



62nd Annual Report & Financial Statements

2020-2021





Our COVID initiatives

Social isolation among PWDs is a serious public health concern. Staying idle during the pandemic could lead to secondary health complication such as immobility syndrome, causing the muscles to weaken, joints to stiffen, making it harder to move. Children, elderly & severely disabled are especially prone to the dangers of immobility that is compounded by poor nutrition & hygiene.

- Rs.1.55 Crore donation raised for Covid initiatives
- Distributed 4445 dry rations, hygiene kits, & nutrition, covered 16 districts of Karnataka, impacting 20819 family members
- In collaboration with APF, 8 slums were adopted in East Bangalore for Covid awareness, testing and for need based referrals
- Vaccination drive for vulnerable population in East Bangalore and for APD staff

TABLE OF CONTENTS

Vision & Mission.....	02
Lifecycle Approach	03
Comprehensive Reach Dashboard	04
Message from our COO.....	05
Message from Hon. Secretary.....	07
Early Intervention.....	08
Inclusive Education	10
Livelihood	12
Spinal Cord Injury Rehabilitation	15
Institute of Disability Rehabilitation and Research	18
Multidisciplinary Rehabilitation.....	20
Assistive and Adaptive Technology Unit	22
Community Mental Health Program	24
Policy Advocacy	26
Collaborations–Strategic Partnerships.....	29
Horticulture.....	30
Administration	32
Financial Statements.....	34
Thank you Donors	42



VISION

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

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***.

VALUES

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

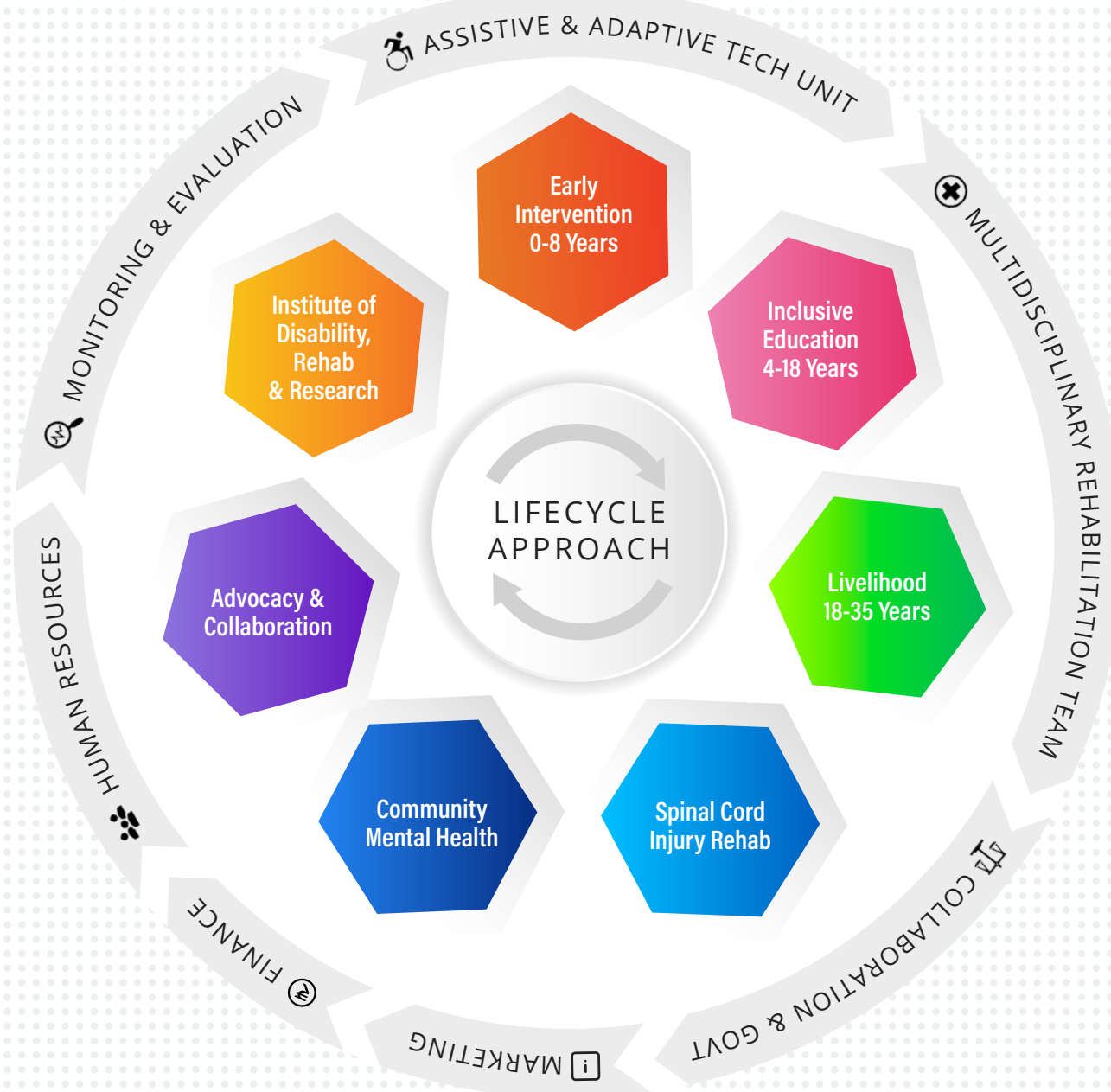
Empathy: Be sensitive to feelings, thoughts, emotions & experiences by developing the capacity to place oneself in another's position, understand their perspective, appreciate and respond with care.

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 and inclusive work environment.



Comprehensive Reach Dashboard

DEVELOPMENTAL INTERVENTION	BENEFICIARY	CAPACITY BUILDING	SENSITIZATION
Early Intervention	2111	1524	2496
Inclusive Education	1136	355	1518
Livelihood	2980	33	902
Spinal Cord Injury Rehabilitation	1458	487	1778
Multidisciplinary Rehabilitation	207	60	261
Community Mental Health Program	1491	361	62
Institute of Disability Rehabilitation & Research	656	250	0
Collaborations	10452	152	2342
Core Functions	0	22	0
Grand Total	20491	3244	9359



Message from our
COO



We have a 62-year legacy of responsible commitment to People with Disabilities through a structured community-based rehabilitation model. Our Comprehensive rehabilitation model inclusive of physical, mental health, education, livelihood, human resource development and advocacy has impacted thousands of lives of people with disabilities. The social isolation among people with disabilities during the pandemic was a serious public health concern. Imposed lockdowns have critically affected even the minimal mobility that is available to many persons with disability, leading to various secondary disorders like stiff joints, pressure ulcers, obesity, and poor endurance. Hence, I would state that “The disabled are double handicapped during the pandemic”.

APD strived hard to discover the strength to persevere and endure in spite of overwhelming obstacles to safeguard the well-being of the most vulnerable people in the society.

Our top priorities were the health and safety of our employees, beneficiaries, and partners during the last year. Our team quickly coped with the challenging environment by adopting a hybrid service delivery through Tele rehabilitation and Tele education. Our strategic leaders and policymakers formulated a standard implementation protocol, abiding by the

Government guidelines. We established strict COVID-19 appropriate behaviors, enforced through a COVID checklist & robust action plan to ensure continuity of services. We were fortunate that these precautions ensured that no APD employee was lost to COVID.

As Francis of Assisi quoted “We start by doing what’s necessary; then did what’s possible, and suddenly we were doing the impossible.” APD being a pioneering organization for People with Disability for decades, along with our routine services, we have taken the lead on initiatives like delivering dry ration kits, medical kits, hygiene kits, urinary catheters, pressure sore wound management kits, mobility aids and appliances, IT device support among the most vulnerable groups.

We are proud and inspired by the way our organization has risen to this pandemic challenge—with flexibility, adaptability, resilience, courage and a caring heart. We at APD protect our employees while still serving the vulnerable populations at the last mile who rely on our services & operations—a demand that is only increasing under the impact of this pandemic. New opportunities will also emerge and ***we are well-positioned to respond.***

—Dr. N.S. Senthil Kumar, Ph.D. (Rehab)
Chief Operations Officer & Executive Director



Our holistic approach to serving the disabled includes therapy & rehabilitation services across all our programs. Comprehensive rehabilitation can significantly improve quality of life.



Message from our
**HONORARY
 SECRETARY**

As I sit down to write this, India is celebrating our success in the Olympics and the much greater success, scripted by our Para-sportspersons. Media has been cheering these champions and for a brief moment, the entire country is celebrating their journeys.

Disability is a largely invisible problem that we sometimes encounter at a traffic light or in moments like the Paralympics. We seldom see or meet the more than 3 Crore Indians who are suffering from various forms of disability.

The continued COVID lockdown and consequent restrictions posed severe challenges to our APD teams. We have traditionally deployed a high-touch model to serve our beneficiaries. We had to learn to use technology more effectively. Initially, using amateur WhatsApp and self-made videos, we progressed to trialling several new techniques to continue to provide our service. I hope these new modes of delivery, using technology, will help us reach newer audiences in ways that our physical outreach model could not have.

COVID and its consequent fall out, impacted the poor and marginalised in many ways. The closure of schools widened the digital divide but for children with special needs, ed tech proved to be a hopelessly inadequate substitute. Many of our brave graduates lost their jobs because of the severe impact on the hospitality and retail sectors and in other sectors that downsized, the weak and the vulnerable were the first to be let go. A reporter asked a nine-year-old child, boarding a bus to Azamgarh, what he knew about the COVID virus. He replied “Iska matlab

hai ki mujhe bhooka rahna padta hai”. Despite the tons of rations and health kits that APD distributed through the generosity of our donors, life remained anxiety filled and tenuous for the specially abled.

The celebration of a booming stock market and the birth of several billion-dollar unicorns, has created a shining India that hides the trauma of the millions of our poor, who have lost jobs, suffered hunger and deprivation. In our struggle for a more equitable society, one can only hope and pray that the newly minted billionaires will spare a thought for their less fortunate fellow citizens.

Our employees took extraordinary risks to continue to serve our communities and we thank them for their selfless service. We are grateful to our donors who found the resources to continue to support APD, despite COVID related demands. APD was privileged to have a board and many volunteers, who gave extraordinary amounts of time to support our work.

At APD, we look to a new, post COVID world with optimism and hope—for 62 years, optimism, hope and a belief that we can make a difference, has driven our mission and ***we pledge to continue to give our best.***

—*Jacob Kurian, Hon. Secretary*



Early stimulation programs facilitate developmental milestones

• • • Early Intervention

What do we do?

- Help children with developmental delays achieve incremental growth in developmental milestones through early stimulation and rehabilitation across Karnataka.
- Mothers are trained as primary caregivers.

Why?

- High incidence of developmental delay among children estimated to be 7% in India aged between 0 to 8 years.
- Poor awareness about prenatal care; growth and development among rural mothers.
- Limited access to need based rehabilitation services and a supportive ecosystem that fosters social inclusion.

When?

Children identified early through a systematic screening procedure during the immunization and follow-up consultation at the primary health centers or camps will be enrolled under the early stimulation program for facilitating developmental milestones.

How:

Identified children with developmental delay will be subjected to a systematic stimulation program inclusive of 8 developmental domains constituting 14 different areas of development. The service implementation is executed through an adapted module of Individual Family Service Plan (IFSP) to capacitate the family to play an integral part. An evidence based trans-disciplinary model is followed to deliver services at home level, sub-center and institutions. The implementation also includes delivery of nutritional kits, assistive devices, medical and surgical referrals, capacity building sessions for the family members and facilitating the social security schemes for the identified children.

Where:

The primary focus of delivery is among the socio-economically challenged children with disability from rural villages of Karnataka inclusive of 14 districts, 74 taluks.

Who:

Specialist professionals trained in pediatrics, early intervention and child development are engaged in the task of capacitating the trans-disciplinary team and the program is implemented as direct delivery and through 10 different partner organizations across Karnataka.

Input:

Specialized stimulation and developmental activities inclusive of 14 areas of child development where the children receive play based activities directly or through parents to achieve a sustainable model of service delivery. Human resource: 14, financial resources: 182 Lakhs.

Output:

SL. NO	ACTIVITY	REACH
1	Beneficiaries reached	2111
2	Stimulation/therapy sessions	13456
3	Assistive & Adaptive devices delivered	226
4	Nutritional support	961
5	School/Anganwadi enrollment	561
6	Capacity Building	1524
7	Sensitization	2496
8	Medical & Surgical support	128

Outcome:

60% of children with Developmental Delay/Global Developmental Delay achieved incremental age appropriate growth in various developmental milestones.

Key Highlights:

- Webinars were conducted for over 2700 caregivers on various Early intervention topics.
- 10 new NGO's technical partnerships were established to facilitate the community services statewide.
- 40 WhatsApp support groups created to remotely reach out for service deliveries.
- Tele-consultation, Audio-Visual sessions: Structured tele-rehabilitation was established with digital repositories aimed at providing appropriate video and audio assistance for caregivers.
- Introduction of new activity based therapy—Dance & Art therapy



▲ Child being fitted for hearing aids

52.5% of children
with special needs showed
improvement in 3Rs

61% of children showed
improvement in functional
independence

● ● ● Inclusive Education

What do we do?

Holistic learning environment that demonstrates inclusion enables accessibility, rehabilitation and comprehensive education intervention through hybrid model (both face to face and online)

Why?

- Over 70% of Children with Special Needs (CwSN) in Karnataka do not have access to quality education. Parents lack of awareness to make their children independent through proper rehabilitation and inclusive education.
- Lack of awareness in mainstream system to cater to the educational needs of CwSN.
- High drop out in high schools because of lack of transportation facility and accessibility.

When?

Children with special needs do not enroll in schools as mainstream schools lack proper accommodations for their individual needs. Parents are unable to focus on their children's education due to lack of awareness, severity of disability and also because of critical social economic conditions.

How:

- Institution and community approach that fulfills the rehabilitation and educational needs through Shradhanjali Integrated Schools (SIS) both in Bangalore and Anandashrama, Kamathampalli and 35 model schools, 282 community schools.
- Identification, enrollment, assessment and development of IEPs (Individual Education Plan) and IRPs (Individual Rehabilitation Plan). Achieve the goals through regular intervention of project staff. Empower parents and caregivers.
- Identification of mainstream schools and training of teachers and school management on inclusive education and ensure disabled friendly infrastructure.

Where:

Karnataka: Bangalore, Vijayapura, Davangere and Kolar

Who:

Children with special needs, parents and caregivers, School Teachers & management, government frontline workers. Education Department, BIERTs (Block Inclusive Education Resource Teachers)

Input:

Trained community teachers, special educators & rehabilitation workers. Education and rehabilitation services were delivered by skilled staff across Karnataka. Human resource: 81, financial resources: 343 Lakhs.

Output:

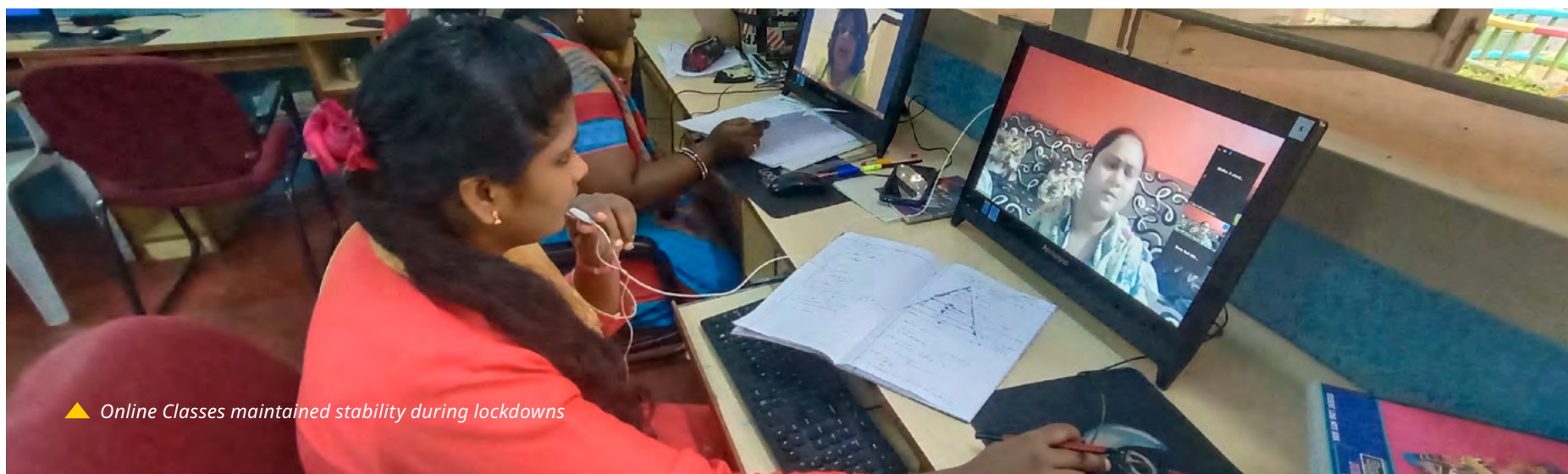
Location	Children Reached	Capacity building	Sensitization
SIS-Bangalore	215	138	143
Bangalore	218	75	611
Vijayapura	420	99	620
Davanagere	247	43	100
SIS-Anandashrama	41	26	96
Total	1141	381	1570

Outcome:

52.5% Children with special needs shown improvement in 3Rs

61% of children shown improvement in functional independence through comprehensive rehabilitation.

- NIOS accreditation—SIS is now IOS study and exam center.
- Organized parent groups in all 35 model schools to strengthen activities in Davanagere and Vijayapura districts.
- Teaching Learning Materials (TLMs) provided to 327 children. Developed and adapted 1254 concept based TLMs, 2146 worksheets and Youtube videos
- Effectively utilized TATA ClassEdge and Playablo in SIS
- Research: 2 studies in collaboration with Vidhi Center for Legal Policy, Delhi, "Study on the Impact of Covid-19 on Children with Disabilities" and with Mrs. Niveditha Krishna from Azim Premji Foundation for "Research on Children with Disabilities"
- Shradhanjali Integrated Pre-primary School, Anandashrama started with 29 CwSN and 12 able-bodied children.
- SSLC: 50 CwSN provided resource materials & online coaching sessions



▲ Online Classes maintained stability during lockdowns



● ● ● Livelihood

What do we do?

Equip, Enable and Empower Youth with Disabilities from marginalized communities to become economically independent through skilling and employment

Why?

- It is estimated that 3.03 crores of disabled population across the nation from all age groups
- 50% of PwDs develop a disability in their prime working years 15-59 years
- Only 20% have studied above secondary with evidence of significant denial of opportunity for females in rural India (8% vs 23%)
- Formal and non-formal vocational/tech training is very low in both urban and rural India with just 3.1% having access to such training.
- 60% of PwDs are self-employed with a further 25% as casual labourers
- Only 9% in rural India have regular wages/salaried employment
- Lack of awareness among parents and recruiters, and limited education means that PWDs have been left out from most of government and non-government organizations' radar.
- To empower PWDs from poor and marginalized communities to become self-sufficient, functionally, and financially independent through appropriate skilling and building sustainable livelihoods.

(As per the NSS 76th Persons with Disability study 2018)

◀ Candidates for retail at Reliance Fresh



When?

As soon as youth with disability turn 18 years of age and are eligible to enter the work force.

How:

APD identifies youth with disabilities, who are school dropouts and unemployed.

- Community Mobilisation Screening and Assessment
- Counseling to family and the beneficiary
- Awareness, Sensitisation of Community and Employer Engagement
- Collaboration and Partnership with NGOs
- Foundation course
- Mapping the beneficiaries' abilities, aspirations & employment opportunities

- Skill Training and rehabilitation

- Placement and Follow up

- Alumni networking

Where:

Karnataka and neighboring states like Andhra Pradesh, Telangana, Maharashtra, Tamil Nadu

Who:

Beneficiaries, parents/carers, community based organizations, Government frontline workers and employers.

Input:

Human resources: 29

Financial resources: 288 Lakhs

Output:

4,058 beneficiaries were identified and availed 19,806 services of counseling, advocacy with family, assessments, skill training, career guidance; 33-capacity building; 902-stakeholders sensitized.



942 candidates joined the workforce or began micro enterprises for financial independence



▲ Livelihood—Goat Rearing

Outcome:

Approach	Reach	Dropout	Under Training	Completed	Placement
Institution	649	32	36	581	383
Collaboration	658	44	0	614	559
Total	1307	76	36	1195	942
*528 candidates received Foundation Training					

Impact:

Despite the severe impact of COVID on the economy and consequently on employment, 942 candidates joined the workforce or began micro enterprises for financial independence.

Key Highlights:

The COVID epidemic and consequent lockdowns severely disrupted our high touch, face to face mobilization and training model. Our teams pivoted to using technology to continue to deliver services to our candidates and expanded our geographical reach for mobilization, training and placement.

- Livelihood opportunities and details of our programs were disseminated via social media and voice messages
- Potential candidates were encouraged to register via Google forms
- Classes moved to a virtual mode
- WhatsApp groups created and candidates received videos & instructional materials
- Efforts were made to identify jobs in nearby communities to minimize travel.
- Horticulture trainees found placements in Bellary, Virajpet and Belagavi districts
- New partnerships were initiated with RDT and Abhishree Foundation in AP & Telangana

● ● ● Spinal Cord Injury Rehabilitation

What do we do?

A “cot to community” approach to provide comprehensive and cost effective rehabilitation for socio-economically backward People with Spinal Cord injury (PwSCI) from rural Karnataka

Why?

- Learnings from APD’s 2020 survey, estimates that there are 9,000 PwSCI across Karnataka. Analysis of 1454 beneficiaries showed that 79% from rural; 95% poor socio-economic background; male to female ratio of 10:1; 71% ranging from 16 to 44 years.
- Hospitals prioritize medical interventions and not rehabilitation. Order for creation of state and district level spinal cord injury rehabilitation centres remain unfulfilled, GOI-(2015)
- Length of rehabilitation, deficient fund allotment and scarcity of rehab experts resulting in just 8 pioneering centers across India, other than APD.

When?

Anyone with spine stabilized surgically/ conservatively. Post discharge from medical facility, neglected and long standing cases.

How:

Comprehensive rehabilitation—
Physical, Social, Psychological,
Educational/Vocational rehabilitation

Approach

Institution Based Rehabilitation

(23 beds facility in Bangalore and 40 beds across Karnataka)

Community Based Rehabilitation

Camp based / Home based / Tele-rehab

- Physical rehabilitation—Assessments, individualized goals, cardio-circuit training, sports & recreation based therapy, sexual rehabilitation, Assistive devices, Wheelchair skill training, Bowel and bladder management, Pressure sore management, self-care kits and medical interventions
- Social rehabilitation—Support for social security schemes, accessibility. Creating federations & community based organizations
- Psychological—counseling services, peer support services,
- Vocational—livelihood support, employment lead trainings (Open employment and entrepreneurship models
- Education—schooling and higher education scholarship



▲ Sports challenge mind and body

- Building sustainable Ecosystem—
Capacity building and awareness/
sensitization of stake holders

Where:

Inter-district beneficiary inflow from 6 states across India and intrastate inflow from 12 districts and follow-up services in 18 districts covering 8000 villages

Who:

People with Spinal Cord injury, Parents and Caregivers, CBOs (Community based organizations), DPOs (Disability peoples organizations), High risk groups, Spinal Federations, Government frontline workers, PHCs (Primary health care centers), Hospitals.

Output: 1458-beneficiaries received 42,110 services, 487–capacity building and 1778–stakeholders sensitized

Rehabilitation	Activity	No of Beneficiaries	No of Services
Comprehensive Rehabilitation— Institutional Based Rehabilitation & Community Based Rehabilitation	Rehabilitation Services	139	26085 therapy sessions
	Tele rehabilitation	954	9118 tele-rehab sessions
	Self-care kits	247	480 self-care kit/products
	Medical Interventions	97	225 medical service support
	Home Based	790	3060 rehab services at doorstep
	Camp	70	382 multiple need based services provided in the camp
	Assistive Devices	270	441 aids and appliances
Social Rehabilitation	Social security schemes	254	1373 schemes availed
Psychological	Counseling	55	60 counseling sessions
Vocational	Livelihood and career	172	381 trainings & seed fund support
Sustainable Ecosystem	Survival Kits	950	950 grocery kits
	Capacity building	487	(SCI management)
	Sensitization	1778	(Awareness for prevention, promotion & early referral)



▲ Cardio-fitness group class

Input: 20 unique and multidimensional rehabilitation activities were delivered by skilled staff across Karnataka. Human resource: 13, financial resources: 87 Lakhs.

Outcome:

100% from IBR and 65% from CBR achieved functional independence in life skills and 172 found livelihood opportunities.

Impact:

- Out of 258 new identifications, 30% were identified early.
- Out of 1458, 65% showed significant improvement in better quality of life.
- Sustainable ecosystem built by capacitating more than 2000 stakeholders in the area of Spinal Cord Injury Rehabilitation.

Key Highlights:

Rural Livelihood	Introduced 10 new entrepreneurship models of employment based on the geography and interest. ABCDE model—Assistive Adaptive device, Aspiration, Assessment, Built environment, Capacity building and Counseling, Data-driven, Energy
Mission 100—Wound Management	A collaborative effort with Good Sam Foundation for a door-to-door healing journey to support 100 people with pressure ulcers across rural Karnataka
Medical Collaborations	MoU signed with St Johns and Baptist Hospitals for medical support
World SCI DAY-Webinar series	Collaborated with 16 national and International organizations to conduct longest learning series on SCI rehabilitation where resources from Leeds University, UK, Hong-Kong University, IIT Madras, SVNIRTAR, CMC-Vellore, Manipal Institutions and few renowned rehab institutions participated.
Research collaborations	Alliances with Manipal, M S Ramaiah, Bosch, SELCO, Titan, Baptist etc on various researches on rehabilitation approaches and innovations
Prevention Campaign	A nationwide injury prevention campaign was organized on observance of the World Spinal Injury Day and earned recognitions from International Spinal Cord Society and Indian Spinal Injury Centre
Comprehensive Rehab	Comprehensive therapy hall—Established with support from Mr. Pradeep Badri, AMEX and Northern Trust Solar powered therapy hall—Established with support from SELCO India Standardized rehab measuring tools—introduced metrics for better quality of service & impact assessment Sexual rehab, Tele rehab, Counseling services were introduced for catering various rehabilitations needs Adaptive sports, Art and Crafts, Wheelathon, Horticulture, Yoga were introduced for recreation and talent acquisition among PwSCI
Partnerships	Technical collaborations with our Partners Samartya-Koppal, KRBAAS-Magadi, Sevadharma-Darmastala and NISHARD-Ranebennur were continued to extend our services to PwSCI
Government collaborations	Empowered 100 model PHCs across Karnataka for medical needs and facilitated 247 medicals kits worth 5.47 lakhs lakhs for PwSCI; 53 retro fitted bikes were distributed across Karnataka
Advocacy and federations	New federations were created in Chikkaballapur for enhancing social participation of PwSCI and working with two federations at Vijayapura and Davanagere
Peer training	Peer trainers were trained and deployed to make rehabilitation & empowerment available at the last mile

●●● Institute of Disability Rehabilitation and Research



What do we do?

A centre of academics and research; nurturing human resource training in the field of rehabilitation, disability prevention, management and ecosystem building.

Why?

There are only 11 health workers (which include doctors, nurses, and rehab workers) for every 100000 people in rural India and less than 5% of the required professionals trained and available to cater to the needs of the lakhs of PwDs and the elderly in rural & urban Karnataka. To mitigate this lack of trained manpower, IDRR runs a variety of long and short term programs to develop healthcare workers.

When?

We run our training programs around the year

How:

Rehabilitation Council of India (RCI) recognized programs offered through IDRR are:

- Certificate Course in Care Giving (CCCG)
- Certificate Course in Rehabilitation Therapy (CCRT)

APD has also designed training programs intended to train the aspirants who could not comply with the strict norms & mandates of the Rehabilitation Council of India (RCI). These programs are:

- Community Therapy Aide
- Inclusive Education (Recognized by TISS—Mumbai)
- Indian Sign Language (ISL)

The Continued Professional Development Programs (CPDP) aims at promoting disability and rehabilitation training to nurture an inclusive ecosystem for PwDs. These programs are:

- Rehabilitation Council of India recognized Continued Rehabilitation Education Programs (CREs)
- Disability Immersion and Education Programs
- Structured workshops and seminars
- Clinical Placement Cell (Internship and scheduled/structured field exposure programs)

Where:

Currently, IDRR students come from all the states in South India

Who:

Students, Healthcare workers, Interns, Parents and caregivers, RCI Qualified professionals.

Input:

Structured skilling initiatives, academic and curricular add on programs delivered by a five member training team.

Output:

Particulars	Candidates	Remarks
RCI–Programs	84	Students of '19-'20 & '20-'21 batches.
APD–In-house training	24	Virtual–06 Months
CPDP	801	Workshops (434), Clinical Placements (114), Disability Immersion (250), Academic Projects (03)
Total	909	

Impact:

80 RCI and non RCI qualified professionals available to be employed in the healthcare sector to cater to the needs of the elderly and persons with disabilities.

Key Highlights:

Workshops

Conducted Workshops for 434 people across India

Ecosystem Building

114 students were provided 24 days structured training up-skilling them to work with individuals and families of PwDs

Disability Immersion

Disability immersion program conducted for 250 people for the promotion of social inclusion of PwDs

Collaboration with universities and disability institutions

Started collaborations with Indian universities & conducted workshops and disability immersion programs for University students.



● ● ● Multidisciplinary Rehabilitation

▲ *Expert physiotherapy enables a better quality of living*

What do we do?

We aim to minimize the impact of impairments, minimizing/preventing disability from Pediatrics to Geriatrics to enhance functional independence and enable a better quality of living. We provide expert physiotherapy, occupation therapy and speech and language therapy, with systematic methods of assessing various orthopedic and neurological clinical conditions.

Why?

Quality rehabilitation services are largely unavailable at PHCs and rural hospitals. Our holistic approach to serving the disabled includes therapy & rehabilitation services across all of our programs. Proper rehabilitation can significantly improve the quality of life of individuals.

When?

Acute, Sub-acute and chronic painful conditions, Disability, Deformity and Impairment.

How:

- Beneficiaries undergo detailed assessments. Based on the findings, set goals with an individualized rehabilitation plan
- With treatment, appropriate training will be provided to the caregivers
- To reach out to the beneficiaries in districts by conducting camps and training caregivers and community workers
- Provide mobility/assistive devices, medical and surgical support as identified during evaluation

Where:

Bangalore and across Karnataka

Who:

Our direct beneficiaries are children with developmental delays, youth with disabilities, beneficiaries suffering from pain and impairment due to various orthopedic and neurological conditions, their family members, Govt. stakeholders and partner organizations.

Inputs:

Human resource: 4, financial resources: 13 Lakhs

Outcomes

Name of the program	No of BNF's	No of Services
Rehab services to Internal programs (EI, IDRR, LH, SIS, IE)	480	15202
Walk-ins	207	2756
Grand Total	687	17958

Service details:	No of services
Physiotherapy assessment	391
Occupational therapy assessment	94
Speech & Language assessment	193
Sensitization	226
Capacity building	221
Hearing evaluation & otoscopic examination	79
Hearing aid fitment & training	172
Speech & language therapy	2537
Oromotor stimulation	555
Cognition & behavioral therapy	839
Occupational therapy services	1097
Electrotherapy	912
Exercise & Manual therapy	10414
Prescription & referral for assistive devices	228
Total services	17958

Key Highlights:

- Video library created: Physiotherapy (80), Speech & language therapy (17) on various therapy techniques on oro-motor exercise, strengthening, stretching exercises and gait training for building capacity of parents and community workers.
- Speech therapy manual for community workers on identification and treatment of various speech and language disorders.
- Supported SCIR: Delivered 4 sessions of webinar on prevention and management of SCI.
- Webinars on various medical conditions like respiratory management, orthotic management in cerebral palsy, care for pediatric bones for parents and staffs. Overall 2,000 persons viewed these webinars.
- Virtual therapy sessions for children (4678 PT, 1645 OT & 1687 SLT).
- Clinical & practical training conducted for IDRR students and external interns on various rehabilitation topics.
- Conducted awareness sessions for regular school students about disability, fitness and mental health.

Facilities & equipment:

- Full-fledged exercise therapy & electrotherapy unit, occupational therapy unit, speech & language therapy unit.
- Electrotherapy & Exercise therapy equipment: Laser, shortwave diathermy, ultrasound, diagnostic and therapeutic ultrasound, cervical and lumbar traction, treadmill, bicycle ergometer, motorized tilt table, Interferential therapy, transcutaneous electrical nerve stimulation, finger ladder, mariners wheel, balance board, bolsters, wedges, hand function table, rollers
- Sensory integration room
- Hydrotherapy
- Diagnostic BERA, audiometry and otoscope



● ● ● Assistive and Adaptive Technology Unit

What do we do?

Promote customized assistive and adaptive devices that could reduce pain, maximize independence, increased social interface and interaction which will enhance social participation, contribution and inclusion of people with disability

- WHO 8-step protocol—Referral & Appointment, Assessment, Prescription, Funding & Ordering, Product Preparation, Fitting, User Training, Maintenance, Repair & Follow-up.
- Customised Orthotic/Splints—ankle foot orthosis, calipers, hand splints, body shell, special sandals, special shoes and insoles
- Customised Prosthesis/Artificial limbs
- Customised Mobility devices—canes, walkers, rollators
- Customised Supporting device—corner chair, standing frame, commodes
- Customised Wheelchairs
- Customised 3D printed Postural support devices-seating solutions for comfort seating in wheelchair/chair- supporting the right posture, which could prevent pain and deformity.
- Accessibility—creating barrier free environment: rails, ramps, grab bars, toilet modifications, signage, anti-slip flooring etc

Why?

Over 8% of India's population are people with disabilities. Over a period, there has been an increase in people with severe disabilities such as cerebral palsy, congenital deformity, spinal cord injury, stroke,

amputation and Parkinsonism. Around 55% of people with disability are absolutely immobile and totally dependent on others. One of the most basic requirements of these people is an assistive or an adaptive device which will render them mobile and enable access to available opportunities to rebuild their lives.

When?

For all disabilities ranging from infants to elderly—acute to chronic stages of disability, as a prevention, promotion & intervention support

Where:

Across Karnataka and neighboring states

How:

APDs center based approach also extends to door-to-door service and last mile reach by conducting mobility aid camps for identification, measurement and distribution of aids & appliances. Majority of the staff of this unit are PwDs, manufacturing customized aids and appliances for people with disability—“For the people, by the people”

Key Highlights:

- In spite of pandemic, we have conducted 28 measurements and distribution camps across Karnataka.
- In addition, we also introduced online measurement camps to mitigate the risk of COVID pandemic. Virtual sessions conducted for 30 staff from Program and Partners organizations for supporting the remote measurements.
- Conducted sensitization on basic wheelchair assessment for NGO's, 52 staff have participated.
- Collaboration with Titan—1S exercise and value stream mapping.

- Collaboration with volunteer Mr. Sudhakar for Strategic formulation and Cost revision
- Cost rationalization in HR, reduction in staffing and focus on increased productivity
- Value stream mapping helped the unit to increase productivity and reduction in product delivery time
- Increase the products from 20 to 200 with variations (type, quality and comfort—as add-on's with variable pricing)
- Walk-in's increased from 5% to 30%

Input:

Human resource: 14, financial resources: 186 Lakhs

Output:

Service	No of beneficiaries	No of Products
Orthotics & prosthetics	986	2634
Foot Wear	124	156
Hearing Aids	50	100
Home Accessibility	64	117
Pre-Fabricated Items	199	555
Wheelchairs	313	316
Orthotic Services	265	283
Wheelchair Services	432	1479
Grand Total	2423	5640



▲ World Mental Health Day event

● ● ● Community Mental Health Program

What do we do?

Ensure quality psycho-social rehabilitation and referral to psychiatric treatment.
Promote recovery and inclusion for persons with mental illness (PWMI)

Why?

- No details of Persons with Mental illness
- No psychiatric services at PHC & Taluk hospital
- Poor mental health awareness in community
- Many PWMI don't access mental health services
- PWMI and caregivers unaware about Government schemes
- Lack of psychiatric and mental health services at the community level and human rights violations in North Karnataka

When?

PWMI lack access to Consultation/Support Services for psychiatric treatment and psycho-socio rehabilitation

How:

- Identification of Persons with Mental Illness and complete need analysis
- Conduct psychiatrist camps at taluk and PHCs hospital with support of District Mental Health Program.
- Organize residential programs with carers and PWMI to de-stigmatize and reduce misconceptions on mental illness
- Promote and strengthen the District Mental Health Program and other stakeholders.
- Address the psycho-social and counselling needs of people with disabilities

- Formation of parents/carers federation for self-advocacy on mental health issues.
- Support PWMI for skilling and livelihood.

Where:

- 6 Taluks of Davanagere District (Davanagere, Harihara, Honnali, Jagalur, Harapanahalli and Chennagiri)
- 2 Taluks of Kalaburagi District (Kalaburagi and Jewargi)

Who:

People with mental illness from rural communities

Input:

Human resource: 4,
Financial resources: 25 Lakhs

Output:

Service	Total No. of Beneficiaries	Total No. of Services
Access and follow-up support on Social Security Scheme	2	2
Camps	26	66
Counseling Support for PWMI	68	86
Counseling for Caregivers	312	411
Exposure visit for Caregivers	29	47
Exposure visit for PWMI	30	37
Federation Meeting	95	198
Follow up on medical support for PWMI	1471	7726
Home Visit	380	420
Livelihood Support	9	15
Medical Support for PWMI	347	976
Mental Health Assessment	212	222
Mental Health Reassessment	554	574
Total	3535	10780

Key Highlights:

- Treatment camp running at 10 taluk hospitals and 3 district hospitals and 26 PHCs helped PWMIIs to access treatment at their door step. Increased accountability of DMHP through these camps. 1414 persons with mental illness have accessed psychiatric services during the period.
- 521 (Reaching the unreachable PWMI—Non cooperative & Severe PWMI) initiated Psychiatric services through Tele consultation and 521 PWMI accessed psychiatric service during Covid challenges
- 8 taluk level carers groups were formed: 234 members are active in these groups.
- 5 Village level carers/SHG groups were formed, 58 members got membership in SHGs; 2 SHG groups got Rs.75000 loan support from Taluk Panchayath.
- CMHP had conducted 7 (3 Days) ADLS skills training and Social security schemes, training 379
- 166-PWMI & 213 Parents participated and learnt about federation concept, ADLS skills practice and how to access social security schemes.
- CMHP had celebrated World Mental Health Day at Davanagere on 9th October 2020 and Schizophrenia Day at Mayakonda PHC, Davanagere District on 26th May with the support of DMHP team.
- Federation members had written a letter to Chief Minister of Karnataka, State Disability Commissioner and Chief Secretary of Karnataka to provide special package to Disability sector in the budget and Carers Pension.
- Davanagere CMHP program successfully handed over to local federation groups.



▲ Retrofitted 2-wheelers for PwDs

● ● ● Policy Advocacy

What do we do?

Ensure rights and entitlements as per the provisions of Section 37 of RPwD Act

Why?

60% of PwDs in Karnataka are denied their rights and entitlements due to lack of political and bureaucratic will to implement laws and policies. Laborious government processes to access entitlements are a significant impediment as well as an absence of organizations to facilitate support systems and an acute shortage of skilled human resources.

When?

We run awareness campaigns in target districts to spread awareness amongst the disabled community about their rights and entitlements. We sensitize government authorities about the RPwD Act and about funds earmarked for the disabled.

How:

National & international networking:

We partnered with NCPEDP & NDN, conducted case studies of PwDs on impact of COVID-19 as part of DLU. We participated in Commonwealth Foundation, United Nations meetings to influence systems & structures.

Presence in Govt Committees:

APDs representation to the two wheeler technical committee ensured 2000 retrofitted two wheelers for PwDs.

Influencing systems and structures:

We networked with DMA to effectively implement the 5% resources, supported Kalaburagi Mahanagara Palike to prepare action plan for PwDs. Organised grievance meetings in districts and highlighted issues of 5% utilization.

Getting disability cards for the disabled:

Enhancing and influencing health support systems to access NIRAMAYA health insurance for NTA category PwDs; Autism, Cerebral Palsy, Intellectual disability and multiple disabilities.

RPD Taskforce:

Empowering RPD taskforce in 5 districts to effectively implement 5% resource allocation for the disabled (RPwD act 2016). Influencing PwDs, NGOs/DPOs/Govt. Institutions at District, State and National level to create the eco-system.

Disability Awareness for School Children:

Sensitize school children to demonstrate the values of compassion, caring, giving and empathy towards disability.

Where:

Kalaburagi, Raichur, Koppal, Belgaum, Bangalore Divisions

Who:

Any person with disability in our target geographies who is unaware of or needs assistance to secure their rights and entitlements (Social Security Protection) as per government policies or the RPwD Act

Input:

Human resource: 4 , Financial resources: 30 Lakhs

Abbreviations:

DMA: Directorate of Municipal administration of Karnataka

DLU: Disability Law Unit

MNREGA: Mahatma Gandhi Rural Employment Guarantee Act

NCPEDP: National Centre for Employment of Persons with Disabilities

NDN: National Disability Network

NTA: National Trust Act

SNAC: State Nodal Agency Centre

Output:

Social Security Protection	No. of beneficiaries (PwDs)
MNREGA	9186
NIRAMAYA	621
Assistive devices	323
Ration kits	257
Any other	65
Total	10542

Sensitization and Capacity building:

Stakeholders	Sensitization
BIERT	829
Urban Local Body officials	268
Parents	58
NGOs	8
Disability Awareness for Students & Teachers	994
Others/livelihood candidates	185
Total	2342



We spread awareness amongst the disabled community about their rights & entitlements

Outcome:

Increase in outflow of govt spending on schemes for PwDs and NGOs

Net value of resources ensured for PwDs in Karnataka:

- 5300 PwDs worked in MNREGA & accessed Rs.8 crores as daily wage
- 621 NIRAMAYA cards worth of Rs.6.21 crores
- Kalaburagi Mahanagara Palike reserved Rs.1.31 crores to PwDs for next financial year
- Rs.2 crores ensured for retrofitted two wheelers

Impact:

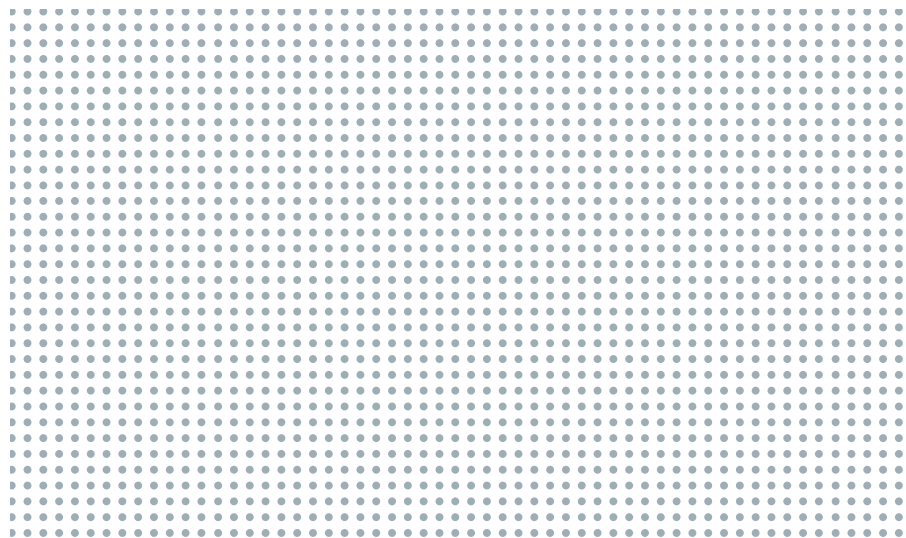
Helped 10452 PwDs/CwDs/WwDs/YwD access rights and entitlement and lead a dignified life and become contributors to society as well as have improved access to 5% reservations.

Key Highlights:

Forming local level committees (LLCs) in 6 districts to implement National Trust Act

- Supported Kalaburagi, Davanagere, Shivamogga, Hassan, Chikmangaluru and Belgaum DDWO to ensure LLCs
- NIRAMAYA support to all districts provided
- Participated in LLC meeting of Hassan district
- The National Trust Act (NTA): State Nodal Agency Centre (SNAC) new application processed
- Member of NITI Aayog: APD is a standing committee member under disability and accessibility domain
- Increase in representation of RPD champions in District RPD Act implementation committees

- RPD task force leaders applied for membership in District implementation committees of Kalaburagi, Koppala, Vijayapura, Raichur and Davanagere
- 4 leaders selected as members by DDWO and Deputy Collector in Davanagere, Koppala, Raichur and in Kalaburagi
- Participated in review meetings & raised concerns on implementation of RPWD 2016 Act and especially utilization of 5% resources
- Influencing children and schools to promote inclusion through awareness and sensitization about disability
- Organised 23 events in different schools and sensitized 942 students and 52 teachers
- Initiated Knowledge, Attitude and Practice study in schools; 3 focus group discussions organised and 79 students participated. 66 KAP Surveys in various schools of Bangalore conducted, 13 testimonials collected.
- Disability immersion manual prepared
- Developed a concept note for development of online games that would teach disability



● ● ● Collaborations—Strategic Partnerships

What do we do?

Capacitate NGO's in the working geographies in technical and organizational development for promoting services for the disability sector.

Why?

- To build eco-system for the growth of disability sector in rural Karnataka
- To share APD's best practices with partners and to implement various programs for PwDs
- To develop technical expertise and organization development of partners in the area of disability sector, support and connect partners with expert resource agencies for sustainability.

When?

Based on the needs in the geography and partner organization.

How:

- Identification of the potential partners
- Conduct due diligence and feasibility report
- Signing up MoU with partners to execute planned activities
- Capacitate NGO management and staff as required

Where:

20 Districts, 18 from Karnataka and 2 from Andhra Pradesh, covering about 155 Blocks and 3825 villages

Who:

Registered NGO's, disability people organizations, federations and academic institutions

Input:

Human resources: 3, Financial resources: 23 Lakhs

Output:

Total 26 NGOs implemented 33 projects for PwDs, 31 in Karnataka and 2 in Andhra Pradesh.

Outcome:

- 16 Partners implemented projects through SPF (Strategic Partnership Finance) mode
- 16 Partners implemented projects through SPT (Strategic Partnership Technical) mode
- 1 Partner implemented project through SPC (Strategic Partnership Consultancy) mode
- Total 26 NGOs implemented 33 projects for PwDs, 15 Partners Early Intervention, 13 Livelihood, 4 SCIR and 1 CMHP programs

Key Highlights:

- 26 partners' implemented programs for PwDs and 6 partners formed Parents Support Groups.
- 8 partners approached government to access services for PwDs through Parents Support Groups
- In partner's districts around 4000 survival kits distributed through support of APD and other local donors. Reached about 25,000 family members of PwDs.
- 6 EI partners established 36 EI sub-centers, formed 22 Parents Support Groups and 2 partners formed Federations to influence government and others in community to cater EI services.
- 8 Partners connected with Dhvani Foundation for organizational development support.
- 6 Partners supported to develop policies like POSH and CPP.

● ● ● Horticulture

What do we do?

Our late founder's passion for horticulture created the Horticulture Training initiative which skillfully trains PwDs with a variety of severe disabilities. Their training output, supported by permanent APD staff, is then sold to raise resources by selling plants, products and services, apart from evangelizing APD's work.

Where:

The operations, covering 3 nurseries in Bangalore, located in Jeevan Bhima Nagar, N S Hema Horticulture Centre, Kyalasanahalli and at the main office at Lingarajapuram.

Why:

These units support trainees to acquire skills in plant production, landscaping and general garden maintenance but also remain the largest general public outreach program at APD.

Input:

Human resource: 21

Financial resource: 94.5 Lakh

Key Highlights:

- Footfall of 35,000 visitors to our nurseries

- We added 3300 new customers and 52% of them have converted as regular customers
- Visitors and supporters of our horticulture program donated Rs 11 Lakhs to support APD's work through the evangelization efforts of the HT team.
- 78 outdoor sale week end events held in various apartment communities of Bangalore resulted in 21 lakhs sales by collaborating with more than 65 apartments.
- 3 large landscaping projects held at St. Theresa Hospital, Dhunmore School and Rohan Builders contributed 9.4 lakhs to boost sales. Plant rental service was also carried out for various corporates.
- Annual garden fair event & other promotional in house events raised Rs.15 lakh from plant and accessory sales. The Annual Plant Fair held at our N S Hema Horticulture Training Center was inaugurated by Ms Rashmi Attavar Joint MD Indo-American Hybrid Seeds and Mr Santhosh Attavar MD IAHS. Oota from your Thota program held by Urban City Farmers which created a special occasion for garden lovers.
- DeeJay Coconut Company donated 300 new dwarf ornamental tender coconut plants
- Overall resource mobilization from all sources of HT including sales and donations totaled 145.86 lakhs.
- Internal plant production targets were achieved despite pandemic situ-



ation. With the support of IIHR technology the APD team was trained to produce Arka cocopeat—this can soon be introduced into our trainees.

- More collaboration emerged with different organizations like Social Venture Partners, Varsha, Atree, Indian Institute of Horticulture Research, Urban Farmers group, Sahaja Samruddha, Total Environment builders, Rohan builders, United Way etc.
- Mother plants project with funding support of Robert Bosch implemented mainly to preserve rare medicinal herbs
- Plants worth Rs.60,000 were sold online through Amazon
- A special medicinal plants curriculum and training manual was developed in both Kannada and English with funding support of Robert Bosch.



“

Trainees acquire skills in plant production, landscaping & general garden maintenance and horticulture remains the largest general public outreach program at APD



Administration

- Fully equipped library for IDRR with photocopy machine, desk-top computers, scanner, spiral binder and paper cutter.
- AAT workshop expanded into the Fitter section of ITC
- COVID protocol—checklist and operational plan—strictly followed
- Major roof renovation project completed
- Construction of the Low Cost Hut at NSH HT Centre completed.
- Solar power: Ecogreen campus at Lingarajapuram, sponsored by SELCO foundation
- Fully accessible disabled friendly bus for SIS, As per international transport accessibility guidelines, sponsored by Collins Aerospace.

HR Highlights

- Fulltime Staff: 203, Part time staff: 17, Trainee Staff: 3, 47% female staff, 29% staff with disability
- Implemented Work from Home Policy and Higher Education Policy.
- Implemented COVID-19 Care Policy and COVID-19 Benefit Scheme of Rs.50,000/- 15 employees availed this benefit.
- Amended POSH policy and CPP Policy
- Celebrated International day of persons with Disability (IDPD) and International Women's day.

Publication

- Preventing the spread of COVID 19: A toolkit for institutions catering to PwDs
- The toolkit was translated to Kannada by Sri Belur Sudarshan (Advisor to CM, E-Governance) and disseminated by the Government of Karnataka
- APD was part of ICMR National COVID taskforce drafting committee—Guidance document for health system response for persons with disabilities and functional impairment during pandemic i.e. COVID-19
- Assistive Technologies to "Leave no one behind"—Press release (Yourstory.com)

MIS and M&E Highlights

- Compiled & disseminated the annual plan and budget of 2020-21
- Pre-post outcome indicator evaluation completed for EI (IFSP) IE (IEP & IFSP) SCIR (FIMS)
- Consolidated 5 years APPI Project report for evaluation & review process

▶ Fully Accessible disabled friendly bus for SIS School



▶ Clockwise: Roof Renovation complete; Lingarajapuram Campus now Solar Powered; APD's Vaccination Drive



Audit Report under Section 12A (b) of the Income-tax Act, 1961, in the case of Charitable or religious trusts or institutions

Report on the Financial Statements

We have examined the Balance Sheet of THE ASSOCIATION OF PEOPLE WITH DISABILITY, is a Society registered under Society's Act., having its office at 6th Cross, Hutchins Road, St. Thomas Town Post, Hennur Road (Lingarajapuram), Bangalore – 560 084 as at March 31, 2021 and the Income and Expenditure Account for the year ended on that date which are in agreement with the Books of Accounts maintained by the said Society / Institution.

Governing Board's Responsibility for the Financial Statements

The Association of People with Disability is a Society registered under Society's Act, governed by its Bye-laws. Under the bye law's, Governing Board is the Supreme authority and responsible for the preparation of these financial statements that give a true and fair view of the financial position and financial performance of the Society/Institution. 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.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with the Standards on Auditing issued by the Institute of Chartered Accountants of India. Those Standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making, those risk assessments, the auditor considers internal control relevant to the Trust/Institution's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of the accounting estimates made by management committee, as well as evaluating the overall presentation of the financial statements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion and to the best of our information and according to the explanations given to us, the said accounts read with the schedules forming part of Report and notes relating to Significant Accounting Policies give a true and fair view, in conformity with the Accounting Principles generally accepted in India:

- a) In the case of the Balance Sheet, of the state of affairs of the above-named Society / Institution as at March 31, 2021 and
- b) In the case of the Income and Expenditure Account, of the Excess of Income over Expenditure of its accounting year ended on March 31, 2021.

The prescribed particulars are annexed hereto.

Emphasis of Matter

As more specifically explained in Note 1.f of the significant accounting policies, the governing board has made a detailed assessment of its liquidity position for the next year. Based on current indicators of future economic conditions, the governing board does not expect major change in the present operating model of the Society / Institution for the coming year. The situation is changing rapidly giving rise to inherent uncertainty of the potential future impact of the COVID-19 pandemic which may be different from that assessed / estimated as at the date of approval of the financial results. The Society/Institution will continue to closely monitor any material changes arising of future economic conditions and impact on its activities and take corrective steps as required.

Our opinion is not modified in respect of this matter.

for V D S R & Co LLP
Chartered Accountants

Place: Bangalore
Date: 07.09.2021

Venkatesh Kamath S V
Partner
M.No.202626
Firm No. 001626S/S200085

ANNEXURE—Statement of Particulars

I. APPLICATION OF INCOME FOR CHARITABLE OR RELIGIOUS PURPOSES

1.	Amount of Income of the previous year applied to charitable or religious purposes in India during that year - Revenue expenditure - Capital expenditure	Rs.14,81,45,948/- Rs.56,28,094/-
2.	Whether the trust has exercised the option under clause (2) of the Explanation to section 11(1)? If so, the details of the amount of income deemed to have been applied to charitable or religious purposes in India during the previous year	No
3.	Amount of income accumulated or set apart for application to charitable or religious purposes, to the extent it does not exceed 15 per cent of the income derived from property held under trust wholly for such purposes.	-
4.	Amount of income eligible for exemption under section 11(1)(c) (Give details)	Nil
5.	Amount of income, in addition to the amount referred to in item 3 above, accumulated or set apart for specified purposes under section 11(2)	Nil
6.	Whether the amount of income mentioned in item 5 above has been invested or deposited in the manner laid down in section 11(2)(b)? If so, the details thereof	Not Applicable
7.	Whether any part of the income in respect of which an option was exercised under clause (2) of the Explanation to section 11(1) in any earlier year is deemed to be income of the previous year under section 11(1B)? If so, the details thereof	Not Applicable
8.	Whether, during the previous year, any part of income accumulated or set apart for specified purposes under section 11(2) in any earlier year	
(a)	has been applied for purposes other than charitable or religious purposes or has ceased to be accumulated or set apart for application thereto, or	No
(b)	has ceased to remain invested in any security referred to in section 11(2)(b)(i) or deposited in any account referred to in section 11(2)(b)(ii) or section 11(2)(iii), or	No
(c)	has not been utilised for purposes for which it was accumulated or set apart during the period for which it was to be accumulated or set apart, or in the year immediately following the expiry year immediately following the expiry thereof? If so, the details thereof	No

II. APPLICATION OR USE OF INCOME OR PROPERTY FOR THE BENEFIT OF PERSONS REFERRED TO IN SECTION 13(3)

1.	Whether any part of the income or property of the trust was lent, or continued to be lent, in the previous year to any person referred to in section 13(3) (hereinafter referred to in this Annexure as such person)? If so, give details of the amount, rate of interest charged and the nature of security, if any	No
2.	Whether any land, building or other property of the trust was made, or continued to be made, available for the use of any such person during the previous year? If so, give details of the property and the amount of rent or compensation charged, if any	No
3.	Whether any payment was made to any such person during the previous year by way of salary, allowance or otherwise? If so, give details	No
4.	Whether the services of the trust were made available to any such person during the previous year? If so, give details thereof together with remuneration or compensation received, if any	No
5.	Whether any share, security or other property was sold by or on behalf of the trust during the previous year from any such person? If so, give details thereof together with the consideration paid	No
6.	Whether any share, security or other property was sold by or on behalf of the trust during the previous year to any such person? If so, give details thereof together with the consideration received	No
7.	Whether any income or property of the trust was diverted during the previous year in favour of any such person? If so, give details thereof together with the amount of income or value of property so diverted	No
8.	Whether the income or property of the trust was used or applied during the previous year for the benefit of any such person in any other manner? If so, give details	No

III. INVESTMENTS HELD AT ANY TIME DURING THE PREVIOUS YEAR(S) IN CONCERNS IN WHICH PERSONS REFERRED TO IN SECTION 13(3) HAVE A SUBSTANTIAL INTEREST

Sl. No.	Name and address of the concern	Where the concern is a company, number and class of share held	Nominal Value of the investment	Income from the investment	Whether the amount in col.4 exceeded 5% of the concern during the previous year - say Yes/No
1	2	3	4	5	6
Nil					
Total Nil					

for V D S R & Co LLP
Chartered Accountants

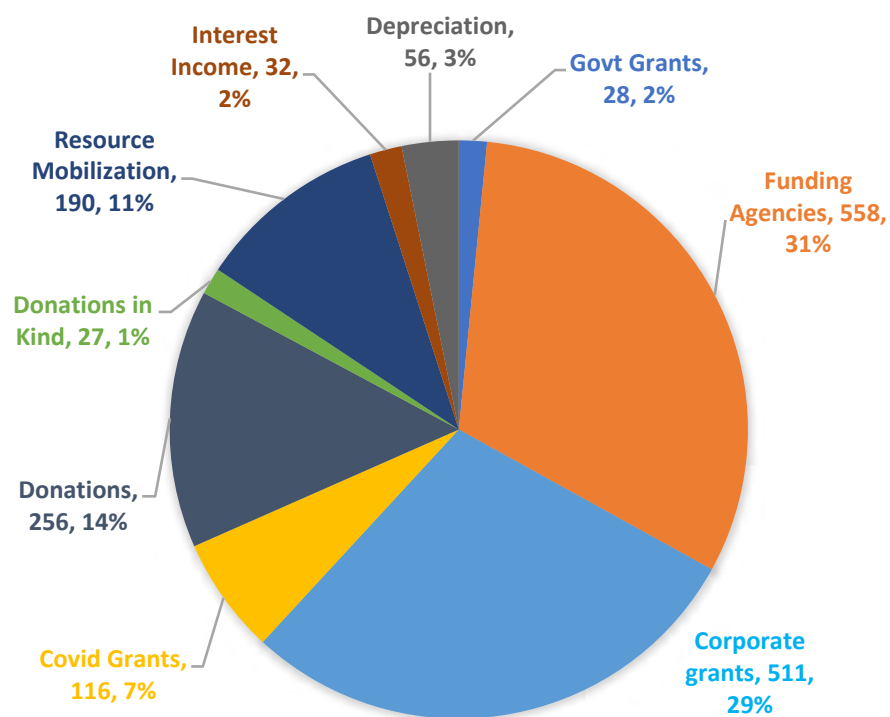
Venkatesh Kamath S V
Partner
M.No.202626
Firm No. 001626S/S200085

PLACE: Bangalore
DATE: 07.09.2021

Income and Expenditure—1st Apr 20 to 31st Mar 21

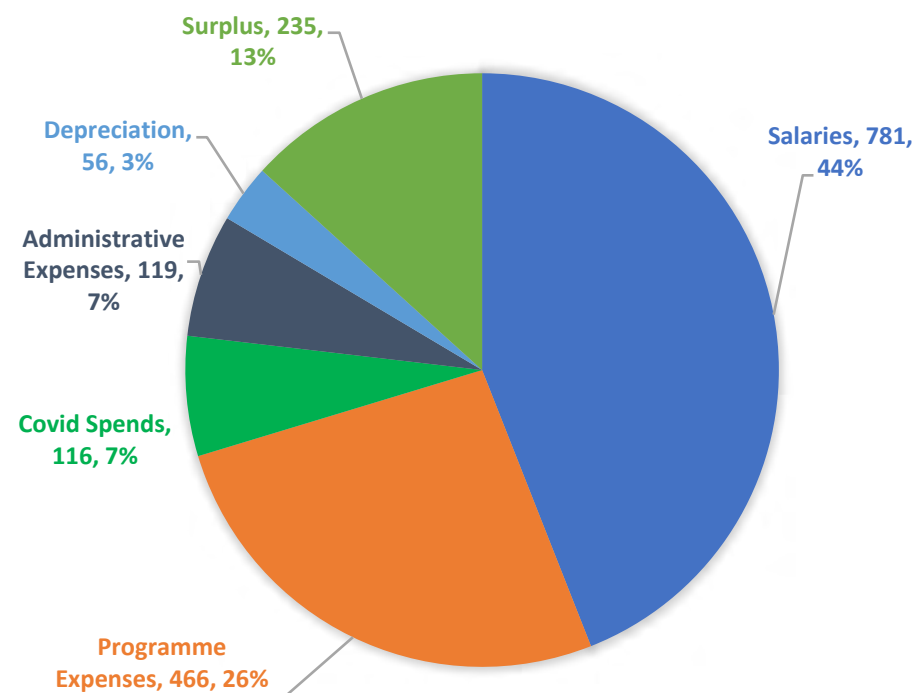
INCOME

(Amounts in Lakhs)



EXPENDITURE

(Amounts in Lakhs)



THE ASSOCIATION OF PEOPLE WITH DISABILITY: BANGALORE—BALANCE SHEET		₹ in Lakhs	₹ in Lakhs
SOURCES OF FUNDS		As at 3/31/21	As at 3/31/20
Capital Fund		4,46,05,126	4,33,86,824
General Funds		4,46,48,377	2,15,24,346
Endowment and Other Funds		6,28,21,772	6,28,21,772
Current Liabilities and Provisions		7,93,87,306	5,73,87,549
		23,14,62,582	18,51,20,491
APPLICATION OF FUNDS			
Fixed Assets		4,46,05,126	4,33,86,824
Investments		7,31,02,317	7,29,52,075
Current Assets, Loans and Advances			
Stock on Hand		15,02,110	16,44,920
Sundry Debtors		4,10,092	3,48,364
Grants Receivable		98,81,050	86,94,728
Loans and Advances		36,71,782	45,84,433
Cash and Bank Balances		9,82,90,106	5,35,09,147
		23,14,62,582	18,51,20,491

For and on behalf of The Association of People with Disability—Bengaluru

Sd/-
Subir Hari Singh
Hon. President

Sd/-
Jacob Kurian
Hon. Secretary

Sd/-
Mr. Pradeep Kumar Panja
Hon. Treasurer

As per our Report of Even Date
for V D S R & Co., LLP Chartered Accountants
F.R.No. 001626S/S200085

Venkatesh Kamath S V
Partner - M.No. 202626

Date: 07.09.2021
Place: Bengaluru

THE ASSOCIATION OF PEOPLE WITH DISABILITY: BANGALORE— INCOME AND EXPENDITURE ACCOUNT		₹ in Lakhs	₹ in Lakhs
		For the year ended 3/31/21	For the year ended 3/31/20
INCOME			
Grants and Donations		14,95,25,247	16,23,71,354
Other Resources		1,89,82,735	2,15,38,475
Interest Received		31,80,434	25,00,403
Depreciation - Withdrawn from Capital Fund		56,28,094	48,44,639
		17,73,16,509	19,12,54,871
EXPENDITURE			
Salaries and Benefits		7,80,55,242	9,86,20,551
Program Expenses		5,82,04,527	6,18,32,575
Administrative and General Expenses		1,18,86,179	1,34,73,595
Depreciation		56,28,094	48,44,639
		15,37,74,042	17,87,71,360
Excess of Income over Expenditure Transferred to General Fund		2,35,42,468	1,24,83,512
		2,35,42,468	1,24,83,511

For and on behalf of The Association of People with Disability—Bengaluru

Sd/-
Subir Hari Singh
Hon. President

Sd/-
Jacob Kurian
Hon. Secretary

Sd/-
Mr. Pradeep Kumar Panja
Hon. Treasurer

As per our Report of Even Date
for V D S R & Co., LLP Chartered Accountants
F.R.No. 001626S/S200085

Venkatesh Kamath S V
Partner - M.No. 202626

Date: 07.09.2021
Place: Bengaluru



**Thank you,
Donors!**
*Your support
is invaluable*

Donor	Amount
M. J. Aravind	13000000
Azim Premji Philanthropic Initiatives	12342296
IndusInd Bank	12071754
Titan Company Limited	10006903
Give India	8959986
Tech Mahindra Foundation	5405422
Yahoo Software Development India Pvt. Ltd.	4838120
Goodrich Aerospace Services Pvt Ltd	4495960
ABB India Foundation	4433673

Donor	Amount
H T Parekh Foundation	3800000
Jacob Kurian	3592850
Akamai Technologies India Corporate Social Responsibility Trust	3433918
C-Edge Technologies Ltd.	3000000
Northern Trust	3000000
V S Tiruvengadaswamy Mudaliar Memorial Trust	3000000
The Hans Foundation	2983703
Mercer Consulting India Pvt Ltd	2667925
Bengaluru Urban Treasury	2520748
MCKS Trust Fund	2500000

Donor	Amount
SBI Foundation	2500000
Shailesh Lakhani	2500000
Shriram Transport Finance Company Limited	2500000
Brigade Properties Pvt. Ltd.	2476979
Juniper Networks India Pvt. Ltd.	2345953
The Live Love Laugh Foundation	2214861
SELCO Foundation	2184435
NetApp India Marketing and Services Private Ltd	2100000
VST Tillers Tractors Ltd.	2000000

Donor	Amount
Robert Bosch Engineering and Business Solutions Private Ltd	1855755
Donatekart Foundation	1678743
SERVE	1591772
Adani Ports And Special Economic Zone Ltd	1500000
Sequoia Capital India LLP	1500000
Varsity Education Management Pvt Ltd	1500000
Thoughtworks Technologies India Pvt Ltd	1316345
Charities Aid Foundation of America	1242539
Bluejay Enterprises Pvt. Ltd.	1147816
SVP Philanthropy Foundation	1100000
UK Online Giving Foundation	1018732
Adani Transmission India Ltd.	1000000
NTT India Private Limited	1000000
Cognizant Foundation	920640
K R Enterprises	917244
Recaero India Pvt. Ltd	800000
National Centre For Promotion of Employment For Disabled People (NCPEDP)	515106
Ambiga Subramanian	500000
Sudhakar V S	500000

Donor	Amount
MIBLOU	425732
Weir Minerals (India) Pvt. Ltd.	400000
TVS Capital Fund Pvt. Ltd	385000
Muthoot M George Foundation	375000
United Way Of Bengaluru	360600
Legato Health Technologies	350000
Biotechnology Industry Research Assistance Council (BIRAC)	342000
Venkata Rama Krishna Nakkina	328250
The Himalaya Drug Company	305000
EI Design Pvt Ltd	300000
National Trust	300000
Sasken Foundation	300000
The International School Bangalore	300000
Pradeep Badri	289827
Murali Krishnan S	255000
Kintetsu World Express (India) Pvt Ltd	240500
Akhil Krishnan Unni	200000
Community Services of Bangalore	200000
Dusters Total Solutions Service Private Limited	200000
I&B Seeds Private Limited	200000
ITC Ladies Social Welfare	200000

Donor	Amount
Disability NGOs Alliance (DNA)	187344
Your Cause	176889
Pradeep Kumar Panja	156560
George Zacharias	151400
Supreem Pharmaceuticals Mysore Pvt Ltd	150000
COSI Consulting	148190
Motivation India	142300
S Mohan Rao	138000
Alice Ruemmler	128000
Ramchandra Shenai	125000
Nasscom Foundation	111636
Prayas Trust	110950
Mosur Saisekar	100011
Accel Partners India LLP	100000
Anand Kumar S	100000
Canopus Infrastructure LLP	100000
Dr. Syed Ahmed Memorial Charitable Trust	100000
Gopalakrishnan P K	100000
Krishna Kumari Agarwal	100000
Kurien T K	100000
NGGAWA Nirman Technologies Pvt. Ltd.	100000
Sarada Nagaraja Rao	100000

Donor	Amount	Donor	Amount	Donor	Amount
Satyanarayana DRV	100000	Sridhar Kanthadai	50000	Gopalakrishnan Kary	30000
Shilpa Vora	100000	Venkat Prahlad S N	50000	Indira Krishnaswami	30000
Sri Balaji Charitable Trust	100000	Nishit Garg	49000	Nitin Kataria	30000
Vegasana Venkata Satyanarayana Raju	100000	Nasdaq Corporate Solutions (India) Pvt Ltd	47500	Sharadha R	30000
State Bank of India	96220	Charities Aid Foundation India	46770	Vandana Selat	30000
George Verwer	95014	Sib Kumar Adhikari	44000	Varun Nayyar	30000
Lorraine Cairney	85458	Shivanand M Patil and GR Group	42350	Mohammed Fakhrudeen	27996
The High Commission of Canada to India	82070	Chandna J K	40000	Aditya Prakash	26000
Ramesh V Gulabani	80000	Ishita Bhatia	38500	Bhuvaneshwari Anand	25700
Karnataka Forest Department	75671	Ashok Kadoli	38000	Sunil Kumar K P	25150
Shaik Humayun	75000	Jasjit Kahlon	38000	Alok Bhupendranath Bhargava	25000
Naveen Kumar Kalyankar	71484	Bhavesht Parekh	37500	Amish Chhunilal Chheda	25000
Vivek Menon	67000	Sharada Peetham	36000	Catholic Health Association of India	25000
Ramanathan Jawahar	65700	Dr. Veeranna A. Kotrashetti	35000	Eswaran Narasimhan	25000
Jayaram Sarma R	55000	PDO And President Inchageri Gram Panchayath	34000	Garden City Farmers	25000
Ishwar B Hemrajani	52000	Yashpal Singh Jhala	33500	Karthik Ramanathan	25000
Aayukaru Mahanagara Palike Belagavi	50000	Kalyani Vijay	32000	Krishan Behari Mathur	25000
BNB Security and Automation Solution	50000	Vijay Kumar Sood	32000	Malini Saran	25000
Geetha Mohan Rao	50000	Seema Joshi	31585	Muragesh Asundi	25000
Krishnamurthy Ramanathan	50000	Mary	30400	Ravindran R	25000
S N Foundation	50000	Anand Goyal	30000	Sailaja Rani Garapati	25000
Saurabh Narain	50000	Appala Rajendra Prasad Patnala	30000	Sunila Gupte	25000
		Ashish Gupta	30000		

This is a partial list of Donors (above Rs.25000)





IndusInd Bank

JUNIPER
NETWORKS



**LIVE
LOVE
LAUGH**
Foundation



SEQUOIA



SERVE



Tech
Mahindra
FOUNDATION

ThoughtWorks®



WEIR
Minerals



yahoo!





Organization Name The Association of People with Disability

Registration Details
Society Registration
No. S2179 Dt. 20/05/1959
FCRA Registration
No. 94420100 Dt. 01/02/1985
Registered under 80G of Income Tax Act, 1961
Registered with UN ECOSOC

Registered Office
6th Cross Hutchins Road, Off Hennur Road,
Lingarajapuram, St. Thomas Town Post,
Bengaluru-560 084

Other Operational Centres
Jeevan Bhima Nagar, Bengaluru
Kyalasanahalli, Bengaluru
Anand Ashram, Chintamani, Kolar Dt.
Vijayapura Dt.
Davangere Dt.
Kalaburagi
Belagavi

Telephone, Email & Web
Telephone: (+91) 80 25470390 / 25475165
Email: contact@apd-india.org
Website: www.apd-india.org

COO Dr. Senthil N. S. Kumar

Office Bearers and Members of the Governing Board 2020-21	Shri Subir Hari Singh	Hon. President & Trustee
	Smt Amritha V. M. Ward	Hon. Vice President & Trustee
	Shri Jacob Kurian	Hon. Secretary & Trustee
	Shri Pradeep Kumar	Hon. Treasurer & Trustee
	Shri V. P. Mahendra	Trustee
	Shri Renuka Aradhaya	Trustee
	Shri Mohan Sundaram	Trustee
	Shri Mohan Rao	Trustee
	Dr Deepthi Shanbhag	Member
	Smt Vaishali Pai	Member
	Shri P K Gopalakrishnan	Member

Advisory Panel Members	Smt Anita Bhat-Human Resource Development
	Shri K G Y Narayan-Livelihoods
	Dr Kurian Zachariah-Physical & Social Rehabilitation

Bankers HDFC / State Bank of India

ASSOCIATION MEMBERSHIP

As on 31st March 2021—Total: 98

Patron Members: 08

Life Members: 82

Ordinary Members: 08



What our Donors say...

"LiveLoveLaugh's partnership with APD started in 2015 with a program supporting 200 PWMIs (Persons With Mental Illness) in two taluks. This has expanded to cover 1069 PWMI across 10 taluks in Davangere and Gulbarga districts. We are pleased to collaborate with APD to bring quality psychiatric treatment and care to the doorstep of rural communities."

**—Anisha Padukone, CEO,
The LiveLoveLaugh Foundation**

"Mercer as an organization believes in giving equal opportunity to all individual. And, believe it or not everyone has super powers. But it's only during challenging times that individuals break the shackle to stand up for themselves, mostly for their loved ones. But why take a chance? Why not create a platform that offers equal opportunity –boosting confidence and encouraging self-sufficiency. With this thought we approached APD and hoped to reach out to a handful to extend a hand to sustain the livelihood of the differently abled people in a place tucked away in Karnataka."

—Sony Rag, Mercer

"Titan Company Ltd, as part of their CSR initiatives has been supporting APD for their livelihood programs since 2015. We find Team APD extremely sincere, totally committed, flexible to new ideas and fully co-operative. We are happy with the association."

—Ms. Prathibha, Titan

"Ganesh and I see a lot of potential in APD as an organization and have been humbled by their work in this space. We are happy to support the solar powering project from Konrai Foundation for it fits very well into one of our focus areas, of promoting eco-friendly solutions. The solar project should hopefully save some operational cost in the years to come which can be put to effective use for core programs"

—Sashi Rajamani, Konrai Foundation

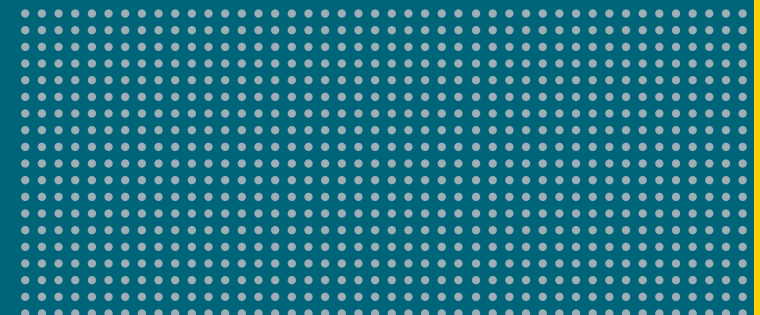
"Well APD is one of the rarest projects that's very close to my heart. A 62 year old organization with people young at heart in the team, who are passionate, enthusiastic in working

towards the cause, not to achieve something but to progress everyday for making lives better while being together with the one's who need a little momentum & motivation. Wishing them to grow, expand & spread their reach to other parts of the country too."

—Pallove Raj, IndusInd Bank

"I believe, many persons with disabilities need assistance and support to achieve a good quality of life and to be able to participate in social and economic life on an equal basis with others. Collins CSR is extremely happy to work with APD who is subject matter expert in disability sector, tirelessly working hard through several programs and interventions."

—Amit Sawarkar, Collins





SINCE 1959

THE ASSOCIATION OF PEOPLE WITH DISABILITY

6th Cross, Hutchins Road, Off Hennur Road

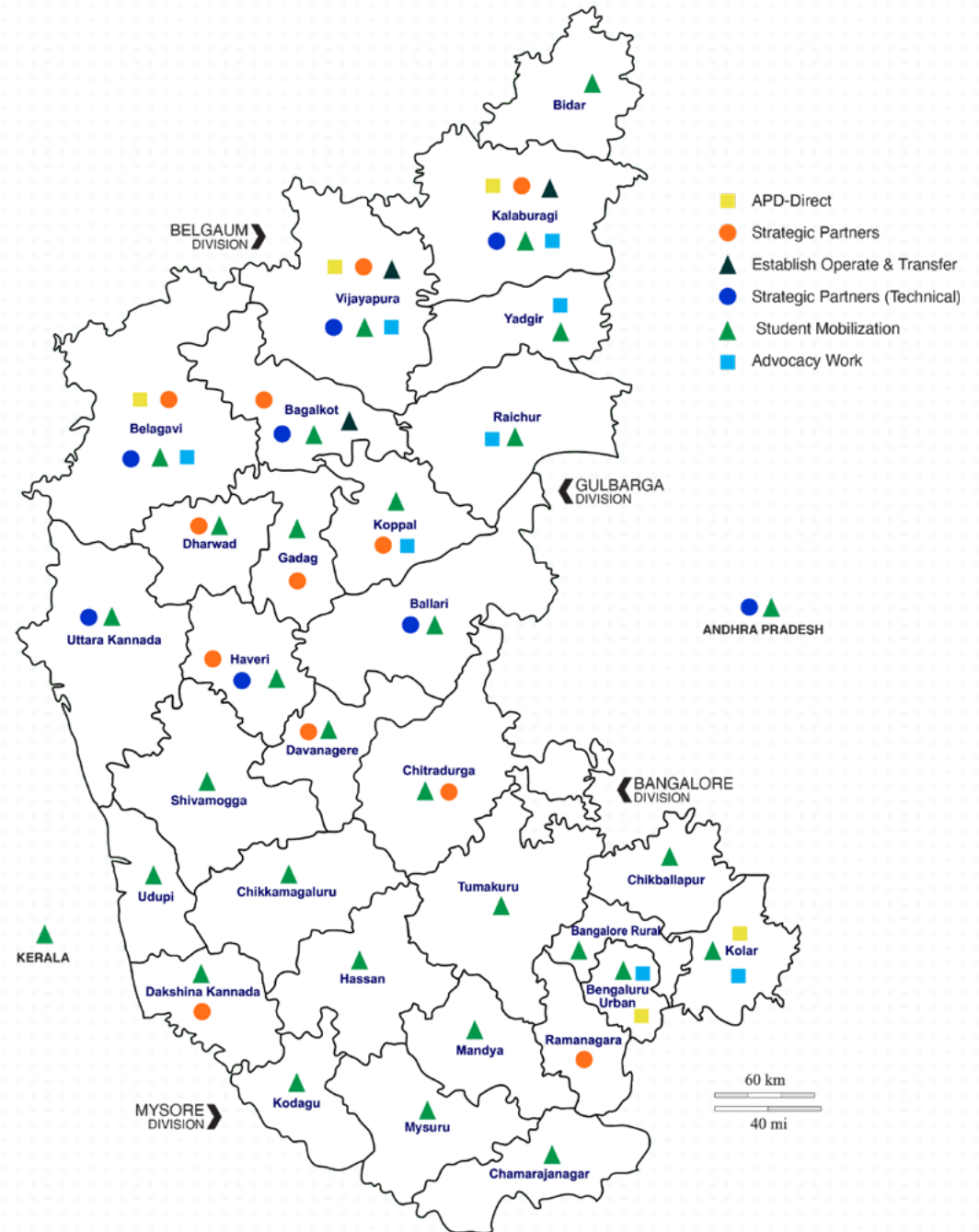
Lingarajapuram, St. Thomas Town Post

Bengaluru-560084, Karnataka

Phone: +91 (80) 25475165

Email: contact@apd-india.org

Website: www.apd-india.org



- facebook.com/APDIndia.org
- twitter.com/APD_India
- linkedin.com/company/apd-india
- instagram.com/apd_india
- youtube.com/c/APDIndiaNGO