CONTENTS

APD Strategy 2022-25
The APD Philosophy - Innovation, Scale & Sustainability: The Engine of Hope is on Track
Message from Honorary Secretary
Message from the CEO
Journey of APD
Guide to Understanding the Data
Dashboard
Early Intervention
Inclusive Education
Spinal Cord Injury Rehabilitation
Community Mental Health
Rehabilitation
Rehab on Wheels
Livelihood
Institute Of Disability Rehabilitation And Research (IDRR)
Policy Advocacy & Government Interface
Life Cycle Approach
Strategic Partnerships
Assistive And Adaptive Technology
Horticulture
Monitoring, Evaluation, Accountability & Learning (MEAL)
Human Resources
Administration
Donors
Financial Statements

OUR VISION
A world where equity, dignity and justice are assured for people with disability.

OUR MISSION
Nurture an inclusive ecosystem and empower people with disabilities with access to comprehensive rehabilitation services, rights, entitlements, equal opportunities, and dignity through a lifecycle approach.

OUR VALUES

INTEGRITY
Act honestly, ethically, and responsibly in all aspects, adhering to principles of fairness, reliability, loyalty, and lawfulness.

EMPATHY
Be sensitive to feelings, thoughts, emotions, and experiences by developing the capacity to place oneself in another’s position, understand their perspective, appreciate, and respond with care.

ACCOUNTABILITY
Demonstrate responsibility, transparency, and commitment to the highest standards of openness, professionalism, and integrity with all stakeholders such as PwDs, community members, donors, government, and vendors. Enable a space to voice concerns in a responsible and effective manner.

COLLABORATION
Commit to participatory processes, knowledge sharing, teamwork, consensus building, and seeking internal and external stakeholders to achieve our stated purpose.

EXCELLENCE
Demonstrate excellence in process, product, and service delivery. Listen to the recipient’s voice. Commit to continuous improvement and innovation by developing a conducive environment for individuals to realize their potential.

DIVERSITY
Nurture an internal ecosystem where people of diverse genders, cultures, abilities, views and needs are respected and given equal opportunities thus creating a harmonious & inclusive work environment.
OUR STRATEGY DEVELOPMENT APPROACH

**Phase 1**
ORGANIZATION DIAGNOSTIC
Understand and assess APD’s strengths and weaknesses

**Phase 2**
STRATEGY FORMULATION
Define and finalize strategies

**Phase 3**
STRATEGIC ROADMAP AND ORGANIZATION STRUCTURE
Developing roadmap for execution

**Phase 4**
FUNDRAISING PLAN
Formulate fundraising strategy

THE APD STRATEGY IS ANCHORED ON THE ORGANIZATION DIAGNOSTIC FRAMEWORK APPROACH

**Drivers of the Organization**
- Vision, Mission, and Values
- Board composition; Ability to leverage Board; Board value-add; Routines
- Strategic Planning; Clarity of 3-5 years strategy, Key Activities and Capabilities Required
- Staff, Leadership, and Functional Capabilities
- Operational planning, Quality, Execution, Review, Sustainability
- Documentation and Repository; IT Systems; Data Management
- Fundraising and People Processes, Capabilities, and Governance
- Community Engagement, Partnerships with other organizations, Government Engagement

**Governance**
- Board composition; Ability to leverage Board; Board value-add; Routines
- Strategic Planning; Clarity of 3-5 years strategy, Key Activities and Capabilities Required
- Staff, Leadership, and Functional Capabilities

**Strategy**
- Staff, Leadership, and Functional Capabilities

**People Capabilities**
- Staff, Leadership, and Functional Capabilities

**Programs & Operations**
- Operational planning, Quality, Execution, Review, Sustainability

**Knowledge Management**
- Documentation and Repository; IT Systems; Data Management

**Resource Management**
- Fundraising and People Processes, Capabilities, and Governance

**Ecosystem Management**
- Community Engagement, Partnerships with other organizations, Government Engagement

APD STRATEGY 2022-25

OUR 3-YEAR STRATEGY (2022-2025) IS BASED ON THESE THREE ENGINES

**Strengthen Engine of Innovation**
- Design and codify rigorous evidence-based programs
- Build internal impact measurement capabilities to demonstrate and refine programs
- Collaborate with third party organizations to create credible evidence of on-ground impact

**Grow Engine of Scale**
- Scale through implementation partners while taking accountability of outcome
- Choose the right partners with a strong mission and value alignment with APD
- Engage and grow the network of partners on an ongoing basis

**Establish Engine of Sustainability**
- Strengthen fundraising by diversifying donor portfolio and targeted value proposition
- Build social capital to position APD as a thought leader
- Engage and grow the network of partners on an ongoing basis

TO EXECUTE THIS STRATEGY, WE HAVE THREE KEY FOCUS AREAS

**People**
- Assigning dedicated owners and building expertise
- Assigning ownership
- Strengthening programs expertise
- Enhancing M&E expertise

**Partnerships**
- Clarity on partnership, and partnerships to demonstrate impact
- Clear partnership models highlighting the roles and responsibilities of the partner vs APD
- Third party assessments
- Institutions and government partnerships

**Processes**
- Strong systems and processes for internal governance
- Knowledge management
- Technology-enabled data collection and analysis
- Dedicated marketing
- Learning & Development

APD’s strategy has been developed with the support of
INNOVATION, SCALE & SUSTAINABILITY: THE ENGINE OF HOPE IS ON TRACK

Five-year-old Raju had always been an active and playful kid, running around the neighbourhood with his friends and chasing after his little sister. But everything changed when he was hit by a car while crossing the street, resulting in the loss of both his legs. Raju’s family was devastated, but they knew they had to be strong for him. With the help of his grandmother and mother, his most significant support system, Raju started the long and difficult process of learning to walk all over again – thanks to affordable prosthetic limbs.

Every child deserves the freedom to play. But for individuals with disabilities, the solution does not involve only quality mobility aids. It is the Engine of Hope, fueled by three critical components: Innovation, Scale, and Sustainability, that can help individuals and communities overcome obstacles and work towards a brighter future.

By embracing innovation, new possibilities are unlocked, and technologies and solutions can be developed to overcome barriers and support independence. Scaling up these innovations has the potential to bring benefits to more people, creating a widespread and far-reaching impact. However, it is only through sustainability that the promise of innovation and scale can truly be realized.

Together, these three elements form a formidable force that empowers people with disabilities to live fulfilling lives, contribute to their communities, and unlock the full potential of human possibility.

In the field of disability awareness and rehabilitation, innovation has been the driving force behind many successful projects. In the last year, the Association of People with Disability (APD) has rolled out varied innovative projects like Rehab on Wheels, which provides doorstep rehabilitation services in a mobile unit to individuals with disabilities, LCA (Life Cycle Approach) projects aimed at ‘Leaving no one behind’, a post-COVID Rehabilitation Project to support individuals recovering from COVID-19, and Embrace Me, an autism clinic providing specialized care and support for children and families. While these projects are backed by in-house experts, they also have the support of existing donors, with multi-year MoUs being signed to ensure long-term sustainability.

By continuously exploring new ideas, technologies, and approaches, we find more effective and efficient ways to help people with disabilities. However, we also believe that achieving scale is crucial in making a greater impact.

Sustainability is equally important, as we must ensure that these innovations can be maintained over the long term to ensure consistent outcomes. By promoting greater understanding and empathy towards those with disabilities, we want to create a more inclusive and compassionate society, where everyone is valued and supported regardless of their abilities.

As the Engine of Hope powers forward, we firmly believe that APD is charting a transformative course, illuminating the lives of countless individuals like Raju and paving the way to a future brimming with hope.

Through APD’s interventions, Raju was not only able to walk again, but also received medical care and rehabilitation services. This helped him regain more confidence and independence with each passing day. While the journey was not easy, through sheer determination and an unwavering support system, he was able to overcome his challenges.

Raju’s story is just one example of how our programmes are making a difference in the lives of people with disabilities. Through holistic, innovative interventions and our life cycle approach, people with disabilities can lead the full, joyous lives they deserve. Hop on the ride and see for yourself!
MESSAGE FROM THE HONORARY SECRETARY

The Invisibility of Disability

It is a unique experience to serve as the honorary secretary of a large and complex NGO like The Association of People with Disability (APD). One is blessed to be a part of a large and committed team of colleagues who are all working for some of the most disadvantaged persons in our country.

Disability is such a hard problem because no two persons are alike, even if they have the same disability. It requires the personalised attention and care that we provide, and it is gratifying that more donors are beginning to understand that we need patience and consistent support to reintegrate the disabled into society.

The disabled remain at the bottom of any index – whether it is health, education or good jobs. Therapy and rehabilitation services are not available in the government primary health system nor covered by insurance. APD's ability to bring a multi-disciplinary approach to disability is unique as many NGOs work only in one domain or area.

How big of a problem is disability in India?

At the aggregate level, disability needs far greater resources and attention than what it is getting. As India’s own understanding of disability has evolved, leading to the identification of 21 kinds of disability in the Rights of People with Disability Act of 2016, the data we have for disability still stems from the less-than-perfect 2011 census, which indicates that disability is a 2% problem.

When our country battles with so many greater and ostensibly larger problems, it is understandable that a 2% problem is often ignored. But are the disabled really just 2% of our population? Consider that many developed countries are reporting that close to 15% of their populations are suffering from some form of disability. Estimates by global health organisations are also higher for the disabled. As India ages and the elderly acquire all the forms of disability (motor, vision, hearing, mental), it is impossible that disability only affects such a small percentage of its population.

Where are the disabled?

I used to ponder why one sees so many more persons with disability when one travels abroad, even at unlikely places like amusement parks and tourist spots, at the theatre and restaurants. In contrast, even the 2% of our disabled fellow citizens (a not inconsiderable 30 million Indians) are not seen out there.

Imagine the population of two Bengaluru sized cities that are invisible?

It doesn’t take a genius to figure out why the disabled are hidden in plain sight. It is because our public spaces are designed with little thought to accommodating those with different abilities. This creates a barrier for them to participate as equal citizens in our society. It also hides from public view, the challenges they face and the indomitable spirit with which they still persevere to lead lives with dignity.

The ostensible reason for this exclusion is the lack of technically qualified census staff with the capability to properly enumerate the different disabilities. Surely NGOs and other health workers in the government, can be roped in to try to solve this problem. In our own experience, where we have done saturation enumeration of the disabled in sample villages, the numbers identified are considerably higher than the official statistics.

How can we remove the cloak of invisibility over the disabled?

If we could reduce the barriers faced by the disabled, more of them will be able to participate in the many things that the able population take for granted. It is our hope that a more inclusive and equal society will be the result of the disabled becoming more visible to the rest of us, including the policy makers.

Over the next three years, we hope to work on a large scale programme that will make the right to accessibility a reality. The campaign on accessibility will draw inspiration from the Prime Minister’s own Sugamya Bharat Abhiyan or Accessible India Campaign, which was announced in 2015.

Designed to create awareness about the challenges of accessibility in the built, mobility and digital environments, APD’s tech enabled “Yes to Access” campaign hopes to engage a large section of the able population to join hands in removing the cloak of invisibility and bring the disabled into the bright light of a more equal and inclusive India.
CEO’S MESSAGE

With 64 years behind us, we continue to empower disabled communities in India. Guided by WHO’s CBR Matrix and SDGs, we are focused on innovation & inclusion, introducing impactful projects and partnerships.

As we commemorate another year of success, I am brimming with pride and gratitude for the remarkable achievements we’ve realized collectively. With 64 years of experience underpinning us, we grasp the profound responsibility we bear in enabling, equipping, and empowering the rural disability community in India.

Our implementation approach stands firmly rooted in the World Health Organization’s Community-Based Rehabilitation (CBR) Matrix and the Sustainable Development Goals (SDGs). These goals encompass a broad spectrum of domains, encompassing education, health, poverty alleviation, and partnerships. They incite innovation, empowerment, and inclusive communities. By strategically aligning our initiatives with these SDGs, we amplify our impact and diligently strive to foster a more inclusive and just society for all. It remains our duty to consistently explore novel, evidence-based, innovative, impactful, scalable, sustainable, and pertinent methodologies in our work for the people we serve.

Key Strategic Goals & Accomplishments

Innovation: Innovation remains the bedrock of our endeavours to address the distinctive challenges faced by Persons with Disabilities (PWDs). Throughout 2022-23, we continued nurturing an environment of innovation, harnessing technology and research to birth pioneering solutions. We introduced a unique model of community-based projects, alongside assistive devices, accessible technologies, and design principles fostering the autonomy of PWDs.

Noteworthy and Innovative Milestones:

The ongoing codification of our best community-based rehabilitation practices holds the promise of optimizing resources, expanding our reach, and ensuring sustainability.

The introduction of “Rehab on Wheels” exemplifies a mobile rehabilitation unit reaching those previously out of touch. Formerly inaccessible individuals with disabilities and painful conditions can now access therapeutic services.

Our commitment to “Leaving no one behind” propelled the development of the Life Cycle Approach (LCA). This comprehensive strategy encompasses early intervention, education, skill development, livelihood support, mobility aid provision, spinal cord injury rehabilitation, community mental health counselling, and personalized social security schemes over a 3-year period. This approach, applied in aspirational districts, has proven remarkably effective.

The in-house creation of a patient hoist system, a customized wheelchair, is a transformative contribution to PWDs and their caregivers, available at affordable prices.

APD has pioneered agro-based and solar-energized self-employment opportunities, particularly for individuals with intellectual disability and spinal injuries.

A succinct certification course on Disability Rehabilitation Management was curated, benefiting numerous students in serving the community adeptly.

The integration of para-sports into our therapeutic endeavours led to PwDs winning 46 medals at both state and national competitions.

Scale: APD has expanded its footprint through strategic partnerships, extending to new geographies and states such as Kerala, Tamil Nadu, Telangana, and Andhra Pradesh.

Collaboration with 45 colleges and universities enriched knowledge-sharing and research initiatives.

Enhanced donor support underpins multiple projects, attesting to the growing trust in APD’s mission.

Sustainability: Preserving the longevity of our programs remains paramount. APD has diligently bolstered financial resilience via diverse funding sources, strategic partnerships, and innovative fundraising ventures. Moreover, eco-conscious practices have earned carbon credits and propagated sustainable development.

Technological advancements like geo-tagging, geo-fencing, and digital voucher approval have streamlined operations.

Empowering local communities through mothers’ collectives, peer networks, and various community-based organizations (CBOs) has expanded APD’s reach and influence. The “Learning & Development” initiative capacitates staff, enhancing their skills and expertise.

Meticulous Monitoring and Evaluation, exemplified by RAG analysis, fuels staff motivation and project progress tracking.

Engagement with government stakeholders leverages support and access to vital facilities. The establishment of “Parijat,” a 45-bed girls’ hostel, embodies the commitment to expanding training opportunities for young women with disabilities.

People, Process & Partnerships: The heart of any organization lies in its dedicated team. APD is fortunate to possess an exceptional team and streamlined processes, ensuring top-tier services for PwDs. Collaborations with kindred organizations, government bodies, and stakeholders remain pivotal to our success.
It remains our duty to consistently explore novel, evidence-based, innovative, impactful, scalable, sustainable, and pertinent methodologies in our work for the people we serve.

**Anticipating the Future**

As we journey ahead, our commitment to empowering PWDs and nurturing inclusivity remains unwavering. We shall persist in investing in innovation, scaling programs, fortifying sustainability, nurturing our team, refining our processes, and fostering strategic partnerships.

Together, we can dismantle barriers, challenge stereotypes, and construct a world where PWDs flourish.

I extend my heartfelt appreciation to our donors, partners, staff, and volunteers for their unwavering dedication and support. Your belief in our vision and dedication to our mission have been instrumental in our journey. Collectively, we metamorphose lives and leave an enduring impact.

Here’s to another year of transformative change!

Dr. N.S. Senthil Kumar, PhD (Rehab)
CEO, The Association of People with Disability
GUIDE TO UNDERSTANDING THE DATA
in the Annual Report 2022 - 2023

Programme Data:
To help the reader understand the depth and impact of our work, we have expanded this section. Please note that the diversity of our programs and modes of delivery, make cross-programme comparisons impossible. Numbers within a programme may differ due to variations in the data. We have avoided any assumptions or extrapolations in such cases.

1. Persons Impacted: This is our estimate of the total impact of our work with primary and secondary beneficiaries. Our comprehensive psychosocial approach works in a holistic manner with Persons with Disabilities - PwDs (Primary Beneficiaries) but also with the family and other stakeholders (Secondary Beneficiaries). The average family size is estimated at 4 members wherever data is not available.

2. Service Recipients: This includes persons, usually PwDs, who are the primary beneficiaries of our service.

3. Capacity Building: All persons in the disability ecosystem, their parents & family, health workers, and government employees – the capabilities to understand and support the disability ecosystem are enumerated here.

4. Sensitization: APD conducts various events and other engagements to sensitise laypersons to become more aware, empathetic and supportive of the cause of the disabled.
### OUR REACH AS ON MARCH 2023

<table>
<thead>
<tr>
<th>Developmental Intervention</th>
<th>Reach</th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Service Recipients</td>
<td>Capacity Building</td>
<td>Sensitization</td>
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<td>Early Intervention</td>
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<td>3423</td>
<td>11932</td>
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<tr>
<td>Inclusive Education</td>
<td>703</td>
<td>581</td>
<td>4096</td>
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<td>Livelihood</td>
<td>2233</td>
<td>1080</td>
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<td>Spinal Cord Injury Rehabilitation</td>
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<td>1210</td>
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<td>Community Mental Health Programme</td>
<td>1616</td>
<td>626</td>
<td>5215</td>
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<td>Rehabilitation</td>
<td>2047</td>
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<td>1363</td>
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<tr>
<td>Institute of Disability Rehabilitation and Research</td>
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<td>6988</td>
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<td>Collaborations</td>
<td>17423</td>
<td>478</td>
<td>3839</td>
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<td>Assistive and Adaptive Technology</td>
<td>1420</td>
<td>1420</td>
<td>5680</td>
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<td>New Initiatives - Life Cycle Approach Project</td>
<td>11200</td>
<td>4800</td>
<td>8800</td>
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<td><strong>Total</strong></td>
<td>43314</td>
<td>12723</td>
<td>54883</td>
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### SUSTAINABLE DEVELOPMENT GOALS

Aligning our strategies with the Sustainable Development Goals (SDGs) is a top priority for APD as we strive to promote sustainability and make a positive impact.

<table>
<thead>
<tr>
<th>SDG</th>
<th>Title</th>
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<tbody>
<tr>
<td>01</td>
<td>No Poverty</td>
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<tr>
<td>02</td>
<td>Zero Hunger</td>
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<tr>
<td>03</td>
<td>Good Health and Well-being</td>
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<tr>
<td>04</td>
<td>Quality Education</td>
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<td>05</td>
<td>Gender Equality</td>
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<tr>
<td>06</td>
<td>Clean Water and Sanitation</td>
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<td>07</td>
<td>Affordable and Clean Energy</td>
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<tr>
<td>08</td>
<td>Decent Work and Economic Growth</td>
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<td>09</td>
<td>Industry, Innovation and Infrastructure</td>
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<td>10</td>
<td>Reduced Inequalities</td>
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<td>11</td>
<td>Sustainable Cities and Communities</td>
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<tr>
<td>16</td>
<td>Peace, Justice and Strong Institutions</td>
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<td>17</td>
<td>Partnerships for the Goals</td>
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### Beneficiaries Impacted

<table>
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<tr>
<th>Category</th>
<th>Number</th>
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<tr>
<td>Primary Beneficiaries</td>
<td>11,092</td>
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<tr>
<td>Secondary Beneficiaries</td>
<td>17,3256</td>
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<tr>
<td>Total Beneficiaries Impacted</td>
<td>28,4176</td>
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</table>
EARLY INTERVENTION

This programme focuses on the rehabilitation of underprivileged children with disabilities. With an emphasis on prevention, early detection, skill enhancement, and efficient service delivery, the programme involves families as interventionists through cost-effective methods.

Purpose of the programme

10% of 11.5 million people with disabilities are children under the age of 5 globally.

Less than 50% of children identified by the Rashtriya Bal Swasthya Karyakram (RBSK) team report to the District Early Intervention Centres.

26% of Integrated Child Development Services (ICDS) beneficiaries experience malnutrition in the state.

Infrastructural scarcity in Anganwadis result in low enrolment of children with special needs.

India’s current infant mortality rate stands at 26.67 per 1000 live births, despite a decline over the past four years.

Our Impact

34% of children with special needs (CwSN) showed progress in one or more domains.

6204 Villages were covered to reach 3224 CwSN.

Age Distribution

Genderwise Classification of Beneficiaries

Male 1877 (58%)
Female 1347 (42%)

Disability Classification of Beneficiaries

Malnutrition 14% (142)
Speech & Hearing Impaired 3% (35)
Visually Impaired 85 (365)
Locomotor Disability 11% (119)
Intellectual Disability 7% (72)
Multiple Disability 1% (11)
Others 4% (44)

BPL vs APL

99% 3203 APL
1% 21 BPL

37% 1199 Direct
63% 2025 Partnership

Grand Total 3224

Direct Implementation vs Partner Implementation

1542 Children were enrolled in Anganwadi centres.

187 CwSN received medical intervention support to promote inclusion.

602 Children were enrolled in schools.

Engine of Innovation

APD’s ‘Mother as Interventionist’ project enhanced to emphasize developing life skills for children with special needs.

Engine of Scale

Zonal master trainers created at 7 locations.

Expansion to 14 districts and 2 states.

Established collaborations with 14 financial and 3 technical partners.

Engine of Sustainability

22 active mothers groups formed, comprising 154 mothers who provide assistance.

Increased donor base from 2 to 9.

Increased funding funnel from Rs 59 lakhs to Rs 2.7 crores.
Geographical Classification of Beneficiaries

<table>
<thead>
<tr>
<th>Location</th>
<th>Beneficiaries</th>
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<tbody>
<tr>
<td>Bengaluru</td>
<td>1143</td>
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<td>Belagavi</td>
<td>1434</td>
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<tr>
<td>Kalaburagi</td>
<td>500</td>
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<td>Mysore</td>
<td>124</td>
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<tr>
<td>Outside Karnataka</td>
<td>23</td>
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<tr>
<td>Grand Total</td>
<td>3224</td>
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</table>

Purpose of the programme

In Karnataka, 40% of Persons with Disabilities (PwDs) lack literacy skills.

Only 14% attain primary education, 6% obtain a graduate degree or higher.

As per the 2014 National Survey on the Estimation of Out-of-School Children, in Karnataka, out of a total of 76,825 children with disabilities aged between 6 and 13 years who were surveyed, 23% were not attending school.

Our Impact

- **63%**: Overall improvement in reading, writing, and mathematics abilities, compared to the baseline test.
- **29**: Minority scholarships gained through social security schemes.
- **11**: Model schools received teacher training, benefitting 69 participants.
- **304**: Students benefitted from individual & structured education plans.
- **67**: Students obtained UDID cards.

Genderwise Classification of Beneficiaries

<table>
<thead>
<tr>
<th>Gender</th>
<th>Beneficiaries</th>
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</thead>
<tbody>
<tr>
<td>Boys</td>
<td>414</td>
</tr>
<tr>
<td>Girls</td>
<td>289</td>
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</tbody>
</table>

Manoj’s Journey from Uncertainty to Progress

Manoj, 7, was born prematurely with cerebral palsy, leaving his parents unsure how to care for him. They were referred to the Association of People with Disability (APD) by another parent who had benefited from the organization.

An interventionist from APD provided tailored support, empowering Manoj’s parents to care for him. With their help, Manoj has made significant progress and can now stand with minimal support. He is ready to be enrolled in school, and we see a bright future for him ahead!
Engine of Innovation
Introduced BSG (Bharat Scouts and Guides)
Introduced pre-vocational training on horticulture for 68 children in classes 6 and 7
Development of SRC (School Readiness Centre) as functional centres.

Engine of Scale
Initiated 3 new projects through BIERTs in Bengaluru Rural, Bengaluru Urban and Belagavi
Established a Memorandum of Understanding (MoU) with Jai Vakeel Foundation to implement a strategy for Children with Intellectual Disability

Engine of Sustainability
Upgraded classes to 8th standard
Formed SDMC Committee and Children Committee
Number of donors increased from 3 to 6 and scope has been extended
Strengthened government collaboration

Disability Classification

<table>
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<tr>
<th>Disability Classification</th>
<th>133</th>
<th>336</th>
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<tr>
<td>Intellectual Disability</td>
<td>19%</td>
<td>48%</td>
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<tr>
<td>Locomotor Disability</td>
<td>61</td>
<td>9%</td>
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<tr>
<td>Multiple Disability</td>
<td>46</td>
<td>7%</td>
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<tr>
<td>Non-Disabled</td>
<td>104</td>
<td>15%</td>
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<tr>
<td>Speech &amp; Hearing Impaired</td>
<td>46</td>
<td>3%</td>
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<tr>
<td>Visually Impaired</td>
<td>24</td>
<td>3%</td>
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Geographical Classification of Beneficiaries

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<th>Belagavi</th>
<th>Sharadhanjali Integrated School</th>
<th>School Support Programme</th>
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<tr>
<td>13%</td>
<td>17%</td>
<td>43%</td>
<td>703</td>
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Educational Stage Classification

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<th>37% 259</th>
<th>25% 175</th>
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<tr>
<td>Foundational</td>
<td>17%</td>
<td>9%</td>
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<tr>
<td>Preparatory</td>
<td>40%</td>
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<tr>
<td>Middle</td>
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</tr>
<tr>
<td>Secondary</td>
<td>65%</td>
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Pawan Kumar: From Shy Start to Victory Dash

Thirteen-year-old Pawan Kumar was admitted to Class 7 of Shradhanjali Integrated School in 2022. Due to his slurred speech and lack of confidence, he kept to himself and found socialising challenging. After a few months with dedicated therapists and supportive teachers, Pawan’s life took a remarkable turn when he was encouraged to participate in the Paralympics.

Pawan’s initial hesitation dissolved as he dedicated himself to training and competitions. His hard work paid off when he secured 3rd place in the 100 metres event at the Para Athletic Championship 2022. He even clinched 1st place in the javelin throw at the Paralympic Championship 2022.

Now, Pawan takes immense pride in sharing his experiences and the joy he has derived from participating in various sports events. He is determined to continue pursuing his dreams in athletics, aspiring to achieve even greater milestones.
SPINAL CORD INJURY REHABILITATION

With a “Cot to Community” approach, we aim for the comprehensive rehabilitation of socio-economically backward persons with Spinal Cord Injuries in rural Karnataka.

**Purpose of the programme**

- WHO estimates **250,000 to 500,000 SCI cases annually** (global)
- Our project estimates around **1,000 cases annually** in Karnataka, with a majority in rural areas
- Spinal cord injury is often **grouped under locomotor disability**
- Not enough organized federations are present for **advocacy and support**
- Spinal cord injury is considered the **costliest ailment**, according to the Rehabilitation Council of India
- People with spinal cord injuries are 2x to 5x more likely to have **premature mortality rates** than those without such injuries

**Our Impact**

- **15,800 Villages accessed across 18 districts in Karnataka**

**Geographic Classification**

- Bengaluru: 279 (16%)
- Belagavi: 382 (22%)
- Kalaburagi: 336 (20%)
- Mysore: 641 (38%)
- Other: 63 (4%)

**Age Classification**

- 1-10: 20 (1%)
- 11-20: 47 (2%)
- 21-30: 339 (19%)
- 31-40: 501 (29%)
- 41-50: 453 (26%)
- 51+: 341 (20%)

**Service Recipients**

- Male: 1515 (89%)
- Female: 186 (11%)

**Implementation Reach**

- Direct: 677
- Partner: 1024

- 40% Medical intervention support provided, 90% reduction in secondary complications

**Our Impact**

- **1,701 Beneficiaries identified in the community**
- **237 Individuals provided with livelihood opportunities**
- **45 Individuals trained 18 para athletes competed at state & national levels 19 medals won**

**Engine of Innovation**

- Cost effective innovation research on wheelchair and patient hoister

**Engine of Scale**

- Project geography expanded from 8 to 18 districts.
- Collaboration with Spinal Cord Injury Prevention Society across India

**Engine of Sustainability**

- 7 peer trainers for community facilitation.
- 3 new CBOs at district level for Policy & Advocacy

**WHO estimates 250,000 to 500,000 SCI cases annually (global)**

**Our project estimates around 1,000 cases annually in Karnataka, with a majority in rural areas**

**Spinal cord injury is often grouped under locomotor disability**

**Not enough organized federations are present for advocacy and support**

**Spinal cord injury is considered the costliest ailment, according to the Rehabilitation Council of India**

**People with spinal cord injuries are 2x to 5x more likely to have premature mortality rates than those without such injuries**
Shreya, 10, faced unique challenges in life due to her condition, Spina Bifida. Despite being unable to walk or feel any sensation in her lower body, she had a strong passion for dancing.

When she was 6, she was referred to APD’s Spinal Cord Injury Rehabilitation (SCIR) department by a former beneficiary. Thanks to the therapy and support received from the centre, Shreya underwent medical interventions and rehabilitation, empowering her to achieve her aspirations.

Shreya also received a customized wheelchair that perfectly suited her needs. She was trained in advanced wheelchair skills, allowing her to dance with grace and awe-inspiring passion. Her determination and joy are evident as she expresses herself on stage.
The Community Mental Health Programme aims at comprehensive rehabilitation for People with Mental Illnesses (PwMI) who require psychological, social, and economical rehabilitation.

A NIMHANS study reports that nearly 150 million Indians are in need of mental health care services, but fewer than 30 million seek care.

Over 10% of the population has diagnosable mental health or substance use disorder.

Due to a lack of education and awareness concerning psychological disorders, mental health disorders often remain hidden.

Rural parts of India face a shortage of mental health professionals, resulting in insufficient treatment options for individuals seeking help.

India has 0.75 psychiatrists for every 100,000 patients in India. The desired number is anything above 3 psychiatrists per 100,000.

Less than 1% of the country’s total budget for health is allocated for mental health.

Implementation of new tools: MERIT, PHQ9, and The Modified Caregiver Strain Index.

APD appointed as a member of Mental Health Review Board for Kalaburagi and Belagavi Divisions by the state govt.

Presentation of a paper titled “Challenges and Opportunities for Caregivers of Persons with Mental Illness” at the National Conference on ‘Rethinking the Idea of Disability’ in Mysore, highlighting the Davanagere fellowship programme as a noteworthy initiative.

Purpose of the programme

Key Highlights

Geographical Classification

Age Classification

Social Acceptability

Activities of Daily Living

Interpersonal Relationships

Service Recipients

Members of SHG, DPO & others
Sitaram, a 38-year-old resident of Aland taluk in Gulbarga, lives with his wife and two children. Since the age of 6, Sitaram has battled with mental disturbances, just like his parents who have been undergoing treatment for a prolonged period. After completing his 10th grade, Sitaram moved to Mumbai to work as a helper. However, Sitaram’s mental health took a turn for the worse as he started experiencing extreme paranoia. He became convinced that someone was following him, experienced sleep disturbances, and frequently fought with his wife. Concerned about his well-being, Sitaram’s family took him to Dharwad for an assessment, where he was admitted for 15 days to receive further treatment.

Unfortunately, the long distance between Gulbarga and Dharwad made it challenging for the family to attend follow-up sessions, leading to a worsening of Sitaram’s symptoms. This, in turn, had a detrimental impact on their daily lives, exacerbating their financial struggles. Fortunately, during a community visit to Sitaram’s village, the staff from the Association of People with Disability visited his home. After thoroughly discussing the situation with the family, they counselled Sitaram’s wife and referred him to the District Mental Health Program at the Aland Taluk Government Hospital.

With 2-3 follow-up sessions, Sitaram’s mental health gradually improved, allowing him to find work as a labourer in his village. The family is now relieved and grateful that Sitaram’s condition is consistently monitored and managed.

REHABILITATION

The Rehabilitation programme’s objective is to deliver comprehensive biopsychosocial rehabilitation through a multidisciplinary team. This approach caters to a wide range of ailments, aiming to enhance functional independence and elevate the overall quality of life. The programme focuses on offering physiotherapy, occupational therapy, as well as speech and language therapy, counselling, and employing systematic assessments for diverse orthopaedic and neurological clinical cases.
A pivotal goal was the establishment of our Rehab on Wheels project, bringing accessible and top-notch rehabilitation services right to people’s doorsteps, while also fostering health and disability awareness within the general public.

Engine of Innovation
Established Rehab on Wheels
Proficient instructors and master trainers established within every rehabilitation initiative

Engine of Scale
Intensified rehabilitation for Livelihood and LCA beneficiaries, and SIS students through dedicated staff, revised assessments and delivery models
Focused increase in walk-ins & services extending to general public

Engine of Sustainability
Effective collaborations with other internal programs
Beneficiary contributions towards services provided

The Launch of Rehab on Wheels, India’s pioneering mobile rehabilitation unit, has transformed the lives of elderly individuals and those suffering from painful ailments in vulnerable urban areas of Bengaluru.

Through local collaborations with over 14 geriatric homes and 4 special schools, a significant gap in rehabilitation needs has been bridged. The team’s dedication to sensitization through face-to-face visits, effectively communicating their working philosophies and infrastructural capabilities, has garnered popularity for the programme.

With services that meet the medical standards of corporate hospitals, the team has been able to reach an average of 40 beneficiaries per working day, making a profound impact in the community.

The following are the key statistics:
- **Beneficiaries reached**: 869
- **Services Provided**: 4579
- **Service points (Locations)**: 23
- **Area travelled (in Kilometres)**: 3500
- **Distributed assistive devices / wheelchairs**: 18

### Gender Classification of Beneficiaries

<table>
<thead>
<tr>
<th>Gender</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>570</td>
<td>36%</td>
</tr>
<tr>
<td>Female</td>
<td>339</td>
<td>64%</td>
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</table>

### Age Classification of Beneficiaries

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
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<tr>
<td>0-8</td>
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<tr>
<td>9-17</td>
<td>26</td>
<td>4%</td>
</tr>
<tr>
<td>18-35</td>
<td>165</td>
<td>26%</td>
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<tr>
<td>36-45</td>
<td>155</td>
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<tr>
<td>46-60</td>
<td>252</td>
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<tr>
<td>61-80</td>
<td>232</td>
<td>33%</td>
</tr>
<tr>
<td>81+</td>
<td>33</td>
<td>4%</td>
</tr>
</tbody>
</table>
**LIVELIHOOD**

This programme aims at equipping, enabling and empowering people with disabilities with suitable livelihood opportunities so that they can lead functional & financially independent lives through skilling, employment, and rehabilitation.

**Purpose of the programme**
- Only 0.37% of all posts in ministries and departments, 0.44% posts in public sector companies filled by PwDs
- Over 15,000 reserved job vacancies in government and public sector yet to be filled
- No. of placements of PwDs by employment exchanges has seen steady decline
- NREGA operational guidelines 2008 states “If a rural disabled person applies for work, work suitable to his/her ability and qualification will have to be given.”
- Of the total people employed under NREGA, only 0.67% were PwDs

**Gender Classification of Beneficiaries**

<table>
<thead>
<tr>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>1575</td>
<td>658</td>
</tr>
<tr>
<td>71%</td>
<td>29%</td>
</tr>
</tbody>
</table>

**Our Impact**
- 98% of beneficiaries in livelihood training graduated from the programme
- 42% Earn more than Rs 10,000 per month
- 90% Placed in jobs
- 87% Continue to be employed beyond 3 months

**Socio Economic Status**

<table>
<thead>
<tr>
<th>APL</th>
<th>BPL</th>
</tr>
</thead>
<tbody>
<tr>
<td>66</td>
<td>6</td>
</tr>
<tr>
<td>97% 2167</td>
<td>3%</td>
</tr>
</tbody>
</table>

**Disability Classification of Beneficiaries**

- Mental Illness: 1% (21)
- Non-Disabled: 1% (30)
- Multiple Disability: 1% (30)
- Intellectual Disability: 4% (70)
- Visually Impaired: 8% (183)
- Speech & Hearing Impaired: 28% (616)
- Locomotor Disability: 57% (1273)

**Started in 1959**

**Engine of Innovation**
- Mushroom cultivation training initiated
- Established Inclusive Cricket League 2022 at Kalkere, Bengaluru with 300+ stakeholders
- Incorporated Sports for Health and Inclusion in the curriculum

**Engine of Scale**
- This project pans across 5 states in South India through partnerships
- Established a new network to enhance horticulture training at Bayer Crop Science Breeding Station in Chikkaballapura
- Signed an MOU with the Bengaluru Chamber of Industry and Commerce (BCIC)

**Engine of Sustainability**
- Identified a database of over 30 new employers
- Over 150 opportunities in the pipeline
- Successfully revived life skills training programme
Assisted in obtaining Unique Disability ID Cards (UDID)

Supported participation in the Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA) programme

Assisted in opening bank accounts with nationalised banks for salary purposes

Helped with Aadhaar card corrections and applying for PAN cards

Created awareness about other social security schemes

Geographical Classification of Beneficiaries

<table>
<thead>
<tr>
<th>State</th>
<th>Beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Andhra Pradesh</td>
<td>163</td>
</tr>
<tr>
<td>Karnataka</td>
<td>22</td>
</tr>
<tr>
<td>Kerala</td>
<td>160</td>
</tr>
<tr>
<td>Tamil Nadu</td>
<td>10</td>
</tr>
<tr>
<td>Telangana</td>
<td>10</td>
</tr>
</tbody>
</table>

Age Group

- 18-35: 85% (1888)
- 36-55: 14% (304)
- 56-65: 1% (23)
- 65+: 1% (18)

Educational Category

<table>
<thead>
<tr>
<th>Category</th>
<th>Beneficiaries</th>
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<tbody>
<tr>
<td>PG</td>
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<tr>
<td>Graduation</td>
<td>176</td>
</tr>
<tr>
<td>Diploma</td>
<td>159</td>
</tr>
<tr>
<td>12th Class</td>
<td>271</td>
</tr>
<tr>
<td>10th Class</td>
<td>678</td>
</tr>
<tr>
<td>1st-9th Class</td>
<td>268</td>
</tr>
<tr>
<td>Special School</td>
<td>6</td>
</tr>
<tr>
<td>No-School</td>
<td>649</td>
</tr>
</tbody>
</table>

Social benefits and facilities support for beneficiaries with special needs:

- Assisted in obtaining Unique Disability ID Cards (UDID)
- Supported participation in the Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA) programme
- Assisted in opening bank accounts with nationalised banks for salary purposes
- Helped with Aadhaar card corrections and applying for PAN cards
- Created awareness about other social security schemes

Chandrantha: Defying the Odds

Chandrantha, a 28-year-old individual hailing from Kalaburagi District, introduces himself as a dwarf and someone who battles multiple diseases. His father, a coolie by profession, serves as the primary breadwinner, responsible for the well-being of their family, which includes Chandrantha, his mother, and two brothers. After learning about APD, he joined the livelihood training programme, which proved to be a turning point in his life. Through the training, Chandrantha gained confidence and witnessed significant improvement in his skills.

Following the completion of his training, Chandrantha secured a job placement at Mitti Café, where he currently works as a cashier. His monthly salary amounts to Rs. 9000/- and the job comes with the additional benefits of food and accommodation. Chandrantha is immensely grateful and happy at how his life turned around through this intervention.
**INSTITUTE OF DISABILITY, REHABILITATION & RESEARCH (IDRR)**

**Purpose of the programme**

To align with WHO’s Rehabilitation 2030 initiative, which asserts rehabilitation should be available for all, through all stages of life.

Karnataka is home to **13.24 lakh** people with disability (as per Census 2011).

Scarcity of rehabilitation services under government programs.

Demand for **speciality services** like hydrotherapy, sensory integration, and behavioural interventions.

Lack of **affordable** specialist rehabilitation services in rural areas, and shortage of skilled staff.

**Our Impact**

- **95%** of IDRR-trained professionals employed in the disability sector, serve the last mile.

**Age Classification**

- 9-17: 172 (24%)
- 18-35: 432 (61%)
- 36-45: 9 (1%)
- 46+: 91 (13%)

**Service Recipients**

- Male: 570 (37%)
- Female: 339 (63%)

**Geographical Classification**

- Jharkhand: 90% (815)
- Karnataka: 9% (77)
- Kerala: 0% (3)
- Orissa: 0% (5)
- Tamil Nadu: 1% (5)
- Andhra Pradesh: 1% (5)

**Engine of Innovation**

Research unit of the organisation set up, student enrollment initiated

Introduced a learning and development (L&D) unit, training process initiated

**Engine of Scale**

Collaborated with 49 universities Pan-India, trained 434 students in various disability rehabilitation services

**Engine of Sustainability**

95% placements achieved

IDRR received RCI recognition, with affiliation for 5 years

**Fostering academic and research excellence in rehabilitation, disability prevention, and management.**

**INSTITUTE OF DISABILITY, REHABILITATION & RESEARCH (IDRR)**

**Started in 2014**
Rajeshwari, a field worker, had been working at APD for five years in Bijapur district. She was inclined to work in the disability sector, particularly in the community. To enhance her knowledge and skills, she enrolled in the Certificate Course in Rehabilitation Therapy (CCRT) course offered by IDRR.

Initially, Rajeshwari struggled to comprehend the subjects, as it was entirely different from her core skills. However, with her teachers’ and friends’ guidance and support, she managed to stay on track. Her hard work paid off, and she successfully completed the course with outstanding results, securing 796 marks.

Today, Rajeshwari works on the Life Cycle Approach (LCA) project at Yadgiri. She is able to effectively apply the knowledge she gained through the course, and draws immense satisfaction working in the disability sector. What’s more, the job has also enabled her to provide financial support to her family, helping her son complete his education and pursue MBBS.
POLICY ADVOCACY AND GOVERNMENT INTERFACE

Policy Advocacy networks and collaborates with educational institutions, DPOs, NGOs, and govt. stakeholders to influence policy change and the inclusion of PwDs through strengthening knowledge, practice, and attitudes.

Our Impact

Under the MGNREGA scheme, 2010 new cards were provided with the support of RPD taskforce, guaranteeing a total of Rs 1.74 crores in funds for PwDs.

Rs 5.26 crore worth health insurance ensured for 526 NIRAMAYA beneficiaries

Rs 59.61 lakh accessed by 269 PwDs for assistive devices

9 news items published in local newspapers on PwD issues, 25 memorandums submitted to various govt. departments

Rs 55 lakh Aadhaar card loan ensured for 55 PwDs

2000 retrofitted two-wheelers approved by the Disability Welfare Department, worth Rs 15 crore

91432 Persons Impacted . Capacity Building - 478 . Sensitization - 3839

NIRAMAYA Beneficiaries’ Insurance Claim and Reimbursement

Policy and Advocacy Influence

Transforming Healthcare Access for Persons with Disabilities: The NIRAMAYA Journey in Karnataka (2020-2023)

In India, the Constitution recognizes the right to life and personal liberty under Article 21. Although health isn't explicitly mentioned as a right, judicial interpretations have incorporated it within Article 21. Furthermore, the Directive Principles of State Policy (DPSP) in Chapter IV of the Constitution outline the state’s responsibilities, including promoting welfare, protecting health, providing assistance in cases of sickness and disability, and improving public health.

NIRAMAYA health insurance addresses the needs of Persons with Disabilities (PwDs) with conditions such as Autism, Cerebral Palsy, Intellectual disability, and multiple disabilities. The COVID-19 pandemic exacerbated health concerns for PwDs, especially those in the National Trust Act category facing economic hardships and poverty. APD, as the state’s nodal agency centre of National Trust, initiated the NIRAMAYA health insurance process in Karnataka in 2020-21, collaborating with the Women and Child Development Department, Disability Directorate, Commissioner of PwDs, and Municipal Administration to advocate for policy guidelines and resources for PwDs.

In 2020-21, APD submitted request letters to 30 district Deputy Collectors, Chief Executive Officers, District Disability Welfare Officers, and urban planning directors, urging them to issue circulars allocating 5% of resources to NIRAMAYA insurance. Simultaneously, memorandums were submitted to the Directorate of Municipal Administration and Disability Directorate to issue circulars. Responding to these efforts, the CEO of Bengaluru Urban District directed all Panchayat Development Officers to ensure NIRAMAYA coverage at
the Gram Panchayath level under the 5% resource allocation. This proactive approach led to 11 district administrations issuing circulars to urban local bodies, promoting the importance of NIRAMAYA in 30 districts.

Due to the COVID-19 pandemic, follow-up activities with government departments were deprioritized in 2020-21. However, in 2021-22, after the lockdown, the Policy Advocacy (PA) and Government Interface (GI) team resumed their efforts.

Eventually, the state government issued an order allowing NIRAMAYA health insurance premiums to be covered under the 5% resource allocation for urban local bodies.

In 2022-23, the PA and GI team engaged with the Disability Directorate to increase budget allocations for NIRAMAYA health insurance premiums. In the 2021-22 financial year, only Rs 1 lakh was allocated for NIRAMAYA health insurance. Intensive discussions and orientations on NIRAMAYA were held with district-level officers over 10 meetings. As a result, the directorate recognized the necessity of NIRAMAYA premiums, releasing an average of Rs. 30,000 per beneficiary for premium payments. NTA-registered organizations were also mobilized to support PwDs in accessing NIRAMAYA. Approximately Rs 6 lakh was allocated to NGOs in Karnataka, covering 2400 beneficiaries, while APD received Rs. 1.70 lakh for premium payments in neighbouring and LCA districts.

**LEARNING EMPATHY, NOT SYMPATHY (LENS)**

A disability awareness programme for school children

A Knowledge, Attitude, and Practice (KAP) Study was conducted on the LENS programme (previously known as Disability Awareness for School Children), involving 100 children from 68 schools in the Doddaballapura education block. The findings revealed:

- **75%** of the children were actively involved in raising awareness about disabilities in one way or another.
- **24%** of the children spoke out against the ill-treatment of children with disabilities (CwDs).
- **63%** of the children demonstrated an increased awareness and positive attitude towards CwDs.
- **63%** of the children acknowledged that people in their community exhibited a positive attitude towards Persons with Disabilities (PwDs).
- **82%** of the children expressed their willingness to have a person with a disability as their neighbour.
Purpose of the programme

The Life Cycle Approach (LCA) ensures the provision of tailored services catering to various age groups within combined groups of Persons with Disabilities (PwDs). This approach guides them on a path of progress to attain their specific goals within predefined timeframes, thereby fostering positive outcomes.

The approach is also a cost effective way of implementing projects as compared to the stand-alone projects.

This initiative represents the integration of all of APD’s programs within the selected regions of Yadgiri, Chitradurga, Srinivaspur, and Raichur. The aim is to harness the collective capabilities of these projects to provide services through both internal and external referrals.

Life Cycle Approach Projects

<table>
<thead>
<tr>
<th>LCA Project</th>
<th>Taluk Coverage</th>
<th>Panchayat Coverage</th>
<th>Target Population (CwDs and PwDs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yadgiri</td>
<td>6 Taluks</td>
<td>67</td>
<td>8632</td>
</tr>
<tr>
<td>Chitradurga</td>
<td>1 Taluk</td>
<td>6 Panchayats and 8 wards</td>
<td>1139</td>
</tr>
<tr>
<td>Raichur</td>
<td>1 Taluk</td>
<td>3 Panchayats</td>
<td>703</td>
</tr>
<tr>
<td>Srinivaspur</td>
<td>1 Taluk</td>
<td>5 Panchayats</td>
<td>617</td>
</tr>
</tbody>
</table>

Disability Classification of Beneficiaries

<table>
<thead>
<tr>
<th>Disability Classification</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intellectual Disability</td>
<td>8%</td>
</tr>
<tr>
<td>Locomotor Disability</td>
<td>36%</td>
</tr>
<tr>
<td>Malnourished</td>
<td>1%</td>
</tr>
<tr>
<td>Mental Illness</td>
<td>2%</td>
</tr>
<tr>
<td>Multiple Disability</td>
<td>6%</td>
</tr>
<tr>
<td>Speech&amp;Hearing Impaired</td>
<td>14%</td>
</tr>
<tr>
<td>Visually Impaired</td>
<td>12%</td>
</tr>
</tbody>
</table>

Tejaswini Challenges Thalassemia

Tejaswini, born full-term weighing 2 kg, progressed through her early milestones smoothly until a health setback emerged at age two, marked by jaundice and low haemoglobin levels. Despite initial hopes of recovery, recurring fevers struck every 15 days. Tejaswini was soon diagnosed with Thalassemia, necessitating regular blood transfusions.

Amid financial challenges, her family sought treatment across healthcare institutions and turned to government hospitals. Despite her academic promise, her health struggles led to missed classes, dampening her spirits. Tejaswini’s sister, Vandana, shared the same Thalassemia diagnosis, both requiring bi-monthly transfusions to avoid severe symptoms. While Vandana was lucky enough to find a potential bone marrow transplant in her brother, Tejaswini continues to await a compatible donor, with each hospital visit incurring substantial expenses. Support from APD and the Mindtree Foundation has been invaluable in their journey.

The Gram Sabha is at the heart of village development, focusing on local governance and development discussions. It was mandated by government orders on July 25, 2019, and October 29, 2022, to hold special Gram Sabhas for persons with disabilities in Karnataka. Yadgiri district initiated these special Gram Sabhas on November 3, 2022, and November 17, 2022, with objectives including addressing the needs of Persons with Disabilities, resource allocation, and disability-friendly environments. The impact was significant, with 96 Gram Sabhas held, involving 3360 persons with disabilities who raised concerns and led to tailored initiatives and MNREGA job issue resolutions. APD played a significant role in ensuring the participation of PwDs in Gram Sabhas.
STRATEGIC PARTNERSHIPS

2022-23 Strategic Partnership Management details

<table>
<thead>
<tr>
<th>Programme</th>
<th>Strategic Partner Finance</th>
<th>Strategic Partner Technical</th>
<th>Strategic Partner Consultant</th>
<th>Total</th>
</tr>
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<tbody>
<tr>
<td>Early Intervention</td>
<td>12</td>
<td>7</td>
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<td>19</td>
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<tr>
<td>Spinal Cord Injury Rehabilitation</td>
<td>3</td>
<td>3</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td>Livelihood</td>
<td>13</td>
<td>0</td>
<td>1</td>
<td>14</td>
</tr>
<tr>
<td>Community Mental Health Programme</td>
<td>0</td>
<td>1</td>
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</tr>
<tr>
<td>Total</td>
<td>28</td>
<td>11</td>
<td>1</td>
<td>40</td>
</tr>
</tbody>
</table>

Livelihood Status - Strategic Partners

- Enrolled: 1274
- Course Completed: 1118
- Placement: 91%
- Retention: 87%
- Screening: 11228
- CwDs Identified: 1359
- School Enrolment: 450
- Social Security Schemes: 1016
- Parents Group: 17

Early Intervention Status - Strategic Partners

- Service Recipients: 352
- Intensive Rehabilitation: 163
- Aids and Appliances: 372
- Self-care Kits: 546
- Medical and Surgical Kits: 222
- Federations Formed: 3

SCIR Status - Strategic Partners

- Enrolled: 50
- Course Completed: 51
- Placement: 88%
- Retention: 101%
- Achieved: 88%
- Progress: 0%

Engine of Innovation

- Intensified partner selection process with partner scoring system
- Fund release is based on performance

Engine of Scale

- Partnerships span 5 southern states, implemented 40 projects
- 41 functional sub-centres established across Karnataka for early intervention
- 1 Hub & 6 Spokes for SCIR centres in South

Engine of Sustainability

- Formed 3 federations through partner interventions
- Increase in donors supporting partnerships
- 136 partner staff trained
- 93 partner staff members trained in finance & fundraising
ASSISTIVE & ADAPTIVE TECHNOLOGY (AAT)

APD’s Assistive and Adaptive Technology (AAT) aims at empowering and enabling independence with assistive and adaptive devices. These devices are created to reduce pain, maximize independence, and increased social interface and interaction that will go forward to enhance social participation, contribution, and inclusion of people with disability.

We Provide

- Referral & appointment, assessment, prescription, funding & ordering, product preparation, fittings, user training, maintenance repair, and follow-ups.
- Customized orthotics/splints, prosthesis/artificial limbs, mobility devices like canes, walkers, rollators, etc.
- Specially built 3D printed postural support devices and accessibility promoting infrastructural support with rails, ramps, grab bars, toilet modifications, signage etc. for a barrier-free environment.

Orders Placed vs Delivered

- Prosthetic and orthotics: 88% placed vs 2214 delivered
- Footwear: 77% placed vs 1143 delivered
- Hearing aids: 91% placed vs 513 delivered
- Mobility Aids: 100% placed vs 465 delivered
- Pre-Fabricated items: 95% placed vs 428 delivered
- Spares and Services: 100% placed vs 407 delivered
- Wheelchairs: 100% placed vs 1545 delivered
CONCEIVED in 1987 by our founder NS Hema, to train moderate and severely disabled candidates from rural agrarian backgrounds, APD’s Horticulture programme is one of the few centres where trainees are taught scientific and organic gardening techniques.

Driven by the visionary late NS Hema, our programme sets out to create a sustainable revenue model for APD by fortifying our horticulture outlets, enhancing organizational branding and visibility, and empowering individuals with disabilities. With a focus on equipping people with the skills needed for economic independence and a life of dignity, our programme operates across three nurseries in Bengaluru.

These nurseries, located in Jeevan Bhima Nagar, N S Hema Horticulture Centre, Kyalasanahalli, and our main office at Lingarajapuram, not only provide trainees with hands-on experience in plant production, landscaping, and general garden maintenance, but they also serve as the largest outreach initiative to the general public at APD.

It has been an absolute delight to be associated with APD. The plants are robust, healthy and strong. The variety of herbs, foliage, and flowering plants is a delight. I am also in awe of the staff’s zeal and perennially smiling faces. They are fiercely independent yet very humble. I am blessed to have had the opportunity to interact with them.

-Jaanaki, a patron

Engine of Innovation

HDFC Bank smart Hub Vyapar at HT centres ensuring convenient and efficient transactions.

Arka cocopeat production IIHR model has been established at the centre

Business WhatsApp introduced for plants and product order booking.

Engine of Scale

Replicated our successful Horticulture Model in Govt State Homes under Women and Child Development, effectively engaging their beneficiaries.

Engine of Sustainability

Networking and collaboration with other organizations, schools and public have been consistently increased in environment promotion and nurturing the green activities which has also contributed to raise awareness about APD.
### MONITORING, EVALUATION, ACCOUNTABILITY & LEARNING (MEAL)

1. **48 Donors**  
   64 Projects  
   Monitored & Evaluated

2. **2 Project Evaluations**  
   conducted through External Consultant (Niiti Consulting)

3. **386 APD and Partner staff trained**  
   on Coonjan MIS software

4. **256 Periodic Reviews**  
   conducted

   RAG analysis introduced, leading to distinct review levels for leadership, management, Board, and Townhalls, resulting in 100% success in all 64 projects

---

### HUMAN RESOURCES

APD’s HR department had a dynamic year! They filled 177 positions, including 23 internal transfers, through 8 recruitment drives. They conducted 23 training sessions, including 3 on soft skills like Advanced Excel and Sign Language. Induction training benefited 102 staff members, while 63 received specialized LCA Project Orientation. With 8 GreytHR sessions and 2 EPF demos, staff were well-prepared.

Recognizing excellence, 27 received Special Awards, 31 were promoted, and 16 had salary adjustments. Moreover, 59 employees moved to FTE status with benefits. Job title and salary analysis led to a standardized CTC structure in December 2022. Employee engagement thrived through celebrations and hosting the Hema Memorial Award Function, showcasing a lively, inclusive culture.

#### APD Staff Programme-Wise Break Up

- **26%**
  - Health and Rehab
  - New Initiatives

- **21%**
  - Education
  - Core Functions

- **19%**
  - Livelihood
  - Environment

- **13%**
  - Assistive and Adaptive Technology

- **7%**
  - Policy and Advocacy

#### HR Dashboard

- **75%**
  - Recruitment

- **49%**
  - Women Employees

- **21%**
  - PWD Employees
ADMINISTRATION - KEY HIGHLIGHTS

**Infrastructure**

- Renovation of hostels for girls & boys at Kyalasanahalli and SIS school
- Division offices set up - 4 in Yadgiri, 1 in Raichur, 1 in Mysore
- Land transfer - 1 acre government land transferred to APD at Anand Ashram campus, Srinivasapur.
- Construction of a basketball court at JBN campus
- Waterproofing of school and finance building roofs
- Purchase of a 4-wheeler for Policy & Advocacy

**IT**

- CCTV was installed at Kyalasanahalli
- Network upgradation - Phase 1 completed
- Biometric attendance system introduced at all campuses and locations

**Estate admin**

- Autism clinic set up at APD Lingarajapuram campus

**Thank You Donors**

**Donors** | **Amount**
---|---
Azim Premji Philanthropic Initiatives | 4,18,31,000
ABB India Foundation | 1,85,51,851
WM Global Technology Services India Private Ltd. | 1,29,29,800
Titan Company Ltd. | 1,28,80,948
IndusInd Bank | 1,28,25,504
H.T Parekh Foundation | 1,09,00,000
Coimbatore Krishnamurthy Venkataraman | 1,00,00,000
HCL Foundation | 1,00,00,000
Give Foundation | 92,44,806
Bosch Global Software Technologies Private Ltd. | 66,12,340
Mindtree Foundation | 60,93,640
Shailesh Lakhani | 52,00,000
Dublin Province Of The Redemptorists | 51,97,690
MCKS Trust Fund | 50,26,250
Goodrich Aerospace Services Pvt Ltd. | 50,00,000
CBA Services Private Ltd. | 50,00,000
Cognizant Foundation | 45,54,826
SBI Foundation | 39,29,308
Tech Mahindra Foundation | 33,41,717
Deloitte Foundation | 31,00,000
Kotak Mahindra Bank Ltd. | 30,60,471
ANZ Operations And Technology Private Ltd. | 30,00,000
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*This is a partial list of donors (₹25,000 and above)
INDEPENDENT AUDITOR’S REPORT TO THE MEMBERS OF THE ASSOCIATION OF PEOPLE WITH DISABILITY

Opinion
We have audited the accompanying financial statements of THE ASSOCIATION OF PEOPLE WITH DISABILITY (the Society), which comprise the Balance Sheet as at 31st March, 2023, the Statement of Income and Expenditure for the year then ended and notes to the financial statements, including summary of the significant accounting policies.

In our opinion, the accompanying financial statements give a true and fair view of the financial position of the Society as at 31st March, 2023 and of its financial performance for the year then ended in accordance with the Accounting Standards issued by the Institute of Chartered Accountants of India (ICAI).

Basis for Opinion
We conducted our audit in accordance with the Standards on Auditing (SAs) issued by ICAI. Our responsibilities under those standards are further described in the Auditor’s Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Society in accordance with the Codes of Ethics issued by ICAI and we have fulfilled our other ethical responsibilities in accordance with the Code of Ethics. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Emphasis of Matter
We draw attention to Note No. 2(iii) and (iv) of financial statements which indicates that:

a) Fixed Asset register is in the process of being updated.
b) GST credit and payables included under other advances and statutory dues payable respectively are subject to reconciliation and hence eligibility of input credit availed are to be confirmed.

Our Opinion is not modified in respect of this matter.

Responsibilities of Management and Those Charged with Governance for the Financial Statements
Management is responsible for the preparation of these financial statements that give a true and fair view of the state of affairs, results of operations of the Society in accordance with the accounting principles generally accepted in India. This responsibility includes the design, implementation and maintenance of internal control relevant to the preparation and presentation of the financial statements that give a true and fair view and are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Society’s ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Society or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Society’s financial reporting process.

Auditors’ Responsibilities for the Audit of the Financial Statements
Our objectives are to obtain reasonable assurance about whether the financial statements are free from material misstatement, whether due to fraud or error, and to issue an Auditor’s Report that includes our opinion. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with SAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with SAs, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
• Conclude on the appropriateness of management’s use of the going concern basis of accounting and based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Society’s ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor’s report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor’s report. However, future events or conditions may cause the Society to cease to continue as a going concern.

• Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

We also provide those charged with governance with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence and where applicable, related safeguards.

For R.K. KHANNA & ASSOCIATES
Chartered Accountants
(Firm Regn. No. 105092W)

UDIN: 23027444BGSHEA8550
(S. MANJU GEORGE)
Partner
(Membership No.027444)

Place: Bangalore
Date: 30th August 2023

THE ASSOCIATION OF PEOPLE WITH DISABILITY: BENGALURU
BALANCE SHEET

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Application of Funds

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<td><strong>Total</strong></td>
<td><strong>35,48,77,142</strong></td>
<td><strong>27,29,51,850</strong></td>
</tr>
</tbody>
</table>

ACCOUNTING POLICIES AND NOTES TO ACCOUNTS - Per Schedule "18"...
Per our Report of even date

For R. K. KHANNA & ASSOCIATES
Chartered Accountants
(Firm Regn. No. 105092W)

(S. MANJU GEORGE)
Partner
(Membership No. 027444)

For ASSOCIATION OF PEOPLE WITH DISABILITY

(SUBIR KHURT SAHAI)
President

(JACOB KURIAN)
Secretary

(S. D. GOPALAKRISHNAN)
Treasurer

Place: Bangalore
Date: 30-08-2023
### THE ASSOCIATION OF PEOPLE WITH DISABILITY: BENGALURU

#### INCOME AND EXPENDITURE ACCOUNT

<table>
<thead>
<tr>
<th>Sch</th>
<th>For the year ended 2023-24</th>
<th>For the year ended 2022-23</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>₹</td>
<td>₹</td>
</tr>
<tr>
<td>INCOME</td>
<td>Grants and Donations...</td>
<td>22,74,76,370</td>
</tr>
<tr>
<td></td>
<td>Other Resources...</td>
<td>5,30,23,300</td>
</tr>
<tr>
<td></td>
<td>Interest Received...</td>
<td>67,16,493</td>
</tr>
<tr>
<td></td>
<td><strong>Total INCOME</strong></td>
<td><strong>28,72,16,163</strong></td>
</tr>
<tr>
<td>EXPENDITURE</td>
<td>Salaries and Benefits...</td>
<td>9,32,91,256</td>
</tr>
<tr>
<td></td>
<td>Program Expenses...</td>
<td>11,75,72,148</td>
</tr>
<tr>
<td></td>
<td>Administrative and General Expenses...</td>
<td>3,33,64,315</td>
</tr>
<tr>
<td></td>
<td><strong>Total EXPENDITURE</strong></td>
<td><strong>24,44,47,719</strong></td>
</tr>
<tr>
<td>Excess of Income over Expenditure before Depreciation</td>
<td>4,27,88,444</td>
<td>3,42,35,169</td>
</tr>
<tr>
<td>for the year</td>
<td>87,99,237</td>
<td>68,39,274</td>
</tr>
<tr>
<td>Excess of Income over Expenditure after Depreciation</td>
<td>3,39,89,207</td>
<td>2,73,55,895</td>
</tr>
<tr>
<td>from Capital Fund</td>
<td>87,99,237</td>
<td>68,39,274</td>
</tr>
<tr>
<td>Excess of Income over Expenditure Transferred to General Fund</td>
<td>4,27,88,444</td>
<td>3,42,35,169</td>
</tr>
</tbody>
</table>

**ACCOUNTING POLICIES AND NOTICES TO ACCOUNTS- Per Schedule "18"...**

**For R. K. KHANNA & ASSOCIATES**
Chartered Accountants

**For ASSOCIATION OF PEOPLE WITH DISABILITY**

**FINANCIAL STATEMENTS**

**APD PROGRAM LOCATIONS**
THE ASSOCIATION OF PEOPLE WITH DISABILITY
6th Cross, Hutchins Road, Off Hennur Road, Lingarajapuram, St. Thomas Town Post, Bengaluru - 560084.
Ph: 080-25475165, 25489594
contact@apd-India.org | www.apd-india.org