. SHARE project staff also verifies concern government agency records physically to cross check and update the beneficiaries numbers. The counting happens monthly, half yearly and annually basis. The village health guides have been given the key responsibilities to count and add new beneficiaries at village level and report monthly basis to the staff in-charge and staff compile the counting in their activities wise registers and transfer the counting in the monthly forms before submitting to the project manager for the office records. Project manager time to time verify the counting from staff registers and compare and analysis where ever the need arise, the contradicting counting and numbers have been nullified at the staff reporting day. To support the counting of beneficiaries the following registers, forms, formats and documents are the part of the programme.

The following methods/documents use for counting beneficiaries, which are as under:

1. Project compile data spread sheet (Computerized)
2. Government Mental Hospital Bareilly' records and CHC/PHC Records.
3. Block development office records.
4. Project Baseline forms.
5. Project Family Planning Registers at village level maintain by the village health guides (VHGs)..
6. Staff in-charge registers/ diaries/note books.
7. Specific activities based project registers.
8. Primary school/Junior high school/high school/Intermediate school attendance registers.
9. Staff school health teaching registers.
10. Women groups meeting attendance notebooks.
11. SHGs document registers
12. Project monthly reporting forms and formats/half yearly/annual reports.

11.0 Quality Standards Verification

This form requires partners to briefly outline how the quality standards were reflected in the project implementation. The questions in normal font refer to core quality standards and all must be answered

brief responses only:	
1. Values	How staffs were made familiar with the organisation's values, the types of unacceptable conduct (e.g . . . exploitation and abuse of children and vulnerable adults, fraud, bribery) and their disciplinary procedures?
<ul style="list-style-type: none"> ❖ Project team became aware about child protection policy within the organization. ❖ Dignity for the people who have mental illness. 	
2. Impartiality & Targeting	How were beneficiaries selected? Describe how this was based on need and on the most vulnerable people being reached.
<ol style="list-style-type: none"> 1. People with Psycho-Social Disability (PPSDs) & PWDs. 2. Poor families/Below Poverty Line (BPL) families comprising schedule caste (SC), other backward class (OBC), and minority group (Muslim), PWDs, landless labour class people etc. 3. The people who don't have proper employment throughout the year. 4. Presence of adult illiteracy member in the family. 5. Big family size more than 5 children in the family 6. Pregnant women and lactating mothers. 7. Malnourished children under 5 years. 8. No proper housing, lack of toilet facility. 9. Family head addicted by alcohol. 10. Domestic violence in the families. 11. Widow families in the community. 	
3. Accountability	How involved were community groups participating in the planning of the project? How openly did staff share information about the project's aims and ensure that people could give feedback about its delivery?
<ul style="list-style-type: none"> ▪ Project will facilitate its programs at the community level to provide opportunity to the staff to interact directly with the beneficiaries and get their participation, so project develop working relationship with the community, follow-ups and feedback mechanism which will ensure community participation within the programme. ▪ The local leaders, community's people, and government officials' suggestion/feedback have always taken into consideration for smooth functioning of the programs. ▪ The community based organization (CBOs) members who are basically community members and project stakeholders comprising of health workers (ANNs, ASHAs & Aganwadi workers) have participated within the programme through monthly meetings or training programmes and their suggestions have incorporated to achieve the common purposes. ▪ Community people' participation have increased in government health/development system through awareness generation programmes and these groups of people have now 	

priority with which project has been working.	
4. Sustainability	<i>What has been the level of sustainability or reliability of the project?</i>
<ul style="list-style-type: none"> ❖ Project did bank linkages of CBOs and these groups are directly linked with the respective circular banks. ❖ SHARE Project facilitated to have accessibility of Government mental hospital Bareilly' facilities to the people Psycho-Social Disability (PPSDs). ❖ TB Patients linkages with DOTS Microscopic Centres (DMCs). 	
5. Advocacy	<i>How has the project addressed local or national policy issues relevant to the project objectives?</i>
Project working on community based mental health programme and for this programme project do local level advocacy and at national level as well.	
6. Children	<i>How has the project prevented an increase in the vulnerability of children? How has the project supported child development and protected them from harm?</i>
Through Emotional Resilience Programme- CORSTONE & CBOs presence in the communities.	
7. Gender	<i>How has the project prevented an increase in the vulnerability of women? How has the project promoted inclusiveness of both men and women, and enhanced the safety of women and girls?</i>
Through CBOs.	
8. HIV	<i>How has the project prevented an increase in the vulnerability of people to HIV? How has the project reduced people's likelihood of becoming more vulnerable to HIV?</i>
Through community meetings in the rural villages.	
9. Environment	<i>How has the project ensured it is not contributing to environmental degradation? How has the project reduced environmental damage and increased positive environmental outcomes?</i>
Through Community Based Organizations.	
10. Disaster Risk	<i>How has the project built up community capacity and addressed long-term vulnerability to disasters?</i>
Through School Training Programme.	
11. Conflict	<i>How has the project avoided heightening tension or making people more vulnerable to physical harm? How has the project promoted peace and reconciliation?</i>
Through Community Based Organizations.	
12. Technical Standards	<i>How has the project ensured that its outputs are of a good technical standard?</i>
Authentic Project Records & Reports.	

12. Project Team: 2019-2020

12.1 SHARE Team Profile:

S. No	Name	Responsibilities
1.	Mr David Abraham	Project Manager
2.	Mrs Kalawati Abraham	Project Assistant
3.	Mr Sanjay Singh	Field Supervisor
4.	Mr Arun Kumar	Field Supervisor
5.	Mr Mr Rohitash Kumar	Disability Programme Facilitator
6.	Mr Arun Kumar - Tajpur	Mental Health Programme Facilitator
7.	Km Farah, Km Preeti, Km Shobha Km Shumayala, Km Jaraha & Km Dimple, Km Renu, Km Meena, Smt. Vidhushi, Km Sallu and Km Sonam	11 Youth Resilience Programme Facilitators
8.	05 Prerak (Facilitators)	To conduct Adult Literacy Programme

12.2 SHARE Unit Management Committee Members 2019-2020:

1. Dr. George Clarence – UMC Chairman
2. Ms. Margaret Kurain – EHA Representative
3. Mr. David Abraham – Project Manager
4. Mr. Papa Rao- LCH Finance
5. Mrs. Madhu. P. Singh – Co-opted/Director OPEN
6. Mrs. Clement C. Singh – Local Representative/Principal

12.3 SHARE Society Governing Board Members 2018-2019:

1. Dr. Joshua Sunil Gokavi – Chairman
2. Mr. David Abraham – Secretary
3. Mr. M. Papa Rao – Treasure
4. Mrs. Margaret Kurian – Member
5. Dr. George Clarence – Member
6. Dr. Pratibha Esther Milton – Member
7. Mr. Abhishek Lyall – Member
8. Dr. Mathew Samuel – Member
9. Mrs. Helen Paul – Member
10. Dr. Uttam Mahapatra – Member
11. Dr. Daniel Rajkumar – Member
12. Mrs. Madhu P. Singh

12.3 Capacity Building of SHARE Team/Community/Stakeholders for 2019-2020

S. No.	SHARE Team Member's Name/ Community/ Stakeholders	Training/Orientation/ Reporting	Months/Type
1.	Mr David Abraham	Annual Consultation for Reflection, Strategic Review and Planning Meeting 24 th Apr to 27 th Apr 2019. SHARE Annual Report Presentation taken place during the Annual Meeting on 26-04-2019.	April 2019 (Dehradun) Programme

S. No.	SHARE Team Member's Name/ Community/Stakeholders	Training/Orientation/ Reporting	Months
2.	Km Dimple, Km Farah Naz, Km Jaraha, Km Meena Rani, Km Shumayala, Km. Preeti, Km Renu, Km. Shobha, Mr Rohitash, Mr Arun Kumar and Mr Sanjay Singh	Resilience Training: 04-05-2019 Mindfulness, Empathy and Sympathy (11 Participants)	May 2019 (Seohara) Programme
3.	Km Dimple, Km Farah Naz, Km Jaraha, Km Meena Rani, Km. Preeti, Km Renu, Km. Shobha,	Resilience Training: 18-06-2019 Attitudinal Healing 06 concepts, 04 Pillars of Facilitators and 04 Skills of Facilitators (07 Participants)	June 2019 (Seohara) Programme
4.	Mr. David Abraham & UMC Members	SHARE Unit Management Meeting taken place as per the plan on 20-06-2019	June 2019 Management
5.	Km Dimple, Km Farah Naz, Km Gulista, Km Meena Rani, Km Renu Km. Preeti, Km. Shobha, Mr Rohitash, Mr Arun Kumar, Mr Sanjay Singh & Km Shumayala	Resilience Training: 05-07-2019 Listening Skills, To know the emotional feelings and to know about characteristics strengths (11 Participants)	July 2019 (Seohara) Programme
6.	Mr. David Abraham	SHARE AGM taken place on 04-07-2019	July 2019 (Ramnagar, Uttarakhand) Management
7.	Km Dimple, Km Farah Naz, Km Meena Rani, Km Shumayala, Km. Preeti, Km Renu, Km. Shobha,	Resilience Training: 03 & 06-08-2019 Characteristics Strengths (07 Participants)	August 2019 (Seohara) Programme
8.	Km Dimple, Km Farah Naz, Km Meena Rani, Km Shumayala, Km. Preeti, Km Renu, Km. Shobha, Smt. Vidhushi	Resilience Training: 22-08-2019 Characteristics Strengths (08 Participants)	August 2019 (Seohara) Programme

S. No.	SHARE Team Member's Name/ Community/Stakeholders	Training/Orientation/ Reporting	Months
9.	Km Dimple, Km Farah Naz, Km Meena Rani, Km Shumayala, Km. Preeti Pal, Km Renu, Km. Shobha, Km Jaraha Smt. Vidhushi, Km. Sallu and Km. Sonam	Resilience Training: 04-09-2019 Feeling Management (11 Participants)	September 2019 (Seohara) Programme
10.	Mr. David Abraham & UMC Members	SHARE Unit Management Meeting 25-09-2019	September 2019 Management
11.	Mr. David Abraham	Master Class on Fundraising 10 th & 11 th 2019 New Delhi	October 2019 Programme
12.	Mr. David Abraham & Mr Sanjay Singh	Half Yearly Reporting and Capacity Building Residential Workshop 29,30,31 October 2019	October 2019 Programme (New Delhi)
13.	Km Dimple, Km Farah Naz, Km Meena Rani, Km Shumayala, Km Renu Km. Preeti Pal, Km. Shobha, Km. Sonam , and Smt. Vidhushi	Resilience Training: 30-10-2019 Feeling Management (09 Participants)	October 2019 Programme
14.	Km Dimple, Km Farah Naz, Km Meena Rani, Km Shumayala, Km Renu Km. Preeti Pal, Km. Sallu Km. Shobha, Km. Sonam , and Km. Sonam-II	Resilience Training: 28-11-2019 Feeling Management (10 Participants)	November 2019 Programme
15.	SHARE Team	Annual Function has been organized on 18-12-2019 in which around 400+ community members participated and taken part in the programme.	December 2019 Programme
16.	Mr. David Abraham	Workshop on Fund Raising 07-01-2020 New Delhi	January 2020 Programme
17.	Km Dimple, Km Farah Naz, Km Meena Rani, Km Shumayala, Km Renu Km. Preeti Pal, Km. Sallu Km. Shobha, Km. Sonam , and Km. Sonam-II	Resilience Training: 07-02-2020 Feeling Management (10 Participants)	February 2020 Programme

18.	Mr. David Abraham	SHARE Society Governing Board Meeting 11-02-2020	February 2020 Management
19.	Km Dimple, Km Farah Naz, Km Meena Rani, Km Shumayala, Km Renu Km. Preeti Pal, Km. Sallu Km. Shobha, Km. Sonam , and Km. Sonam-II	Resilience Training: 12-02-2020 Feeling Management (10 Participants)	February 2020 Programme
20.	David Abraham & UMC Members	SHARE management meeting taken place on 14-03-2019 in Mussoorie, UK.	March 2020 Management

13. Objectives 2020-2021:

1. To strengthening Health System/ Network with government hospitals- CHC/PHC of Bijnor district/Mental Hospital Bareilly.
2. Empower PPSDs and their families with skills and knowledge on mental health problems & COVID-19 Awareness.
3. To reach out 40 new villages to build network and Awareness, Skills and Knowledge on mental health & COVID-19 Awareness.
4. To reach out the religious/influence leaders of Bijnor district to increase skills in mental health literacy, first aid and positive mental health & COVID-19 Awareness.
5. To promote Disability Entitlements/Govt. Benefits in the community circles & COVID-19 Awareness.
6. To strengthen the 50 CBOs of Seohara block to increase skills in mental health literacy, first aid and positive mental health & COVID-19 Awareness.
7. To improve the reach, visibility and effectiveness of RNTCP through SHARE Programme support in the targeted communities & COVID-19 Awareness.

14. Financial Report: 2019-2020 & Budget: 2020-2021

SHARE SOCIETY, Mussoorie – 248179, UK

Financial Report: April 1, 2019 to March 31, 2020

Income	Budget for Period April to March 2019-2020	Actual Received April to March 2019-2020	Budget for Period April to March 2020-2021
Brought forward from previous programme-Local	32,729.68	32,729.68	86,053.98
Brought forward from previous programme-FC	16,126.36	16,126.36	2,831.14
SAPHARA Trust	4,89,000.00	313951.00	-
Government	-	-	-
Donation FC	11,76,092.00	1176092.00	12,09,052.00
TCS Fund	57,500.00	57,500.00	-
Donation Local	1,20,577.96	43,100.00	70,937.88
Coomunity Contribution	1,50,000.00	297489.00	1,50,000.00
In-kind donations	-	-	-
Income generated by the programme	-	-	-
Local community	-	-	-
Bank Interest	50,000.00	57,226.82	1,00,000.00
Sell of Scrap	1000.00	-	1,000.00
TDS Refund	8,079.00	8,770.00	4,705.00
TDS Interest	500.00	820.00	325.00
Others- Reserve Fund	-	-	-
Total Income	21,01,605.00	20,03,804.86	16,24,905.00

Operational/Programme Costs	Budget for Period April to March 2019-2020	Actual Received April to March 2019-2020	Budget for Period April to March 2020-2021
Direct costs			
Activity and Material Costs			
Project Travel	80000.00	77912.00	60000.00
Mental Health Programmes	90000.00	86566.00	85000.00
Mental Health Training & Workshop	12000.00	-	10000.00
Mass Mental Health Awareness-Wall Painting	-	-	6000.00
Adolescent Programmes- Youth Resilience 44 Groups	309000.00	238210.00	-
CBOs Capacity Building	50000.00	49870.00	40000.00
Community Mobilization & Training	25000.00	24612.00	24000.00
Disability Entitlements Programme	115000.00	114803.00	60000.00
Refrehment & Hospitality Exp.	3500.00	4794.00	3000.00
Internet & Phone Exp.	10000.00	10009.00	14000.00
Printing & Stationery	8000.00	6718.00	7500.00
Medical/Medicines	5000.00	1507.00	6000.00
TB Programme	30000.00	28000.00	38000.00
Travel to Mental Hospital	15000.00	14920.00	13000.00
Self Help Groups Expenses	10000.00	9000.00	5000.00
Pamphlets/ IEC materials/ workbooks/ banners	10000.00	1190.00	15000.00
Field Supply	4000.00	3485.00	4000.00
Rural Health Care Providers Meetings/Networking	-	-	5000.00
Programme Facilitators			67500.00
National Day Celebrations	2200.00	820.00	2000.00
World Suicide Prevention Day Programme	2000.00	2000.00	2000.00
World Women Day Programme	2200.00	924.00	2000.00
World Mental Health Day Programme	2500.00	2868.00	3000.00
Organizational Celebration	3000.00	3000.00	-

Exp.			
Annual/Health Function	30000.00	32502.00	10000.00
Adult Literacy Programme	57500.00	68043.00	-
Sub Total	8,75,900.00	7,81,753.00	4,82,000.00
Staff Costs/Salaries			
Staff Salaries (Basic+EHA Exp.+ HRA)	644674.00	644674.00	657168.00
Provident Fund	93066.00	93590.00	98590.00
PF Admin Charges	7020.00	7151.00	8000.00
Gratuity Scheme	28550.00	28650.00	18880.00
Staff Health	25000.00	23404.00	25000.00
Staff Welfare/Social Activities	16128.00	16703.00	8500.00
Staff Travel (LTC)	5000.00	0.00	5000.00
Staff Children' Education Scheme	92135.00	92135.00	81167.00
ESIC Employer	8372.00	0.00	0.00
Sub Total	919945.00	906307.00	902305.00
Training Costs			
Training	10000.00	4297.00	10000.00
Staff Capacity Building	15000.00	7430.00	10000.00
Sub Total	25,000.00	11,727.00	20,000.00
Premises Costs			
Centre/Office Rent	60000.00	60000.00	60000.00
Electricity Charges	9000.00	4535.00	10000.00
Centre Cleaning & Maintenance	25000.00	17800.00	15000.00
Sub Total	94000.00	82335.00	85000.00
Transport Costs			
Travel to Health Facilities & Government Offices	-	-	-
Vehicle Repair & Maintenance	18000.00	13946.00	18000.00
Vehicle Insurance & Taxes	20000.00	20013.00	20000.00
Sub Total	38000.00	33959.00	38000.00
Evaluation & Monitoring Costs			
Monitoring & Reporting Exp.	3000.00	434.00	3000.00
Community Health Meeting/Reporting	13000.00	9060.00	5000.00
Sub Total	16000.00	9494.00	8000.00
Indirect Costs			
Administration Costs			

Office Supply	4000.00	3142.00	3500.00
Bank Charges	960.00	5060.10	800.00
Audit Fees	14000.00	14000.00	14000.00
UMC/RGB/RAC Meetings	5000.00	4830.00	3000.00
Admin Travel & Hospitality	5500.00	7590.00	2500.00
Utility LPG Charges	1800.00	3576.00	1800.00
Equipment Repair & Maintenance	6000.00	8232.00	6000.00
Computer Repairs & Maintenance	7000.00	5993.00	7000.00
Legal & Professional Fees	3000.00	1630.00	2000.00
Postage & Communication	500.00	391.00	1000.00
Membership Fees	2000.00	4718.82	5000.00
Newspaper & Periodicals	3000.00	2719.00	3000.00
Sub Total	52760.00	61881.92	49600.00
Total Operational/Programme Costs	2021605.00	1887456.92	1584905.00

Capital Costs	Budget for Period April to March 2019-2020	Actual Received April to March 2019-2020	Budget for Period April to March 2020-2021
Office & Other Equipments	60000.00	47500.00	30000.00
Electrical Equipments	20000.00	6500.00	10000.00
Total Capital Costs	80000.00	54000.00	40000.00
Grand Total Costs (Operational/Programme + Capital)	21,01,605.00	19,41,456.92	16,24,905.00

15.0 Acknowledgements:

My sincere thanks to all the SHARE Team for all their hard work and perseverance throughout the year in achieving what we have achieved so far....

I offer my deep gratitude to Westminster Presbyterian Church and SAPHARA Trust who have faithfully supported financially the community based mental health programme and youth resilience programme respectively of SHARE Society for the year 2019-2020.

I am indebted to all the Governing Board Members of SHARE Society and the officers of EHA central office for their timely help and guidance.

I am grateful to Dr. Sunil Gokavi, EHA Executive Director and Regional Director, Dr. Kaaren Mathias, Director Mental Health and monitoring person and Dr. George Clarence SHARE UMC Chairperson for the guidance, supports and word of encouragements for us during the reporting period.

Mrs. Margaret Kurian – EHA Representative for the word of encouragements to us time to time during the reporting period.

I am grateful respectively to Dr. Pratibha Milton EHA Community Health & Development Director & Dr. Kaaren Mathias monitoring person for their suggestions, guidance and technical helps.

I am thankful to all members of the unit management committees for their inputs and valuable suggestion to manage SHARE administratively.

I am thankful to the District Magistrates of Bijnor & Moradabad Districts for his co-operation and support.

I am thankful to the Chief Medical Officer of Bijnor & Moradabad Districts and MOIC-Seohara for their co-operation and support to run the community health programs in Seohara block.

I am thankful to the Director of Mental Hospital, Bareilly and the psychiatrists for their co-operation and support to treat the mentally ill people referred by the SHARE Project.

I am thankful to the different departments of Vikas Bhawan, Bijnor for their co-operation and support.

My sincere thanks to the Landour Community Hospital for their timely help and support and I am grateful for the help rendered by the sister organizations like Herbertpur Christian Hospital and OPEN.

Finally, I am very grateful to God for His faithfulness in enabling the SHARE team and myself to complete another year of service through SHARE Society in Uttarakhand and Uttar Pradesh.

May He receive all the glory!



Respectfully submitted,
David Abraham
Project Manage/Secretary

16.0: SHARE's Activities Photos for the year 2019-2020



SHARE facilitated the group of mentally ill people' visits to the Govt. mental hospital



Mental Health Awareness in Muslim School the part of Madarsha Intervention to detect the case of mentally ill people from this community



Women empowerment through development programmes in the rural areas



Adult Literacy Sessions taking place in one the literacy centre



Literacy and Mental Health promotion in one of the women groups



Community Participation in the promotion of Mental Health



Mental Health Awareness in one of the Muslim School



The group of mentally ill people travelling by train to access the mental health facilities

16.0: Activities Photos for the year 2019-2020



Mental Health Awareness in one of the rural community



Disable people have been organized by SHARE to be facilitated for the disability assessments



People with Psycho-Social Disability (PPSDs) visit to the psychiatrist hospital facilitated by SHARE



Community Participation in the promotion of Mental Health in the rural community



Youth Resilience Programme in the school



Poor families have been facilitated to the Govt. Dept. for house construction



World Suicide Prevention Day Programme in the community



SHARE Team ready to go in their respective communities for the PSDs follow ups

16.0: SHARE's Activities Photos for the year 2019-2020



Adult Literacy Class is going on



Mental Health Awareness in the rural community



Mental Health Handouts distribution in the community level



Mental Health Awareness in the Madarsha (Muslim School)



People with Disabilities (PWDs) have been facilitated by SHARE to have disability entitlements from Govt.



Youth Resilience Sessions in the groups



Adolescents programmes in the schools



Adult Literacy Class for the rural women in the the communit

16.0: Activities Photos for the year 2019-2020



Independence Day 2019 Celebration by SHARE Team



Mental Health Awareness' in the Muslim school



People with Disabilities have been organized to facilitate them to have disability entitlements



Programme on World Mental Health Day 10 October 2019.



Mentally ill patients have been facilitated by SHARE to the Mental Hospital for the treatment



Youth Resilience Sessions in the school



Youth Resilience Sessions in one of the targeted school



Camp for Cerebral Palsy Children to have their assessments in SHARE Centre

16.0: Activities Photos for the year 2019-2020



Mental Health Awareness in the villages



Persons with Disabilities (PWDs) have facilitated by SHARE to CMO office Bijnor



Disable person has been helped by SHARE to have Disability E-Certificate and UID Card



Youth Resilience Programme in School



The group of people with disability (PWDs) have been facilitated by SHARE to the Government hospital for the assessment and have disability entitlements.



Community Interaction on the issue of mental health problems



Mental Health Awareness in the Muslim School



Mentally ill patients waiting for registration in the mental hospital facilitated by SHARE

16.0: Activities Photos for the year 2019-2020



Mental Health Awareness in the rural community to find the patients and refer them to the mental hospital.



Village meeting about mental health problems in the community



Person to person interaction about the mental health problems in the community



Mentally ill people in the queue to get the medicines from mental hospital after the registration



Mentally ill person discussing his problem with the psychiatrist facilitated by SHARE



People with Disabilities in the Govt. hospital facilitated by SHARE



SHARE Youth Resilience Team



Youth Resilience Training in SHARE centre

16.0: Activities Photos for the year 2019-2020



SHARE Society participation in EHA Golden Jubilee Programme



Youth Resilience Programme: Adolescents interaction during the sessions



Monitoring of Youth Resilience Sessions



Youth Resilience Programme: Sessions is going on in one of the targeted school



Re-Public Day 2020 Celebration by the SHARE' team



EHA Central Team visit during SHARE Society' Annual Function 2019



SHARE' Team ramme presentation during community programme



Community participation in the SHARE' programme

16.0: Activities Photos for the year 2019-2020



SHARE Society has been completed 26th years of its existence



Community Participation in the SHARE Society Annual Function 2019



Emmanuel Hospital Association Team' participation within the programme



Dr Sunil Gokavi, the Executive Director has been honoured by SHARE Society



Dr Sunil Gokavi was addressing the audience



Dr Sunil Gokavi was honoured by Mr David Abraham on behalf of SHARE Society



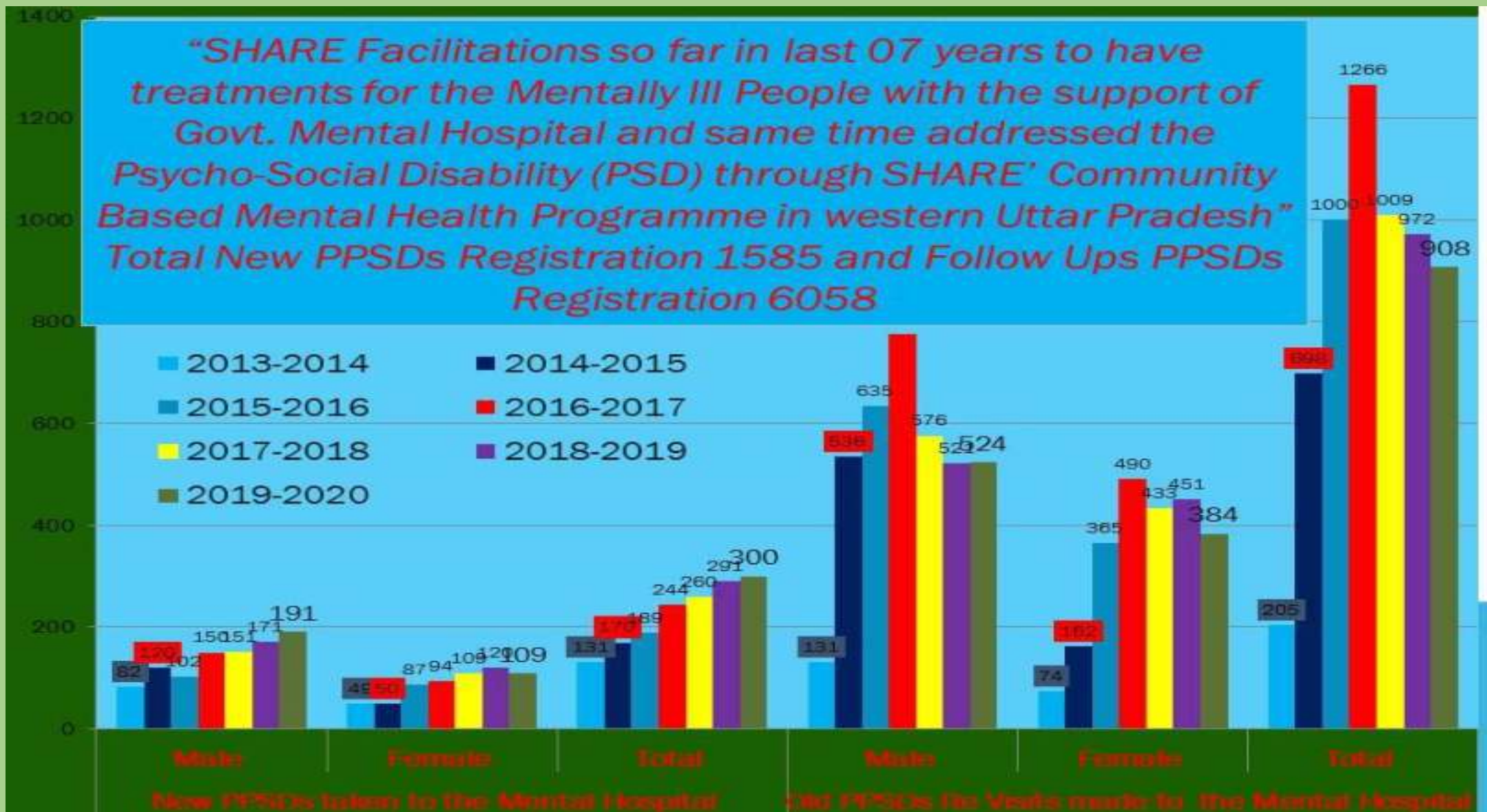
Dr Sunil Gokavi was presenting the Disability Certificate to one of the PWDs



Community participation during the SHARE' Annual Programme

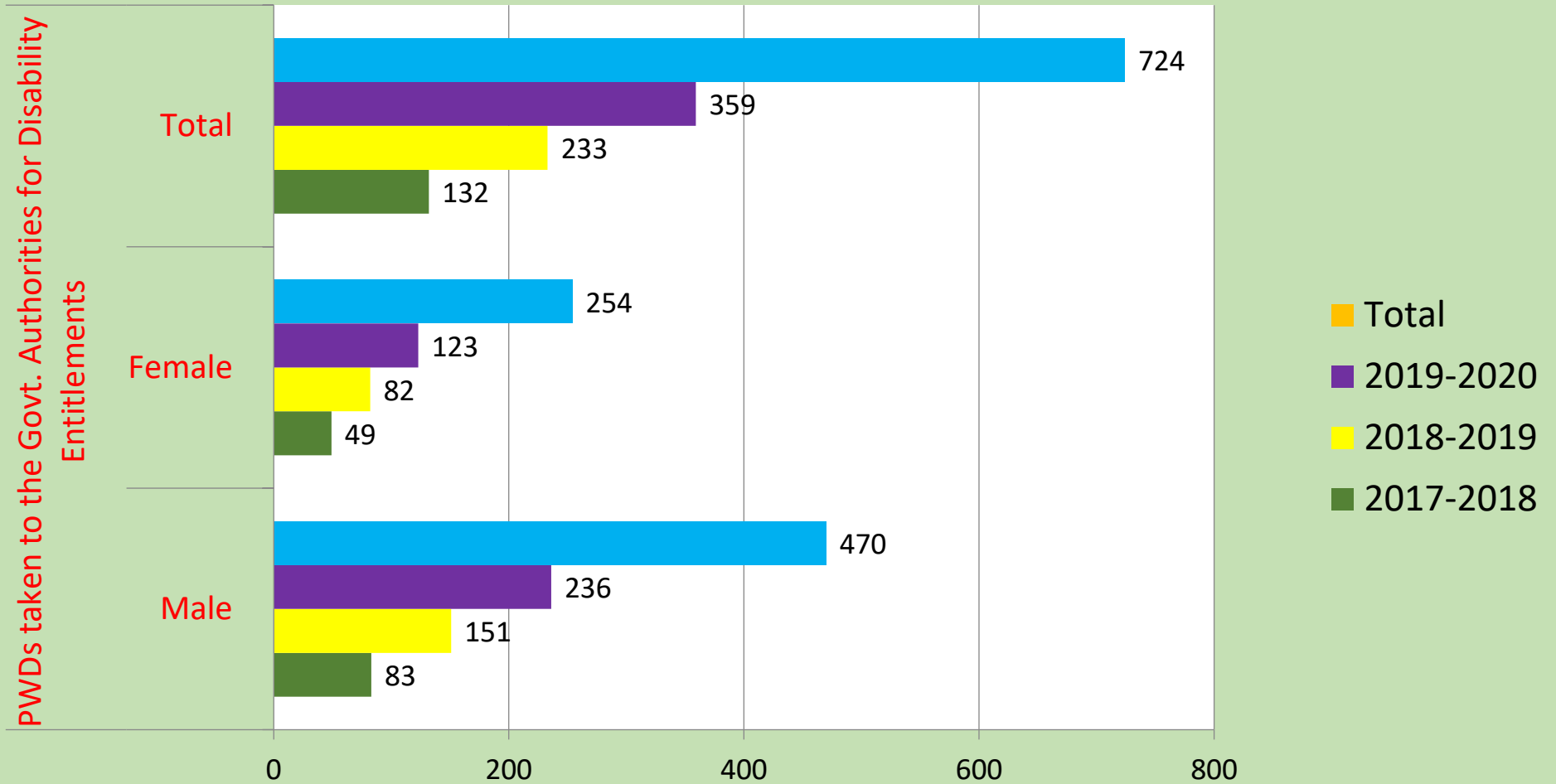
SHARE SOCIETY, Dist. BIJNOR, UP										
Community Based Mental Health & Development Programme										
Mental Hospital Bareilly Trips 2019-2020										
Months	Dates	No of Trips	New PPSDs		Total (A)	Old PPSDs		Total (B)	Total A+B	Cumulative
			Male	Female		Male	Female			
Apr-19	03-April-19	1	2	2	4	9	8	17	21	
	10-April-19	2	3	2	5	11	9	20	25	
	17-April-19	3	4	2	6	8	9	17	23	
	24-April-19	4	5	1	6	13	7	20	26	
	Total		14	7	21	41	33	74	95	95
May-19	01-May-19	5	3	2	5	11	9	20	25	
	08-May-19	6	4	2	6	13	7	20	26	
	15-May-19	7	4	3	7	7	11	18	25	
	22-May-19	8	3	2	5	10	7	17	22	
	29-May-19	9	4	2	6	11	8	19	25	
	Sub Total		18	11	29	52	42	94	123	
	Total		32	18	50	93	75	168	218	218
Jun-19	04-June-19	10	3	2	5	10	7	17	22	
	12-June-19	11	3	2	5	8	11	19	24	
	19-June-19	12	4	2	6	12	8	20	26	
	26-June-19	13	3	2	5	9	7	16	21	
	Sub Total		13	8	21	39	33	72	93	
	Total		45	26	71	132	108	240	311	311
Jul-19	03-July-19	14	4	2	6	12	7	19	25	
	10-July-19	15	3	1	4	10	7	17	21	
	17-July-19	16	4	3	7	10	8	18	25	
	24-July-19	17	3	2	5	11	6	17	22	
	31-July-19	18	5	2	7	11	8	19	26	
	Sub Total		19	10	29	54	36	90	119	
	Total		64	36	100	186	144	330	430	430
Aug-19	07-August-19	19	2	4	6	11	6	17	23	
	14-August-19	20	4	2	6	9	8	17	23	
	21-August-19	21	3	3	6	11	7	18	24	
	28-August-19	22	5	2	7	9	9	18	25	
	Sub Total		14	11	25	40	30	70	95	
	Total		78	47	125	226	174	400	525	525
Sep-19	04-Sep-19	23	4	1	5	10	9	19	24	
	11-Sep-19	24	3	3	6	11	8	19	25	

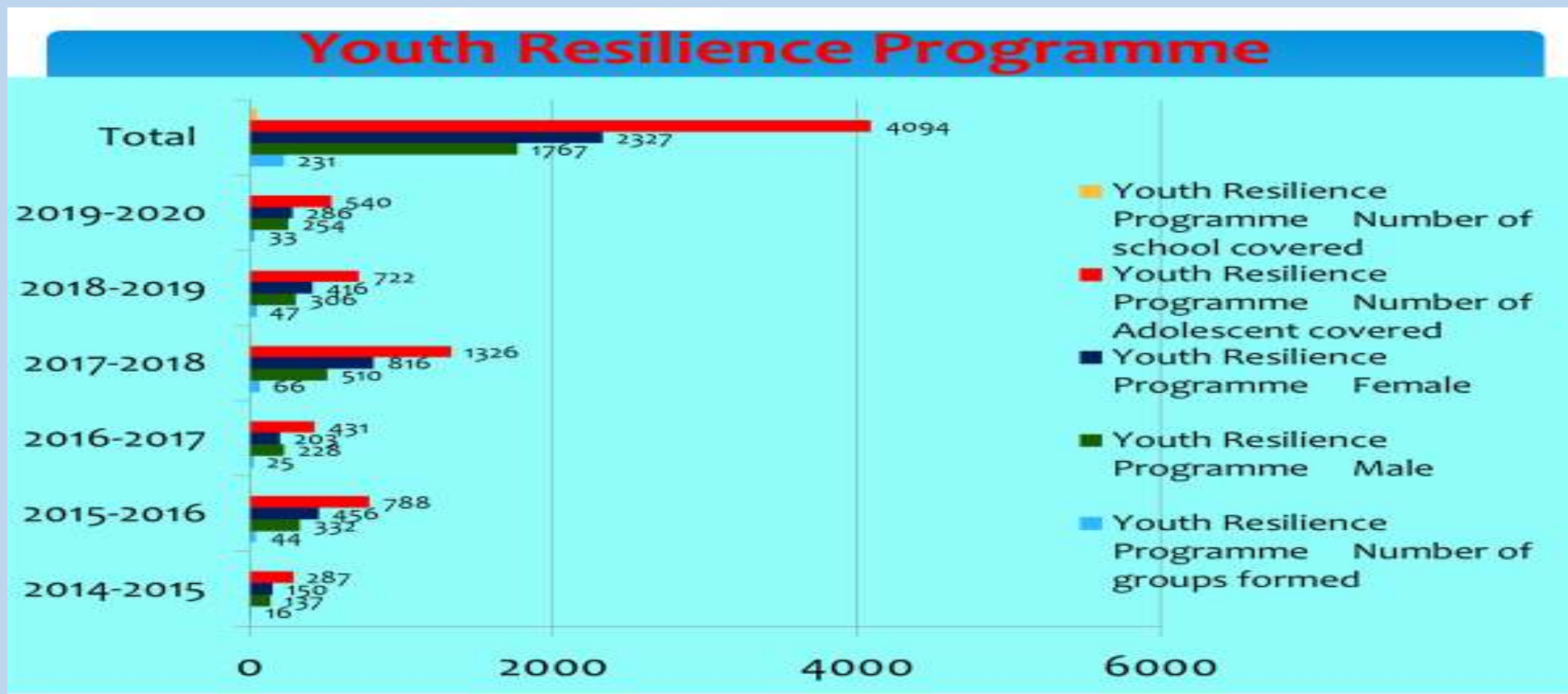
	18-Sep-19	25	4	2	6	10	7	17	23	
	25-Sep-19	26	4	3	7	9	9	18	25	
	Sub Total		15	9	24	40	33	73	97	
	Total		93	56	149	266	207	473	622	622
Oct-19	03-Oct-19	27	3	3	6	13	5	18	24	
	10-Oct-19	28	4	2	6	6	12	18	24	
	16-Oct-19	29	3	2	5	10	9	19	24	
	23-Oct-19	30	5	1	6	11	7	18	24	
	30-Oct-19	31	4	2	6	11	7	18	24	
	Sub Total		19	10	29	51	40	91	120	
	Total		112	66	178	317	247	564	742	742
Nov-19	06-Nov-19	32	4	2	6	10	9	19	25	
	13-Nov-19	33	3	2	5	11	6	17	22	
	20-Nov-19	34	4	2	6	11	8	19	25	
	27-Nov-19	35	3	3	6	12	6	18	24	
	Sub Total		14	9	23	44	29	73	96	
	Total		126	75	201	361	276	637	838	838
Dec-19	04-Dec-19	36	4	2	6	11	7	18	24	
	11-Dec-19	37	4	2	6	9	8	17	23	
	19-Dec-19	38	5	1	6	9	7	16	22	
	26-Dec-19	39	3	2	5	11	8	19	24	
	Sub Total		16	7	23	40	30	70	93	
	Total		142	82	224	401	306	707	931	931
Jan-20	01-Jan-20	40	5	1	6	11	8	19	25	
	08-Jan-20	41	4	2	6	12	6	18	24	
	15-Jan-20	42	4	2	6	11	8	19	25	
	22-Jan-20	43	3	3	6	9	9	18	24	
	29-Jan-20	44	5	2	7	10	7	17	24	
	Sub Total		21	10	31	53	38	91	122	
	Total		163	92	255	454	344	798	1053	1053
Feb-20	05-Feb-20	45	5	2	7	11	6	17	24	
	12-Feb-20	46	4	3	7	10	8	18	25	
	19-Feb-20	47	5	2	7	12	3	15	22	
	26-Feb-20	48	4	3	7	11	8	19	26	
	Sub Total		18	10	28	44	25	69	97	
	Total		181	102	283	498	369	867	1150	1150
Mar-20	04-Mar-20	49	4	2	6	12	8	20	26	
	11-Mar-20	50	3	3	6	11	10	21	27	
	18-Mar-20	51	3	2	5	10	11	21	26	
	Sub Total		10	7	17	33	29	62	79	
	Total		191	109	300	531	398	929	1229	1229



MENTALLY ILL PEOPLE' TREATMENTS						
Year	New PPSDs taken to the Mental Hospital			Old PPSDs Re Visits made to the Mental Hospital		
	Male	Female	Total	Male	Female	Total
2013-2014	82	49	131	131	74	205
2014-2015	120	50	170	536	162	698
2015-2016	102	87	189	635	365	1000
2016-2017	150	94	244	776	490	1266
2017-2018	151	109	260	576	433	1009
2018-2019	171	120	291	521	451	972
2019-2020	191	109	300	531	398	929
Total	967	618	1585	3706	2373	6079

SHARE Programme Disability Development





SHARE PROJECT, BIJNOR, UP										
Youth Resilience Programme- SAFARA in Schools/Colleges: April to March 2020										
S. No.	School Names	Location/ Village	Sessions completed	Number of Groups			Number of Adolescents			Class Names
				Fem ale	Male	Total	Female	Male	Total	
1	MRKM Junior High School	Mewa Nawada	18 Sessions per group Total 72	2	2	4	37	33	70	6th, 7th & 8th
2	Jamiya Darul Hamd Junior High School	Maksud pur	6 Sessions per group Total 36	3	3	6	54	55	109	8 th , 9 th & 11 th
3	Chowdary Charan SVM School	Piyanda pur	14 Sessions per group Total 70	2	3	5	39	48	87	6 th , 7 th 8 th & 9 th
4	Muslim Qudrat Inter College	Seohara	14 Sessions per group Total 42	3	-	3	60	-	60	9 th
5	Tek Chand Memorial Junior High School	Jagir	9 Sessions per group Total 36	2	2	4	26	20	46	6 th , 7 th & 8 th
6	Narender Kumar Memorial Inter College	Sharifpur	7 Sessions per group Total 28	2	2	4	21	42	63	6 th , 7 th & 8 th
7	Shayam Narayan	Jamapur	5 Sessions per group Total 15	2	1	3	18	34	52	6 th , 7 th & 8 th
8	DKM Public Junior High School	Bhagwara	1 Sessions per group Total 04	2	2	4	31	22	53	6 th , 7 th & 8 th
Total			303 Sessions	18	15	33	286	254	540	

SHARE Project, Seohara, Dist. Bijnor, UP

Self Help Group' Details

S.No.	SHGs' Name	Village	Members	Type of community	Type of Group	Monthly Saving
1	Roshini SHG	Sadafal	13	SC	Women	1300
2	Jagriti SHG	Sadafal	13	SC	Women	1300
3	Laxmi SHG	Sadafal	12	SC	Women	1200
4	Laxmi SHG	Berkhera	15	SC	Women	1500
5	Jagriti SHG	Satwai	12	SC	Women	1200
6	Mahak SHG	Sabdalpur	15	SC	Women	1500
7	Sagun SHG	Jatnagla	11	SC	Women	1100
8	Vijay Laxmi SHG	Aminabad	13	SC	Women	1300
9	Mahilla SHG	AminabadI	11	SC	Women	1100
10	Ek Kiran SHG	Bhagwara	14	SC	Women	1400
11	Mamta SHG	Aminabad	11	SC	Women	1100
12	Sheetal SHG	Wajirpur Mandaoi	14	SC	Women	1400
13	Sagar SHG	Jagir	14	SC	Women	1400
14	Nai Asha SHG	Kasmabad	11	SC	Women	1100
15	Prerna SHG	Satwai	13	SC	Women	1300
16	Tringa	Lambakhera	13	SC	Women	1300
17	Unathi SHG	Sabdalpur	9	SC	Women	900
18	Pooja SHG	Naugra	15	SC	Women	1500
19	Gagan SHG	Shadafal	12	SC	Women	1200
20	Aradhana SHG	Hajipur	12	SC	Women	1200
21	Phehel SHG	Ramkhera	11	SC	Women	1100
22	Phehel SHG	Dehra	12	SC	Women	1200
23	Ambetkhar SHG	Haroli	12	SC	Women	1200
24	Bhawana SHG	Pantiya	10	SC	Women	1000
25	Bhumi SHG	Rooppur	10	SC	Women	1000
26	Sharaswati SHG	Shahpur	12	SC	Women	1200
27	Akash SHG	Rooppur	11	SC	Women	1100
28	Jeevan SHG	Shahpur	13	SC	Women	1300
29	Dhanu SHG	Jatnagla	14	SC	Women	1400
30	Sangam SHG	Lambakhera	10	SC	Women	1000
31	Harsh SHG	Jatnagla	11	SC	Women	1100
32	Ravidas SHG	Pittapur	12	SC	Women	1200
33	Sartak SHG	Pittapur	12	SC	Women	1200
S.No.	SHGs' Name	Village	Members	Type of	Type of	Monthly

				community	Group	Saving
34	Vandhana SHG	Dhindharpur	14	SC	Women	1400
35	Sargam SHG	Lambhakhera	14	SC	Women	1400
36	Sagam SHG	Lambhakhera	10	SC	Women	1000
37	Manshi SHG	Pittapur	10	SC	Women	1000
38	Ganga SHG	Malakpur	10	SC	Women	1000
39	Khushi SHG	Malakpur	10	SC	Women	1000
40	Nai Dhisha SHG	Shiymabad	12	SC	Women	1200
41	Ravidas SHG	Haroli	11	SC	Women	1100
42	Nai Umang SHG	Shiymabad	13	SC	Women	1300
43	Krishna SHG	Shiymabad	14	SC	Women	1400
44	Shakti SHG	Malakpur	11	SC	Women	1100
45	Jagarithi SHG	Bamnoli	10	SC	Women	1000
46	Upkhar SHG	Bamnoli	12	SC	Women	1200
47	Rani SHG	Naugra	10	SC	Women	1000
48	Kanak SHG	Bamnoli	12	SC	Women	1200
49	Biswas SHG	Bamnoli	10	SC	Women	1000
50	Umeed SHG	Bamnoli	11	SC	Women	1100
51	Lakshya SHG	Jasmore	10	SC	Women	1000
52	Prerna SHG	Jasmore	11	SC	Women	1100
53	Sanskar SHG	Jasmore	13	SC	Women	1300
54	Laxmi SHG	Bhogpur	13	SC	Women	1300
55	Axshya SHG	Bhogpur	10	SC	Women	1000
56	Chandani SHG	Dhingarpur	10	SC	Women	1000
57	Nai Kiran SHG	Bhogpur	12	SC	women	1200
58	Harsh SHG	Amanatpur	12	SC & OBC	women	1200
Total			688			68800

Service for Health and Rural Education Society

Disability Entitlements Programmes

S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
1	01-04-2019	Netin Kumar Sharma	Permood Sharma	24	Male	Adult	Genral	Mittepur	Seohara	Locomotive	50	CMO/M4/2019/1826
2	01-04-2019	Shabana Khatoon	Alihasan	32	Female	Adult	Muslim	Kuri Banger	Seohara	Locomotive	50	CMO/M4/2019/1852
3	01-04-2019	Devyanshu	Rajesh Singh	6	Male	Children	Saini	Sharepur	Seohara	CP	75	CMO/M4/2019/1812
4	01-04-2019	Rajni	Devender Singh	22	Female	Adult	Genral	Melak	Seohara	Deaf&Dumb	90	CMO/M4/2019/1882
5	06-05-2019	Azeem	Mohd Hanif	24	Male	Adult	Muslim	Aladeenpur	Seohara	Locomotive	40	CMO/M4/2019/2023
6	06-05-2019	Khuswati Devi	Rhotash Singh	43	Female	Adult	Kasyab	Aalampuri	Seohara	Locomotive		CMO/M4/2019/2024
7	06-05-2019	Pawan Kumar	Manful Singh	43	Male	Adult	SC	Aalampuri	Seohara	Locomotive		CMO/M4/2019/2069
8	06-05-2019	Ramotar	Kallu Singh	58	Male	Adult	Saini	Mangalkheda	Seohara	Peralize	50	CMO/M4/2019
9	06-05-2019	Kayam	Shakir	34	Male	Adult	Muslim	Mujahidpur	Noorpur	Locomotive	80	CMO/M4/2019/2071
10	06-05-2019	Shivam Kumar	Narender Kumar	15	Male	Children	Pal	Bagwada	Seohara	MR	70	CMO/M4/2019
11	13-05-2019	Pradeep Kumar	Veer Singh	27	Male	Adult	OBC	Kamala	Seohara	Locomotive	100	CMO/M4/2019/2084
12	13-05-2019	Rukmesh	Attar Singh	38	Female	Adult	SC	Bhogpur	Seohara	Locomotive	40	CMO/M4/2019/2089
13	13-05-2019	Bhupender	Dharampal Singh	31	Male	Adult	OBC	Amirpur	Seohara	Locomotive	40	CMO/M4/2019/2090
14	13-05-2019	Mohd Ayan	Furkan Ahmad	11	Male	Children	Muslim	Tarai	Seohara	Locomotive	40	CMO/M4/2018/2119
15	27-05-2019	Manuj Kumar	Malkhan Singh	34	Male	Adult	Genral	Jairampur	Seohara	Locomotive	65	Cmo/M4/2019/2167
16	27-05-2019	Dayawati	Bharat singh	54	Female	Adult	OBC	Kazampur	Seohara	Locomotive	40	CMO/M4/2019/2194
17	27-05-2019	Banti Kumar	Gokal Singh	35	Male	Adult	Genral	Jairampur	Seohara	Locomotive	40	CMO/M4/2019/2198
18	27-05-2019	Bhagwati	Mahaveer Singh	40	Female	Adult	SC	Mankuwa	Allhepur	Locomotive	50	CMO/M4/2019/2204

Service for Health and Rural Education Society

Disability Development and Entitlements Programmes

S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
19	27-05-2019	Mulchand	Bhagwana SINGH	32	Male	Adult	SC	Jairampur	Seohara	Locomotive	50	CMO/M4/2019/2209
20	27-05-2019	Herdesh Davi	Suresh	32	Female	Adult	SC	Jairampur	Seohara	Locomotive	50	CMO/M4/2019/2210
21	27-05-2019	Kajal Tomer	Satish Kumar	20	Female	Adult	OBC	Seohara	Budhenpur	MR	90	CMO/M4/2019/2217
22	27-05-2019	Mohd Yusuf	Ramjan Ali	54	Male	Adult	OBC	Seohara	Budhenpur	Deaf&Dumb	100	CMO/M4/2019/2219
23	27-05-2019	Mahak Parveen	Mohd Afser	14	Female	Children	OBC	Seohara	Budhenpur	Deaf&Dumb	100	CMO/M4/2019/2224
24	27-05-2019	Pooja	Veer Singh	26	Female	Adult	SC	Jhilla	Seohara	Locomotive	50	CMO/M4/2019/2175
25	27-05-2019	Zayda Khatoon	Alijaan	31	Female	Adult	OBC	Shasapur	Seohara	Locomotive	100	CMO/M4/2019/2167
26	27-05-2019	Mohd Akram	Ballu	51	Male	Adult	OBC	Seohara	Budhenpur	Deaf&Dumb	100	CMO/M4/2019/2225
27	27-05-2019	Mohd Aslam	Ballu	53	Male	Adult	OBC	Seohara	Budhenpur	Deaf&Dumb	100	CMO/M4/2019/2228
28	27-05-2019	Anup	Satish Kumar	16	Male	Children	OBC	Seohara	Budhenpur	Deaf&Dumb	100	CMO/M4/2019/2231
29	27-05-2019	Munni Davi	Ram Singh	54	Female	Adult	SC	Kazampur	Seohara	Peralize	60	CMO/M4/2019/2251
30	27-05-2019	Ramesh Singh	Daleep Singh	62	Male	Adult	OBC	Kazampur	Seohara	Peralize	40	CMO/M4/2019/2252
31	27-05-2019	Sonam	Mahender	14	Female	Children	OBC	Budhanagla	Seohara	Locomotive	50	CMO/M4/2019/2205
32	27-05-2019	Preetam	Rajpal Singh	30	Male	Adult	SC	Shergar	Afzalgar	Locomotive	100	CMO/M4/2019/2247
33	27-05-2019	Hergovind Singh	Candan Singh	64	Male	Adult	Genral	Nurallapur	Dhampur	Locomotive	60	CMO/M4/2019/2250
34	03-06-2019	Sani	Karan Singh	13	Male	Children	SC	Kivad	Seohara	C.P	100	CMO/M4/2019/2268
35	03-06-2019	Yugesh	Rajpal Singh	9	Male	Children	SC	Dhela Aaheer	Noorpur	C.P	100	CMO/M4/2019/2269
36	03-06-2019	Nitish	Arjun Singh	6	Male	Children	SC	Lambakheda	Seohara	C.P	100	CMO/M4/2019/2270

Service for Health and Rural Education Society

Disability Development and Entitlements Programmes

S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
37	03-06-2019	Soni Devi	Suresh Singh	26	Female	Adult	SC	Buwapur Nathu	Allhepur	Locomotive	50	CMO/M4/2019/2284
38	17-06-2019	Lalit Pertap	Mahipal Singh	40	Male	Adult	Genral	Manpur Shivpuri	Allhepur	Locomotive	50	CMO/M4/2019/2364
39	17-06-2019	Shiv Kumar	Makhan Singh	35	Male	Adult	SC	Manpur Shivpuri	Allhepur	Locomotive	50	CMO/M4/2019/2365
40	17-06-2019	Hariraj	Gangaram	41	Male	Adult	SC	Manpur Shivpuri	Allhepur	Locomotive	60	CMO/M4/2019/2366
41	17-06-2019	Jaywati	Mahipal Singh	44	Female	Adult	Genral	Shearger	Afzalgar	Locomotive	40	CMO/M4/2019/2425
42	17-06-2019	Suraj Singh	Ghaseeta Singh	23	Male	Adult	SC	Shearger	Afzalgar	Locomotive	40	CMO/M4/2019/2426
43	17-06-2019	Kamal Kumar	Kerpai Singh	29	Male	Adult	SC	Sherpur Reani	Seohara	Locomotive	50	CMO/M4/2019/2434
44	17-06-2019	Vedperkash	Mahender Singh	41	Male	Adult	Genral	Goverdhenpur	Seohara	Locomotive	50	CMO/M4/2019/2411
45	24-06-2019	Preyanshi	Denesh kumar	10	Female	Children	Saini	Kamala	Seohara	MR	70	CMO/M4/2019/2456
46	24-06-2019	Servesh	Nathu Singh	45	Female	Adult	Genral	Jairampur	Seohara	MR	50	CMO/M4/2019/2502
47	24-06-2019	Herdesh Kumar	Mangu Singh	21	Male	Adult	SC	Berkheda Tanda	Seohara	C.P	80	CMO/M4/2019/2504
48	24-06-2019	Tanu	Denesh	8	Female	Children	SC	Jairampur	Seohara	Locomotive	50	CMO/M4/2019/2514
49	24-06-2019	Nutan Devi	Lehkraj Singh	27	Female	Adult	SC	Jairampur	Seohara	Locomotive	40	CMO/M4/2019/2523
50	24-06-2019	Gyanpal Singh	Ramkeshan	39	Male	Adult	Saini	Dhampur	Dhampur	Locomotive	40	CMO/M4/2019/2562
51	24-06-2019	Chanderpal Singh	Parveen Singh	59	Male	Adult	SC	Jairampur	Seohara	Peralize	50	CMO/M4/2019/2581
52	24-06-2019	Waseem Ahmad	Maseetu	36	Male	Adult	Muslim	Hassupura	Noorpur	Locomotive	60	CMO/M4/2019/2552
53	24-06-2019	Jyoti	Chanderpal	24	Female	Adult	SC	Seohara	Budhenpur	Locomotive	40	CMO/M4/2019/2540

Service for Health and Rural Education Society

Disability Development and Entitlements Programmes

S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
54	24-06-2019	Pawan Kumar	Mahipal Singh	26	Male	Adult	SC	Guhawer Hallu	Noorpur	Locomotive	50	CMO/M4/2019/2542
55	01-07-2019	Peyush	Pintu	9	Male	Children	SC	Roshanpurjageer	Noorpur	Locomotive	90	CMO/M4/2019/2655
56	01-07-2019	Taneska	Sanjay Singh	2	Female	Children	Sc	Manpur Shivpuri	Allhepur	C.P	80	CMO/M4/2019/2657
57	01-07-2019	Sunil Kumar	Jagdeesh	33	Male	Adult	SC	Roshanpurjageer	Noorpur	Locomotive	50	CMO/M4/2019/2691
58	01-07-2019	Jaswant Singh	Kerashna Singh	53	Male	Adult	SC	Roshanpurjageer	Noorpur	Locomotive	40	CMO/M4/2019/2692
59	08-07-2019	Rinku Kumar	Omkar Singh	29	Male	Adult	Genral	Abheyraazpur	Afzalgar	Locomotive	100	CMO/M4/2019/2720
60	08-07-2019	Reetu Rani	Mahesh	14	Female	Children	Saini	Beakheda Tanda	Seohara	Locomotive	50	CMO/M4/2019/2735
61	08-07-2019	Pirmood Kumari	Kewal Singh	35	Female	Adult	SC	Jaafrabad	Afzalgar	Locomotive	50	CMO/M4/2019/2777
62	08-07-2019	Kusum	Gaseeta Singh	42	Female	Adult	SC	Jaafrabad	Afzalgar	Locomotive	40	CMO/M4/2019/2778
63	08-07-2019	Bettu Singh	Tejpal Singh	21	Male	Adult	SC	Aladeenpur Seoha	Budhenpur	Locomotive	100	CMO/M4/2019/2787
64	08-07-2019	Kavender Kumar	Dallchand	17	Male	Children	Saini	Beakheda Tanda	Seohara	MR	90	CMO/M4/2019/2800
65	08-07-2019	Narender Singh	Mahesh Chander	54	Male	Adult	Joshi	Seohara	Budhenpur	Peralize	60	CMO/M4/2019/2804
66	08-07-2019	Bubli	Suresh	41	Female	Adult	Saini	Boorhpur	Noorpur	Deaf&Dumb	100	CMO/M4/2019/2801
67	15-07-2019	Suhana	Haroon	14	Female	Children	Muslim	Dareeyapur	Noorpur	MR	90	CMO/M4/2019/2891
68	15-07-2019	Aneeta	Ramkumar	26	Female	Adult	Saini	Seohara	Budhenpur	Locomotive	50	CMO/M4/2019/2893
69	15-07-2019	Wahid	Chunnu	47	Male	Adult	Muslim	Seohara	Budhenpur	Locomotive	40	CMO/M4/2019/2898

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S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
70	15-07-2019	Akela	Rahesh Ahmad	33	Female	Adult	Muslim	Mangalkheda	Seohara	Locomotive	100	CMO/M4/2019/2900
71	15-07-2019	Fesal	Vahazuddeen	29	Male	Adult	Muslim	Seohara	Budhenpur	Locomotive	100	CMO/M4/2019/2902
72	15-07-2019	Suwati Rani	Devender Singh	21	Female	Adult	Genral	Mukerpuri	Allhepur	Deaf&Dumb	100	CMO/M4/2019/2917
73	15-07-2019	Sabeena Parveen	Habeeb Ahmad	31	Female	Adult	Muslim	Safiyabad	Budhenpur	Deaf&Dumb	100	CMO/M4/2019/2919
74	15-07-2019	Bala Davi	Jaswant	35	Female	Adult	Genral	Gopalpur	Noorpur	MR	60	CMO/M4/2019/2916
75	15-07-2019	Babali devi	Ram Singh	38	Female	Adult	Saini	Gopalpur	Noorpur	PPR	40	CMO/M4/2019/2872
76	15-07-2019	Veer Singh	Thanani Singh	48	Male	Adult	SC	Gopalpur	Noorpur	Paralse	60	CMO/M4/2019/2915
77	15-07-2019	Suresh	Jaswant	29	Male	Adult	Sani	Gopalpur	Noorpur	PPR	100	CMO/M4/2019/2875
78	15-07-2019	Malkhan Singh	Sarjeet	27	Male	Adult	SC	Gopalpur	Noorpur	PPR	100	CMO/M4/2019/2869
79	22-07-2019	Premwati devi	Indersingh	60	Female	Adult	Sc	Budanagla	Budhenpur	ENT		CMO/M4/2019/
80	22-07-2019	Chatan	Om Prakash Singh	34	Male	adult	SC	Seohara	Budhenpur	MR		CMO/M4/2019/
81	22-07-2019	Jahir	Ahmad Hassan	27	Male	Adult	OBC	Sadaranpur	Budhenpur	PPR		CMO/M4/2019/2872
82	22-07-2019	Rashid	Rahish Ahmad	36	Male	Adult	OBC	Guhawar	Noorpur	PPR		CMO/M4/2019/2873
83	29-07-2019	Chander Kumar	Charan Singh	47	Male	Adult	Genral	Palanpur	Seohara	Locomotive	70	CMO/M4/2019/3115
84	29-07-2019	Choti Jaha	Abdul Sakur	50	Female	Adult	OBC	Asgaripur	Noorpur	Locomotive	60	CMO/M4/2019/3118
85	29-07-2019	Perdeep	Dharamveer		Male	Adult	SC	Sadaranpur	Seohara	Locomotive		CMO/M4/2019/
86	29-07-2019	Devensh	Rohotash		Male	Adult	SC	Kazampur	Seohara	Locomotive		CMO/M4/2019/

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S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
87	29-07-2019	Needa Khursheed	Mohd Khurshed	20	Female	Adult	Muslim	Seohara	Budhenpur	Locomotive	70	CMO/M4/2019/3111
88	05-08-2019	Reena Devi	Atar Singh	30	Female	Adult	SC	Umri	Nahetoor	Locomotive	50	CMO/M4/2019/3208
89	05-08-2019	Suresha Devi	Kundan Singh	47	Female	Adult	SC	Mukerpuri	Allhepur	Locomotive	60	CMO/M4/2019/3227
90	05-08-2019	Suneeta	Nanhe Singh	33	Female	Adult	Saini	Bumnoli	Seohara	MR	75	CMO/M4/2019/3230
91	05-08-2019	Govind	Lallu	59	Male	Adult	SC	Heranpura Maffi	Seohara	Peralize	68	CMO/M4/2019/3231
92	05-08-2019	Shenuma Parveen	Sakil Ahmad	12	Female	Children	Muslim O	Abheyraazpur	Afzalgar	CP	70	CMO/M4/2019/3143
93	05-08-2019	Nazreen	Saddeek	45	Female	Adult	Usmani	Seohara	Budhenpur	Deaf&Dumb	100	CMO/M4/2019/3232
94	05-08-2019	Sudheer Kumar	Bhudew Singh	35	Male	Adult	Genral	Tat	Seohara	Locomotive	85	CMO/M4/2019/3254
95	05-08-2019	Pulkeet Chohan	Rakesh Singh	13	Male	Children	Genral	Sadakpur	Kasampur	MR	90	CMO/M4/2019/3258
96	05-08-2019	Omwati Davi	Raghunath	60	Female	Adult	Genral	Iddalpur	Noorpur	Locomotive	40	CMO/M4/2019/3285
97	05-08-2019	Mohd Arshad	Mubarik	23	Male	Adult	Ansari	Jamalpur Kerat	Noorpur	Locomotive	50	CMO/M4/2019/3183
98	05-08-2019	Soyab	Nawab	29	Male	Adult	Ansari	Jamalpur Kerat	Noorpur	Locomotive	50	CMO/M4/2019/3194
99	05-08-2019	Gokaran Singh	Dharamveer Singh	50	Male	Adult	Genral	Jairampur	Seohara	Deaf&Dumb	100	CMO/M4/2019/3197
100	05-08-2019	Rama Devi	omparkash	50	Female	Adult	Genral	Jogepura	Noorpur	Locomotive	40	CMO/M4/2019/3264
101	05-08-2019	Baby Devi	Puran Singh	43	Female	Adult	Genral	Jogepura	Noorpur	Locomotive	50	CMO/M4/2019/3265
102	19-08-2019	Saddam Husein	Abdul Hameed	25	Male	Adult	Muslim	Mewanawada	Seohara	Locomotive	100	CMO/M4/2019/3387
103	19-08-2019	Mehefuz	Meheub	39	Male	Adult	Muslim	Kivad	Seohara	Locomotive	50	CMO/M4/2019/3433

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S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
104	19-08-2019	Dilshad Ahmad	Sarafat Husain	24	Male	Adult	Muslim	Seohara	Budhenpur	Locomotive	40	CMO/M4/2019/3434
105	19-08-2019	Reyasat Ali	Sarafat Husain	27	Male	Adult	Muslim	Tajpur	Noorpur	Locomotive	40	CMO/M4/2019/3436
106	19-08-2019	Berjesh Devi	Omperkash Singh	41	Female	Adult	SC	Bumnoli	Seohara	Locomotive	40	CMO/M4/2019/3439
107	19-08-2019	Nasima	Ikramuddeen	39	Female	Adult	Muslim	Seohara	Budhenpur	Locomotive	50	CMO/M4/2019/3440
108	19-08-2019	Vipin Kumar	Rajpal Singh	34	Male	Adult	SC	Shergar	Afzalgar	Locomotive	50	CMO/M4/2019/3442
109	19-08-2019	Sumesh Devi	Ramesh	35	Female	Adult	SC	Amirpur	Seohara	Locomotive	50	CMO/M4/2019/3444
110	19-08-2019	Suhkram Singh	Rohotash Singh	46	Male	Adult	SC	Faizpur	Noorpur	Locomotive	40	CMO/M4/2019/3445
111	19-08-2019	Sangeeta Kumari	Jagdeesh Singh	19	Female	Adult	OBC	Kamala	Noorpur	Locomotive	80	CMO/M4/2019/3466
112	19-08-2019	Payal	Dushyant	22	Female	Adult	Saini	Hussupura	Noorpur	Locomotive	80	CMO/M4/2019/3469
113	19-08-2019	Kumari Sheetal	Denesh kumar	29	Female	Adult	Genral	Meheshanpur	Afzalgar	Locomotive	40	CMO/M4/2019/3487
114	19-08-2019	Asharam	Jashram	39	Male	Adult	SC	Mirjapur Dhekli	Noorpur	Locomotive	50	CMO/M4/2019/3510
115	19-08-2019	Sharik	Shaheed Ahmad	16	Male	Children	Salmani	Suwawala	Afzalgar	Deaf&Dumb	100	CMO/M4/2019/3468
116	19-08-2019	Anjali Kumari	Pukraj Singh	15	Female	Children	Genral	Majhera Sakro	Allhepur	Locomotive	50	CMO/M4/2019/3492
117	19-08-2019	Berazpal	Malkhan Singh	37	Male	Adult	Genral	Majhera Sakro	Allhepur	Locomotive	40	CMO/M4/2019/3452
118	26-08-2019	Alisha Rani	Zakir Husain	8	Female	Children	Muslim	Hafizabad Shearkot	Allhepur	Locomotive	55	CMO/M4/2019/3713
119	26-08-2019	Shanti Devi	Veshna	64	Female	Adult	Tomar	Seohara	Budhenpur	Peralize	50	CMO/M4/2019/3781
120	26-08-2019	Monsaf Ali	Mohd Ali	67	Male	Adult	Muslim	Gendajod	Seohara	Locomotive	40	CMO/M4/2019/3782

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S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
121	26-08-2019	Kamakshi	Satpal Singh	7	Female	Children	Genral	Asgaripur	Noorpur	MR	100	CMO/M4/2019/3686
122	26-08-2019	Waseem Ahmad	Nafis Ahmad	34	Male	Adult	Muslim	Bhelolpur	Seohara	Locomotive	80	CMO/M4/2019/3763
123	26-08-2019	Mohd Sazid	Mohd Kaseem	25	Male	Adult	Muslim	Bhelolpur	Seohara	Locomotive	40	CMO/M4/2019/3760
124	26-08-2019	Sajida Khatoon	Faizullapur	73	Female	Elderly	Muslim	Faizullapur	Seohara	Locomotive	40	CMO/M4/2019/3762
125	26-08-2019	Bhudew Singh	Mangu Singh	50	Male	Adult	OBC	Musseur	Noorpur	Locomotive	40	CMO/M4/2019/3706
126	02-09-2019	Sameena	Moinuddeen	29	Female	Adult	Muslim	Seohara	Budhanpur	Locomotive	40	CMO/M4/2019/3844
127	02-09-2019	Seeba Parveen	Mohd Taheer	22	Female	Adult	Ansari	Shaspur	Seohara	Locomotive	40	CMO/M4/2019/3848
128	02-09-2019	Rhenuma Parveen	Nazir Husain	24	Female	Adult	Ghoshi	Seohara	Budhanpur	Locomotive	80	CMO/M4/2019/3846
129	02-09-2019	Gulshan	Mukwa	27	Female	Adult	O B C	Sadakpur	Gadhi	MR	80	CMO/M4/2019/3872
130	09-09-2019	Mohd Vajid	Mohd Saddek	29	Male	Adult	Ansari	Shaspur	Seohara	Locomotive	100	CMO/M4/2019/3978
131	09-09-2019	Feroz Aalam	Mohd Naiem	16	Male	Children	Kureshi	Shaspur	Seohara	Deaf	80	CMO/M4/20193983
132	09-09-2019	Anas	Mohd Naiem	15	Male	Children	Ansari	Malakpur	Seohara	MR	70	CMO/M4/2019/3990
133	09-09-2019	Mohd Saad	Nafis Ahmad	6	Male	Children	Ansari	Malakpur	Seohara	CP	100	CMO/M4/2019/3986
134	09-09-2019	Mohd Arif	Mohd Hasan	54	Male	Adult	Muslim	Seohara	Bhudenpur	Locomotive	40	CMO/M4/2019/3950
135	09-09-2019	Mohd Imran	Kurbaan Ahmad	20	Male	Adult	Muslim	Seohara	Bhudenpur	Locomotive	40	CMO/M4/2019/3977
136	09-09-2019	Devender Kumar	Ram Parsad	40	Male	Adult	Dhemar	Kivad	Seohara	Locomotive	70	CMO/M4/2019/3991
137	09-09-2019	Amit Kumar	Bud Singh	28	Male	Adult	SC	Kivad	Seohara	Locomotive	40	CMO/M4/2019/4042

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S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
138	09-09-2019	Sonu	Rampal Singh	30	Male	Adult	SC	Kivad	Seohara	Locomotive	40	CMO/M4/2019/4060
139	09-09-2019	Chahat	Rakesh Kumar	16	Female	Children	Genral	Udeyrajpur	Afzalgar	Deaf		CMO/M4/2019/
140	09-09-2019	Hifzorrheman	Habeeburrheman	84	Male	Adult	O B C	Shaspur	Seohara	Locomotive	50	CMO/M4/2019/4003
141	16-09-2019	Idresh Ahmad	Sahid Ahmad	50	Male	Adult	Muslim	Seohara	Budhanpur	Locomotive	75	CMO/M4/2019/4145
142	16-09-2019	Anas	Mustak	9	Male	Children	Muslim	Bumnoli	Seohara	Locomotive	45	CMO/M4/2019/4163
143	16-09-2019	Pushpa Devi	Hariom Singh	31	Female	Adult	OBC	Shapur Jamal	Afzalgar	Locomotive	40	CMO/M4/2019/4143
144	23-09-2019	Mahendar	Suraj	44	Male	Adult	O B C	Shapur Jamal	Afzalgar	Locomotive	40	CMO/M4/2019/4266
145	23-09-2019	Mohd Khalid	Taheer Husain	32	Male	Adult	Muslim	Seohara	Bhudenpur	Locomotive	50	CMO/M4/2019/4268
146	23-09-2019	Mohd Aslam	Furkan	24	Male	Adult	Muslim	Kivad	Seohara	Locomotive	50	CMO/M4/2019/4284
147	23-09-2019	Gulrej Saifi	Vishal Ahmad	23	Male	Adult	Muslim	Shaspur	Seohara	Deaf	100	CMO/M4/2019/4276
148	30-09-2019	Devki Devi	Hareraj	34	Female	Adult	Pal	Shaspur	Seohara	Locomotive	40	CMO/M4/2019/1576
149	30-09-2019	Ravinder Kumar	Veshamber Singh	29	Male	Adult	SC	Allhepur Mhukam Sheakot	Allhepur	Locomotive	50	CMO/M4/2019/4366
150	30-09-2019	Gulshan	Abdul Gaffar	31	Female	Adult	Muslim	Mohalla Ptanpura	Najibabad	Locomotive	50	CMO/M4/2019/4372
151	30-09-2019	Irfan	Ismaeal	23	Male	Adult	Muslim	Abherajpur	Afzalgar	Locomotive	40	CMO/M4/2019/4378
152	30-09-2019	Omperkash Singh	Sher Singh	71	Male	Adult	Tyagi	Abherajpur	Afzalgar	Locomotive	85	CMO/M4/2019/4379
153	30-09-2019	Arman Ali	Ahshan Ali	25	Male	Adult	Muslim	Fejullapur	Bhudenpur	Locomotive	40	CMO?M4/2019/4385
154	30-09-2019	Anuj Kumari	Chandru Singh	34	Female	Adult	SC	Kasmabad	Seohara	Locomotive	50	CMO/M4/2019/4387

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S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
155	30-09-2019	Asma Khatoon	Reyazuddeen	31	Female	Adult	Muslim	Shaspur	Seohara	Locomotive	40	CMO/M4/2019/4388
156	30-09-2019	Mohd Arif	Mustak	50	Male	Adult	Muslim	Suwawala	Afzalgar	Locomotive	40	CMO/M4/2019/4392
157	30-09-2019	Ikrar	Abdul Sattar	41	Male	Adult	Muslim	Suwawala	Afzalgar	Locomotive	40	CMO/M4/2019/4393
158	30-09-2019	Tayyab Ali	Nishar Ahmad	21	Male	Adult	Muslim	Beda	Noorpur	MR	75	CMO/M4/2019/4397
159	30-09-2019	Hariraj	Ram Singh	48	Male	Adult	Pal	Shaspur	Seohara	Deaf	100	CMO/M4/2019/4424
160	30-09-2019	Mohd Anas	Sarif Ahmad	17	Male	Children	Muslim	Seohara	Bhudenpur	Locomotive	40	CMO/M4/2019/4308
161	21-10-2019	Rhenuma Khatoon	Sarif Ahmad	23	Female	Adult	Muslim	Shaspur	Seohara	Locomotive	40	CMO/M4/2019/4429
162	21-10-2019	Uday Singh	Pream Singh	60	Male	Adult	OBC	Ameenabad	Seohara	Locomotive	45	CMO/M4/2019/4439
163	21-10-2019	Nazim Ahmad	Bundu Kha	27	Male	Adult	Muslim	Abherajpur zafrabad	Afzalgarh	Locomotive	60	CMO/M4/2019/4513
164	21-10-2019	Mohd Umer	Abdul Azeez	72	Male	Adult	Muslim	Suwawala	Afzalgarh	Locomotive	60	CMO/M4/2019/4523
165	21-10-2019	Mohd Nasir	Mohd Umar	38	Male	Adult	Muslim	Suwawala	Afzalgarh	Locomotive	40	CMO/M4/2019/4525
166	21-10-2019	Afsana Khatoon	Srafat Husain	45	Female	Adult	Muslim	Suwawala	Afzalgarh	Locomotive	50	CMO/M4/2019/4527
167	21-10-2019	Rheshma Khatoon	Jamil	32	Female	Adult	Muslim	Guhawer Hallu	Noorpur	Locomotive	75	CMO/M4/2019/4533
168	21-10-2019	Waseem Ahmad	Naseem Ahmad	40	Male	Adult	Muslim	Kivad	Seohara	Locomotive	40	CMO/M4/2019/4537
169	21-10-2019	Mohd Zafar	Mohd Umar	27	Male	Adult	Muslim	Tajpur	Bhudenpur	Locomotive	75	CMO/M4/2019/4538
170	21-10-2019	Mohd Ikbal	Mohd illiyash	27	Male	Adult	Muslim	Kivad	Seohara	Locomotive	40	CMO/M4/2019/4541
171	21-10-2019	Jayveer Singh	Ratan Singh	35	Male	Adult	SC	Faizpur	Noorpur	Locomotive	50	CMO/M4/2019/4542

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S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
172	21-10-2019	Ferdush Jha	Mehandhi Hasan	30	Female	Adult	Muslim	Abherajpur zafraba	Afzalgar	Deaf	100	CMO/M4/2019/4543
173	21-10-2019	Shabana Khatoon	Zareful Hasan	30	Female	Adult	Muslim	Suwawala	Afzalgar	MR	75	CMO/M4/2019/4544
174	21-10-2019	Preyanka	Satveer	15	Female	Children	Kunzer	Sharkot	Allhepur	MR	100	CMO/M4/2019/4547
175	21-10-2019	Nazem	Yameen	26	Male	Adult	Muslim	Beada	Noorpur	Locomotive	75	CMO/M4/2019/4549
176	21-10-2019	Kallu	Satveer	12	Female	Children	Kunzer	Sharkot	Allhepur	MR	100	CMO/M4/2019/4551
177	21-10-2019	Sarvesh	Karan Singh	24	Female	Adult	SC	Shespur	Seohara	Locomotive	50	CMO/M4/2019/4553
178	21-10-2019	Shushma	Jashwant	39	Female	Adult	Kunzer	Sherkot	Allhepur	Locomotive	50	CMO/M4/2019/4554
179	21-10-2019	Shushma Devi	Vejaypal	29	Female	Adult	Kunzer	Sherkot	Allhepur	Locomotive	50	CMO/M4/2019/4555
180	21-10-2019	Sheshram	Ramparshad	43	Male	Adult	Saini	Mukshudabad	Afzalgar	Locomotive	70	CMO/M4/2019/4568
181	04-11-2019	Shana	Mohd Taheer	29	Female	Adult	Muslim	Shaspur	Seohara	Locomotive	100	CMO/M4/2019/4605
182	04-11-2019	Jamil Ahmad	Jalil Ahmad	40	Male	Adult	Muslim	Tajpur	Noorpur	Locomotive	50	CMO/M4/2019/4613
183	04-11-2019	Anita Devi	Lallu Singh	44	Female	Adult	Sc	Keshopur	Seohara	Locomotive	65	CMO/M4/2019/4614
184	04-11-2019	Rheshma Khatoon	Ali Hasun	25	Female	Adult	Muslim	Ballanagla	Bhudenpur	Locomotive	100	CMO/M4/2019/4615
185	04-11-2019	Shaheen Parveen	Naiem Ahmad	26	Female	Adult	Muslim	Mewanawada	Seohara	Locomotive	80	CMO/M4/2019/4616
186	04-11-2019	Rafeek Ahmad	Chuttan	27	Male	Adult	Muslim	Ballanagla	Bhudenpur	Locomotive	100	CMO/M4/2019/4617
187	04-11-2019	Noor Mohammad	Bhure Kha	37	Male	Adult	Muslim	Tajpur	Noorpur	Locomotive	50	CMO/M4/2019/4620
188	04-11-2019	Manoj Kumar	Omparkash	20	Male	Adult	Saini	Ratanpura	Seohara	Locomotive	50	CMO/M4/2019/4621

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S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
189	04-11-2019	Gulafsha Parveen	Mohd Nafis	6	Female	Children	Muslim	Suwawala	Afzalgar	MR	75	CMO/M4/2019/4630
190	04-11-2019	Anees Ahmad	Jamil Ahmad	35	Male	Adult	Muslim	Tajpur	Noorpur	Locomotive	40	CMO/M4/2019/4636
191	04-11-2019	Sonu	Kallu	23	Male	Adult	Muslim	Tajpur	Noorpur	Locomotive	100	CMO/M4/2019/4646
192	04-11-2019	Asif	Manguwa	23	Male	Adult	Muslim	Dhela Aheer	Noorpur	Deaf	87	CMO/M4/2019/4664
193	11-11-2019	Pushpander Kumar	Venood Kumar	34	Male	Adult	Badhi	Jatpura Mahavatpu	Allhepur	Locomotive	40	CMO/M4/2019/4693
194	11-11-2019	Deepa	Mahesh Singh	26	Female	Adult	SC	Bhudpur	Allhepur	Locomotive	50	CMO/M4/2019/4694
195	11-11-2019	Soondev Ravi	Lal Singh	29	Male	Adult	SC	Bhudhanagla	Seohara	Locomotive	50	CMO/M4/2019/4695
196	11-11-2019	Leelpat	Lallu Singh	59	Male	Adult	Saini	Nobatpur	Seohara	Locomotive	40	CMO/M4/2019/4697
197	11-11-2019	Babu Singh	Chokay Singh	55	Male	Adult	Saini	Nobatpur	Seohara	Locomotive	40	CMO/M4/2019/4698
198	11-11-2019	Chandarkala Devi	Huro Singh	34	Male	Adult	Saini	Nobatpur	Seohara	Locomotive	45	CMO/M4/2019/4699
199	11-11-2019	Kalu	Babu Ram	36	Male	Adult	Saini	Nobatpur	Seohara	Blindnes	100	CMO/M4/2019/4701
200	11-11-2019	Guddu	Harsavrup Singh	34	Male	Adult	Saini	Hasupura	Noorpur	Locomotive	40	CMO/M4/2019/4703
201	11-11-2019	Guddi	Kacdu	52	Female	Adult	Saini	Hasupura	Noorpur	Locomotive	40	CMO/M4/2019/4704
202	11-11-2019	Kalva	Alladeya	69	Male	Adult	Muslim	Kewad	Seohara	Locomotive	60	CMO/M4/2019/4716
203	11-11-2019	Waseem	Mohd Yusuf	27	Male	Adult	Muslim	Vesanpura	Noorpur	Deaf	70	CMO/M4/2019/4717
204	18-11-2019	Narender Kumar	Batu Singh	27	Male	Adult	Genral	Bhajjawala	Allhepur	MR	75	CMO/M4/2019/4726
205	18-11-2019	Sacheen Kumar	Ramveer Singh	26	Male	Adult	SC	Abherajpur	Gadhi	MR	75	CMO/M4/2019/4729

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S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
206	18-11-2019	Hani	Kulveer Singh		Male	Children	O B C	Mandora	Noorpur	MR	75	CMO/M4/2019/4732
207	18-11-2019	Umesh	Thani Singh	40	Male	Adult	Bhadai	Nagla	Allhepur	Deaf	70	CMO/M4/2019/4733
208	18-11-2019	Sanju	Thani Singh	38	Male	Adult	Bhadai	Nagla	Allhepur	Deaf	100	CMO/M4/2019/4734
209	18-11-2019	Kanchan	Pream Kumar	18	Female	Adult	Saini	Dheli Aaheer	Noorpur	MR	90	CMO/M4/2019/4737
210	18-11-2019	Ruby Parveen	Rhematulla	30	Female	Adult	Muslim	Seohara	Bhudenpur	Locomotive	40	CMO/M4/2019/4739
211	18-11-2019	Suresh Kumar	Jaipal Singh	22	Male	Adult	SC	Saddobearkha	Allhepur	Locomotive	40	CMO/M4/2019/4742
212	18-11-2019	Rupchand Singh	Zhabre	41	Male	Adult	Saini	Mujahedpur	Noorpur	Locomotive	40	CMO/M4/2019/4753
213	18-11-2019	Mohd Harun	Faruk Ali	26	Male	Adult	Muslim	Seohara	Bhudenpur	Locomotive	100	CMO/M4/2019/4755
214	18-11-2019	Rheesuddeen	Ayyub	27	Male	Adult	Muslim	Maksudpur	Seohara	Locomotive	40	CMO/M4/2019/4756
215	18-11-2019	Mohd Farhaan	Hazi Mohd Usman	29	Male	Adult	Muslim	Shearkot	Allhepur	Locomotive	85	CMO/M4/2019/4765
216	25-11-2019	Nasima Khatoon	Ali Hasan	54	Female	Adult	Muslim	Bagwada	Seohara	Locomotive	40	CMO/M4/2019/4819
217	25-11-2019	Rakesh Kumar	Raghuveer Singh	51	Male	Adult	Genral	Mohenuddeenpur A	Afzalgar	Locomotive	50	CMO/M4/2019/4847
218	25-11-2019	Samantra	Ramratan	38	Female	Adult	Saini	Raipur	Seohara	Locomotive	50	Cmo/M4/2019/4851
219	25-11-2019	shahid Ahmad	Mohd Kasam	33	Male	Adult	Muslim	Sultanpur Bhagtaw	Afzalgar	Locomotive	50	CMO/M4/2019/4855
220	25-11-2019	Muskan Khatoon	Tokeer Ahmad	19	Female	Adult	Muslim	Gendajud	Seohara	Deaf	60	CMO/M4/2019/4866
221	25-11-2019	Bharti	Naresh Kumar	16	Female	Adult	Saini	Dhampur	Allhepur	MR	75	CMO/M4/2019/4873
222	25-11-2019	Ayan	Taslim	12	Male	Children	Muslim	Kuri Banger	Seohara	CP	100	CMO/M4/2019/4874

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S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
223	02-12-2019	Mohd Arman	Muktiya Ahmad	61	Male	Adult	Muslim	Shespur	Seohara	Blindnes	100	CMO/M4/2019/4896
224	02-12-2019	Pushpa Devi	Govind Singh	32	Female	Adult	Saini	Dhela Aheer	Noorpur	MR	75	CMO/M4/2019/4897
225	02-12-2019	Kavita	Hari Singh	23	Female	Adult	Saini	Tajpur	Noorpur	MR	75	CMO/M4/2019/4898
226	02-12-2019	Nikil	Tare	15	Male	Children	SC	Ratanpura	Seohara	Deaf	75	CMO/M4/2019/4899
227	02-12-2019	Mohd Suhail	Tasleem Ahmad	8	Male	Children	Muslim	Gadi	Seohara	MR	90	CMO/M4/2019/4900
228	02-12-2019	Mohd Fahad	Salim Ahmad	15	Male	Children	Muslim	Shespur	Seohara	Deaf	100	CMO/M4/2019/4901
229	02-12-2019	Idresh Alvi	Bhure Alvi	34	Male	Adult	Muslim	Dariyapur	Noorpur	Deaf	100	CMO/M4/2019/4904
230	02-12-2019	Jagatram	Jaipal Singh	29	Male	Adult	SC	Sattonagli	Seohara	Locomotive	50	CMO/M4/2019/4916
231	02-12-2019	Mohd Rhemat	Safik Ahmad	30	Male	Adult	Muslim	Shespur	Seohara	Locomotive	100	CMO/M4/2019/4935
232	02-12-2019	Saref	Munna	56	Male	Adult	Muslim	Shespur	Seohara	Locomotive	40	CMO/M4/2019/4937
233	02-12-2019	Abhesheak Kumar	Suresh Singh	13	Male	Children	Saini	Kundipura	Allhepur	Locomotive	60	CMO/M4/2019/4947
234	02-12-2019	Nawajesh	Sakil	16	Male	Adult	Muslim	Kuri Banger	Seohara	Deaf	75	CMO/M4/2019/5013
235	02-12-2019	Raghuveer Singh	Shuklal Singh	45	Male	Adult	SC	Phittapur	Seohara	Locomotive	90	CMO/M4/2019/5014
236	02-12-2019	Ranveer Singh	Omperkash Singh	50	Male	Adult	SC	Mhodi	Allhepur	Locomotive	60	CMO/M4/2019/5015
237	02-12-2019	Hersheet	Susheel Kumar	10	Male	Children	OBC	Mandora	Noorpur	Locomotive	90	CMO/M4/2019/5018
238	09-12-2019	Banti Kumar	Samarpal	27	Male	Adult	SC	Ballanagla	Seohara	Locomotive	60	CMO/M4/2019/4963
239	09-12-2019	Kumari Neelam	Mamraj Singh	24	Female	Adult	SC	Ballanagla	Seohara	Locomotive	40	CMO/M4/2019/4966

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S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
240	09-12-2019	Rezwan Ahmad	Kamruddeen	26	Male	Adult	Muslim	Seohara	Bhudenpur	Locomotive	100	CMO/M4/2019/4979
241	09-12-2019	Subhash	Mahaveer	24	Male	Adult	SC	Behelolpur	Seohara	Locomotive	40	CMO/M4/2019/4981
242	09-12-2019	Shaheen Parveen	Khursheed	30	Female	Adult	Muslim	Seohara	Bhudenpur	Locomotive	40	CMO/M4/2019/4987
243	09-12-2019	Rajpal Singh	Lallu Singh	45	Male	Adult	SC	Rawana	Noorpur	paralize	70	CMO/M4/2019/5009
244	09-12-2019	Herdesh Kumar	Tek Bahadur Singh	18	Male	Adult	Saini	Guhawer Hallu	Noorpur	MR	80	CMO/M4/2019/5010
245	09-12-2019	Sumeet Kumar	Om perkash	22	Male	Adult	SC	Malakpur Bhodera	Allhepur	Blindnes	100	CMO/M4/2019/5057
246	16-12-2019	Aalam	Abdul Azeez	45	Male	Adult	Muslim	Mansur Sarai	Seohara	Blindnes	100	CMO/M4/2019/5086
247	16-12-2019	Mohd Tabesh	Mohd Azeez	34	Male	Adult	Muslim	Mansur Sarai	Seohara	Blindnes	100	CMO/M4/2019/5087
248	30-12-2019	Taroon Kumar	Mahaveer Singh	13	Male	Children	Pal	Saddipur	Noorpur	Mr	50	CMO/M4/2019/5137
249	06-01-2020	Nerpander Singh	Hersavrup Singh	39	Male	Adult	Genral	Nechalpur	Seohara	Locomotive	60	CMO/M4/2020/5135
250	06-01-2020	Mehemuda	Mohd Yaseen	30	Female	Adult	Muslim	Ratanpura	Seohara	Locomotive	60	CMO/M4/2020/5161
251	06-01-2020	Amit Kumar	Gerdhari	33	Male	Adult	SC	Ruppur	Seohara	Locomotive	100	CMO/M4/2020/5162
252	06-01-2020	Kawendar	Dalchand	26	Male	Adult	Genral	Nechalpur	Seohara	Locomotive	40	CMO/M4/2020/5164
253	06-01-2020	Shedev	Dharampal Singh	28	Male	Adult	OBC	Bagwada	Seohara	Locomotive	50	CMO/M4/2020/5165
254	06-01-2020	Rupa	Reshipal Singh	24	Female	Adult	OBC	Dhampur	Allhepur	Locomotive	50	CMO/M4/2020/5160
255	06-01-2020	Bhanu	Chetram	32	Male	Adult	SC	Jamapur	Seohara	Locomotive	50	CMO/M4/2020/5169
256	06-01-2020	Aman Kumar	Bablu Singh	17	Male	Adult	SC	Shadpur Gulal	Noorpur	Locomotive	60	CMO/M4/2020/5187

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S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
257	06-01-2020	Ango Devi	Harvansh	46	Male	Adult	SC	Jamapur	Seohara	Locomotive	50	CMO/M4/2020/5188
258	06-01-2020	Terander Singh	Ramcaran Singjh	30	Male	Adult	SC	Sohagpur	Allhepur	Deaf	100	CMO/M4/2020/5193
259	06-01-2020	Kanika	Kuverpal Singh	14	Female	Adult	Pal	Tajpur	Noorpur	Locomotive	50	CMO/M4/2020/5195
260	06-01-2020	Mohd Arsh	Faheem Ahmad	4	Male	Children	Muslim	Rampur Halduwa Mafi	Seohara	Locomotive	70	CMO/M4/2020/5196
261	06-01-2020	SASHI KANTH	Stapal	13	male	Children	SC	milak bhupur nath	Allhepur	Locomotive	40	CMO/M4/2020/5127
262	13-01-2020	Rabeya	Imamuddeen	31	Female	Adult	Muslim	Ratanpura	Seohara	Locomotive	60	CMO/M4/2020/5211
263	13-01-2020	Istaykar Ahmad	Intayzar Ahmad	31	Male	Adult	Muslim	Saddubear	Allhepur	Locomotive	40	Cmo/M4/2020/5212
264	13-01-2020	Feroz	Mohd Safi	35	Male	Adult	Muslim	Ratanpura	Seohara	Locomotive	50	CMO/M4/2020/5214
265	13-01-2020	Imran	Intayzar Ahmad	28	Male	Adult	Muslim	Saddubear	Allhepur	Locomotive	100	CMO/M4/2020/5215
266	13-01-2020	Ramavtar	Herpal Singh	38	Male	Adult	SC	Nurallapur Udaych	Allhepur	paralize	75	CMO/M4/2020/5217
267	13-01-2020	Khushnudin	Amir Ahmad	53	Female	Adult	Muslim	Ramkhera	Seohara	Locomotive	50	CMO/M4/2020/5218
268	13-01-2020	Zulfukar	Gufran	28	Male	Adult	Muslim	Bearkheda	Seohara	Locomotive	50	CMO/M4/2020/5230
269	13-01-2020	Jetandar Kumar	Ashok Kumar	31	Male	Adult	SC	Pandeya	Noorpur	Deaf	50	CMO/M4/2020/5233
270	13-01-2020	Vikky	Ramesh	26	Male	Adult	SC	Salarabad	Allhepur	Locomotive	40	CMO/M4/2020/
271	13-01-2020	Ramkumar	Shebba	54	Male	Adult	OBC	Halduwa Maffi	Seohara	Locomotive	50	CMO/M4/2020/
272	13-01-2020	Ashok	Babu Singh	58	Male	Adult	Genral	Dareyapur	Noorpur	Locomotive		CMO/M4/2020/
273	20-01-2020	Udayraz Singh	Balveer Singh	52	Male	Adult	SC	Umarpur Khader	Seohara	Locomotive	40	CMO/M4/2020/5268

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S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
274	20-01-2020	Pardeep Kumar	Ramkuver Singh	32	Male	Adult	SC	Govindpur	Seohara	Locomotive	80	CMO/M4/2020/5269
275	20-01-2020	Anita Devi	Ramkuver Singh	33	Female	Adult	SC	Mandori	Seohara	Locomotive	50	CMO/M4/2020/5272
276	20-01-2020	GUDHI	Shuklal Singh	41	Female	Adult	SC	PALNPUR	Seohara	Locomotive	50	CMO/M4/2020/5274
277	20-01-2020	Ansheeka	Khuswant Singh	6	Female	Children	SC	Mangolpura	Noorpur	Locomotive	50	CMO/M4/2020/5276
278	20-01-2020	Reetu devi	Dhan Singh	33	Female	Adult	SC	Govindpur	Seohara	Locomotive	50	CMO/M4/2020/5278
279	20-01-2020	Anoj	Dharamveer	8	Male	Children	Sc	Kasampur Mangalk	Seohara	Locomotive	80	CMO/M4/2020/5284
280	03-02-2020	Pardeep Kumar	Ghanseyam Singh	23	Male	Adult	SC	Budhanagla	Seohara	Locomotive	40	CMO/M4/2020/5320
281	03-02-2020	Ramsawrup	Kundan Singh	68	Male	Adult	SC	Aladeenpur Bhogi	Allhepur	Locomotive	40	CMO/M4/2020/5328
282	03-02-2020	Rihan	Vahazuddeen	38	Male	Adult	Muslim	Aladeenpur	Seohara	Locomotive	50	CMO/M4/2020/5334
283	03-02-2020	Madan Singh	Chotey	51	Male	Adult	SC	Nurallapur Udaych	Allhepur	Locomotive	40	CMO/M4/2020/5336
284	03-02-2020	Malkhan	Ramsadan	51	Male	Adult	Gujjar	Ameenabad	Seohara	Locomotive	50	CMO/M4/2020/5339
285	03-02-2020	Sunil Kumar	Kallu Singh	38	Male	Adult	Mev	Shapur Jamal	Afzalgar	Locomotive	50	CMO/M4/2020/5340
286	03-02-2020	Akhtar	Sattar Husain	38	Male	Adult	Muslim	Thath Jat	Seohara	Locomotive	40	CMO/M4/2020/5341
287	03-02-2020	Rajveer Singh	Madan Singh	27	Male	Adult	SC	Ameenabad	Seohara	Locomotive	50	CMO/M4/2020/5342
288	03-02-2020	Naval Kesor	Parbhat Chand	37	Male	Adult	SC	Allhepur	Dhampur	Locomotive	50	CMO/M4/2020/5366
289	10-02-2020	Sarvesh Rani	Bhagwamdash	16	Female	Adult	SC	Hassupura Harkisa	Noorpur	MR	75	CMO/M4/2020/5370
290	10-02-2020	Koshik	Hoseyar Singh	12	Male	Children	Genral	Bagwada	Seohara	Locomotive	40	CMO/M4/2020/5374

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S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
291	10-02-2020	Jaypal Singh	Raghuveer Singh	48	Male	Adult	Genral	Baksanpur	Dhampur	Locomotive	40	CMO/M4/2020/5383
292	10-02-2020	Setaram	Hariom	39	Male	Adult	Saini	Khalilpur Seohara	Bhudenpur	Locomotive	40	CMO/M4/2020/5386
293	10-02-2020	Tasavvur Aazim	Sarif Ahmad	26	Male	Adult	Muslim	Suwawala	Afzalgar	Locomotive	50	CMO/M4/2020/5406
294	10-02-2020	Jayparkhash	Prem Singh	45	Male	Adult	Genral	Iddalpur	Noorpur	Locomotive	100	CMO/M4/2020/5412
295	10-02-2020	Netik Kumar	Vekash Kumar	7	Male	Children	SC	Palanpur	Seohara	MR	90	CMO/M4/2020/5424
296	10-02-2020	Talib	Aktar	18	Male	Adult	Muslim	Thath Jat	Seohara	MR	75	CMO/M4/2020/5425
297	10-02-2020	Shareen Jaha	Asraf	20	Female	Adult	Muslim	Muzahidpur	Noorpur	Deaf	100	CMO/M4/2020/5426
298	10-02-2020	Shadat	Asraf	27	Male	Adult	Muslim	Muzahidpur	Noorpur	Deaf	70	CMO/M4/2020/5427
299	10-02-2020	Anjali	Venood Kumar	15	Female	Adolscen	SC	Thath Jat	Seohara	MR	75	CMO/M4/2020/5428
300	10-02-2020	Manesha	Preetam Singh	17	Female	Adult	Nai	Ruppur	Seohara	MR	100	CMO/M4/2020/5429
301	10-02-2020	Puja	Ful Singh	18	Female	Adult	SC	Muzahidpur	Noorpur	MR	90	CMO/M4/2020/5430
302	10-02-2020	Mukesh Kumar	Narayan Singh	27	Male	Adult	SC	Kedarpur	Allhepur	Locomotive	60	CMO/M4/2020/5431
303	10-02-2020	Ankit Kumar	Santram	21	Male	Adult	Dhemar	Abhaychand Sarak	Allhepur	Locomotive	75	CMO/M4/2020/5432
304	10-02-2020	Anita	Baburam Singh	37	Female	Adult	SC	Saddobearkha	Allhepur	Locomotive	40	CMO/M4/2020/5433
305	10-02-2020	Ompal Singh	Hori Singh	40	Male	Adult	SC	Saddobearkha	Allhepur	Locomotive	45	CMO/M4/2020/5434
306	10-02-2020	Shugandhet Kumar	Rajendar Singh	20	Male	Adult	SC	Ravana	Noorpur	MR	75	CMO/M4/2020/5435
307	10-02-2020	Aasharam	Indarpal Singh	24	Male	Adult	SC	Saddobearkha	Allhepur	Locomotive	40	CMO/M4/2020/5437
308	10-02-2020	Puja Devi	Mango Singh	27	Female	Adult	SC	Saddobearkha	Allhepur	Locomotive	40	CMO/M4/2020/5438

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S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
309	10-02-2020	Khumer Chand	Rehsipal Singh	37	Male	Adult	SC	Saddobearkha	Allhepur	Locomotive	40	CMO/M4/2020/5439
310	10-02-2020	Tez Singh	Chandarpal Singh	21	Male	Adult	SC	Saddobearkha	Allhepur	Locomotive	80	CMO/M4/2020/5440
311	10-02-2020	Vekash	Ramnat Singh	18	Male	Adult	SC	Hassupura Harkisa	Noorpur	MR	75	CMO/M4/2020/5441
312	10-02-2020	Prem Singh	Manphool	42	male	Adult	OBC	Tividi	Dhampur	Locomotive	40	CMO/M4/2020/5371
313	17-02-2020	Bhupender	Syam Singh	49	Male	Adult	OBC	Tividi	Dhampur	Locomotive	55	CMO/M4/2020/5458
314	17-02-2020	Nakul	Guddu	15	Male	Adult	SC	Azampur Noopur Dehat	Noorpur	MR	90	CMO/M4/2020/5459
315	17-02-2020	Govind Singh	Bsanta Singh	60	Male	Adult	SC	Ravana	Noorpur	Locomotive	50	CMO/M4/2020/5460
316	17-02-2020	Mohd Amzad	Mohd Hanif	31	Male	Adult	Muslim	Seohara	Bhudenpur	MR	50	CMO/M4/2020/5461
317	17-02-2020	Jyoti	Prem Chand	14	Female	Children	SC	Mehmudpur	Seohara	Locomotive	60	CMO/M4/2020/5462
318	17-02-2020	Satyapal Singh	Ajayveer Singh	35	Male	Adult	Genral	Nurallapur Udaych	Allhepur	MR	75	CMO/M4/2020/5463
319	17-02-2020	Mohd Akram	Abdul Hakeem	27	Male	Adult	Muslim	Ravana	Noorpur	Locomotive	60	CMO/M4/2020/5500
320	17-02-2020	Shana	Mohd Akram	34	Female	Adult	Muslim	Ravana	Noorpur	Locomotive	50	CMO/M4/2020/5501
321	17-02-2020	Tara Chand	Gajram Singh	47	Male	Adult	Genral	Umarpur Khader	Seohara	Locomotive	40	CMO/M4/2020/5502
322	17-02-2020	Narender Singh	Dharamveer Singh	37	Male	Adult	Genral	Thath Jat	Seohara	Locomotive	50	CMO/M4/2020/5503
323	17-02-2020	Narender Singh	Balveer Singh	43	Male	Adult	Genral	Thath Jat	Seohara	Locomotive	100	CMO/M4/2020/5504
324	17-02-2020	Yogesh Kumar	Chanderpal	29	Male	Adult	SC	Ruppur	Seohara	Locomotive	40	CMO/M4/2020/5508
325	24-02-2020	Monti Singh	Rajendar Singh	23	Male	Adult	Genral	Sarkada	Allhepur	Locomotive	50	CMO/m4/2020/5563

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S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
326	24-02-2020	Guddi	Mango Singh	40	Male	Adult	SC	Salarabad	Allhepur	Locomotive	40	CMO/M4/2020/5567
327	24-02-2020	Mohd Nazem	Mohd Ali	29	Male	Adult	Muslim	Bhelolpur	Seohara	Locomotive	40	CMO/M4/2020/5571
328	24-02-2020	Manju Devi	Mahaveer Singh	28	Female	Adult	SC	Rasulpur Merjalipu	Dhampur	Locomotive	50	CMO/M4/2020/5576
329	24-02-2020	Govind Singh	Bhupal Singh	26	Male	Adult	SC	Dhera Bulandi	Seohara	Locomotive	50	CMO/M4/2020/5578
330	24-02-2020	Mitlesh Devi	Ramratan Singh	36	Female	Adult	SC	Salarabad	Allhepur	Locomotive	50	CMO/M4/2020/5579
331	24-02-2020	Gulafsha Khatoon	Najir Ahmad	21	Female	Adult	Muslim	Sabdalpur	Seohara	Locomotive	50	CMO/M4/2020/5580
332	24-02-2020	Abreesha Khatoon	Peerbhaksh	27	Female	Adult	Muslim	Sabdalpur	Seohara	Locomotive	40	CMO/M4/2020/5581
333	24-02-2020	Afroj Khatoon	Jamil Ahmad	43	Female	Adult	Muslim	Beda	Noorpur	Deaf	100	CMO/M4/2020/5586
334	02-03-2020	Faeim Ahmad	Ilyash	25	Male	Adult	Muslim	Mehmudpur	Seohara	Locomotive	40	CMO/M4/2020/5610
335	02-03-2020	Rohit Kumar	Sanjay Saini	23	Male	Adult	OBC	Nagina	Kothwali	Locomotive	50	CMO/M4/2020/5614
336	02-03-2020	Meenu Devi	Vesan Savrup	42	Female	Adult	OBC	Sarkada	Dhampur	Locomotive	50	CMO/M4/2020/5639
337	02-03-2020	Mohd Amir	Sarafat Husain	9	male	Children	Muslim	Mehmudpur	Seohara	MR	70	CMO/M4/2020/5643
338	02-03-2020	Anshu	Natva	6	Male	Children	Saini	Khalilpur Seohara	Seohara	Locomotive	50	CMO/M4/2020/5645
339	02-03-2020	Partebha	Nobhar Singh	33	Female	Adult	Genral	Sadharanpur	Seohara	Locomotive	50	CMO/M4/2020/5650
340	02-03-2020	Sakuntla Devi	Govinda Singh	56	Female	Adult	Saini	Khalilpur Seohara	Seohara	Locomotive	50	CMO/M4/2020/5651
341	02-03-2020	Arman	Mohd Arif	8	Male	Children	MUslim	Rehepanpur	Seohara	CP	80	CMO/M4/2020/5664
342	02-03-2020	Kirashan Kumar	Raghuveer Singh	35	Male	Adult	Saini	Budaran	Allhepur	Deaf	70	CMO/M4/2020/5666

Service for Health and Rural Education Society

Disability Development and Entitlements Programmes

S. No.	Date	Name	Father/Husband' Name	Age	Gender	Type	Caste	Village	Block	Type of Disability	Disability %	Disability Registration Number
343	02-03-2020	Kumari Anita	Ajaypal Singh	31	Female	Adult	Genral	Taharpur	Noorpur	MR	50	CMO/M4/2020/5667
344	02-03-2020	Vedparkash Singh	Dungar Singh	47	Male	Adult	Genral	Baksanpur	Allhepur	Locomotive	60	CMO/m4/2020/5668
345	02-03-2020	Veer Singh	Narpal Singh	40	Male	Adult	SC	Sahapur Harra	Seohara	Locomotive	60	CMO/M4/2020/5669
346	02-03-2020	Peranshu	Sunil Kumar	6	Male	Children	SC	Purena	Noorpur	MR	60	CMO/M4/2020/5672
347	16-03-2020	Deepanshu	Bhole Singh	16	Male	Adult	SC	Nrollapur	Dhampur	Locomotive	50	CMO/M4/2020/5695
348	16-03-2020	Faimuddeen	Nazruddeen	22	Male	Adult	Muslim	Mansoei Saray	Seohara	Locomotive	100	CMO/M4/2020/5703
349	16-03-2020	Radhe Syam	Seetaram	29	Male	Adult	OBC	Poti	Noorpur	Locomotive	50	CMO/M4/2020/5697
350	16-03-2020	Pooja Devi	Kanheya Singh	24	Female	Adult	OBC	Poti	Noorpur	Locomotive	50	CMO/M4/2020/5698
351	16-03-2020	Sompal Singh	Karpal Singh	36	Male	Adult	OBC	Thath Jat	Allhepur	Locomotive	40	CMO/M4/2020/5714
352	16-03-2020	Dharamvati	Karpal Singh	31	Female	Adult	OBC	Thath Jat	Allhepur	Locomotive	50	CMO/M4/2020/5715
353	16-03-2020	Munni Davi	Lakhan Singh	42	Female	Adult	OBC	Tajpur	Noorpur	Locomotive	40	CMO/M4/2020/5728
354	16-03-2020	Nezamuddeen	Kutubuddeen	34	Male	Adult	Muslim	Dhera Bulandi	Seohara	Locomotive	40	CMO/M4/2020/5730
355	16-03-2020	Hemlata Rani	Mahipal Singh	8	Female	Children	Saini	Kanhedi	Noorpur	MR	65	CMO/M4/2020/5740
356	16-03-2020	Vishal Kumar	Khem Singh	18	Male	Adult	Saini	Tajpur	Noorpur	CP	90	CMO/M4/2020/5741
357	16-03-2020	Geeta	Ramesh	33	Female	Adult	OBC	Bhudanagla	Seohara	Locomotive	50	CMO/M4/2020/5742
358	16-03-2020	Maheshcand	Shukveer	59	Male	Adult	Genral	Kivad	Seohara	Locomotive	50	CMO/M4/2020/5743
359	16-03-2020	Metan Singh	Bhagwant Singh	80	Male	Adult	Genral	Sultanpor	Seohara	Locomotive	40	CMO/M4/2020/5745