

RANGOONWALA COMMUNITY CENTRE

●●● आत्मनिर्भरता के पथ पर

Rangoonwala Foundation (India) Trust

Impact Assessment Report

June 2023

Report by

SOCIAL LENS
OPTIMISE IMPACT

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Executive summary

In India, a significant 24 percent of the population comprises urban poor, who reside in informal settlements.¹ These communities grapple with a multitude of challenges stemming from overcrowded living conditions and restricted access to vital services like sanitation, healthcare, and education. The amalgamation of limited opportunities and socio-economic obstacles presents formidable barriers to development for these marginalised urban residents. These challenges manifest uniquely across various stakeholder groups, leading to adverse outcomes, including poor mental and physical health, financial constraints hindering skill development, and restricted access to educational and extracurricular activities, all of which perpetuate lasting negative impacts on the lives of those living in slums.

The Rangoonwala Foundation (India) Trust, a non-profit based in Mumbai, recognises these pressing issues and has devised a multifaceted approach that encompasses development areas such as education, healthcare, women's empowerment, livelihood enhancement, and community development. They have put their approach into action through one of their key interventions: the establishment of Rangoonwala Community Centres (RCCs). These centres are designed to serve as safe and inclusive spaces catering to the diverse needs of all residents, particularly the urban poor, residing in informal settlements across Mumbai.

RF(I)T engaged Social Lens to conduct a comprehensive impact assessment of the RCC intervention spread across six locations in Mumbai. The primary goal was to evaluate the intervention's effectiveness and its direct and indirect impacts on the targeted stakeholder groups, including children, youth, women, senior citizens, groups, and the broader community members.

To ensure a well-rounded assessment, a diverse sample of both target beneficiaries and resource persons from all six of Rangoonwala's community centres participated in interviews. These interviews aimed to provide a holistic understanding of the intervention's rationale, purpose, and its overall contribution to community development.

The table below delineates the specific stakeholders involved and the activities conducted at the centres:

1 Johnston, Claire. "Rapid Urbanization: Slum Settlements in India's Mega-cities." ArcGIS StoryMaps, 6 Dec. 2020, storymaps.arcgis.com/stories/a243572952e94fc58a195118c1185bea/print

Stakeholders	Capacity Building	Health Interventions
Children	Bal Utsav, Bal Umang, summer camps, festival camps, co-curricular & extra-curricular activities, Centre Drop-in activities	Health awareness, check-ups and linkage with the Municipal Corporation for immunisation and Immunity Kits during COVID-19
Youth	Skill training, career focus, career guidance, aptitude testing, scholarships, reflect group, volunteering opportunities, Festival & Summer Camps for adolescent girls	Health camps and sessions on menstrual hygiene and reproductive health with adolescent girls
Women	Short- and long-term vocational trainings, debate forums, monthly open forums, entrepreneurship development, volunteer cadre building, exposure visits, entrepreneurship development & mentoring, opportunities for creative expression through dance and drama	Health camps, health consultation clinics, counselling, awareness sessions, yoga
Senior Citizens	Monthly meetings, picnic and exposure visits, social awareness, Aashayein Club, Festival & Summer Camps	Health camps and awareness sessions
Groups	Computer literacy, community outreach, Monthly Open Forums	Nutrition, counselling & treatment linkage support for Tuberculosis patients, awareness
Community Members	Ration support and awareness, additional support such as provision of digital devices	Ration for Chronic Kidney Disease patients; Community Sanitation & hygiene; equipment support – oxygen concentrators, pulse oxymeters & IR thermometers



IMPACT

Across all the stakeholders interviewed, the impact of the intervention as a space for personal development and growth was starkly visible. The dedicated volunteer cadre from the community plays a significant role in maintaining a constant link with the community and addressing their needs. Moreover, the RCCs have a substantial pool of resource persons who facilitate various activities, such as drama and aerobics, drama (including street plays) and dance to encourage expression and effective communication within the community. Additionally, partnerships with government bodies, local chemists and ration suppliers anchored the support provided during the pandemic, improving access to essential services and products within the community. The stakeholders participating in the impact assessment study have praised the intervention's ability to establish a robust sense of community connection through its initiatives.

The key impact on each stakeholder group has been detailed below:

Work with Children: Engaging in RCC's activities had a transformative effect on 76.19 percent of the children, who witnessed notable improvements by acquiring new skills through activities such as drawing, skits, and dancing. This has resulted in increased confidence levels, experienced by all the children interviewed. Notably, 56.34 percent of the children emphasised the essential role of RCC in providing them with opportunities to participate in extracurricular activities and creating a space for them to learn and express their creativity.

Work with Youth: The career guidance and other career-focused activities offered by the RCCs received positive feedback from 74 percent of the youth participants. These activities proved highly beneficial in providing clarity and direction for their future career paths. The participants appreciated the individualised support, including aptitude testing and tailored options to guide their career progression.

Work with Women: A remarkable 98 percent of women reported experiencing a significant surge in their confidence levels, attributing it to the transformative journey of self-discovery and personal growth facilitated by the RCCs in their respective localities. Engaging in effective communication with diverse individuals, they forged meaningful connections and earned the respect and admiration of their communities. Additionally, 41 percent of women found a newfound sense of self-identity and nurtured a strong ambition for their lives, propelling them toward achieving their goals and aspirations. 28 percent of these women adopted healthier lifestyles, incorporating regular exercise, consuming nutritious food and water, and prioritising regular medical check-ups to ensure their overall well-being.

Work with Senior Citizens: The impact of the health and yoga sessions on senior citizens is evident. 52.38 percent of the respondents reported successfully implementing positive changes, such as practising yoga and proactively managing their health.



On the other hand, 28.57 percent of the senior citizens expressed feelings of boredom and restriction due to limited mobility associated with their age but acknowledged the invaluable support provided by the intervention in addressing these issues.

Work with Groups: Among the skill-building groups, 55.5 percent of the Computer Literacy Program participants stated that they were able to leverage this course at their schools and jobs. In addition, tuberculosis support beneficiaries showed notable healthcare improvements, including weight gain, enhanced well-being, and improved disease management.

COVID-19 Response and Healthcare: The intervention in response to the COVID-19 pandemic, which continues as a Community Needs Response, involved sanitation volunteers and community members. Overall, the feedback from all the recipients of the COVID-19 intervention has been positive. This underscores the success of the interventions in addressing the unique requirements of community members, including provisions for ration, access to medication, and connections with healthcare professionals.

The study shows that stakeholders are content with the intervention, resulting in improved community well-being. The activities conducted through the RCCs have led to positive behaviour changes, including increased health awareness and healthier habits. Furthermore, they have enhanced stakeholders' confidence and interpersonal skills, fostering engagement in entrepreneurial opportunities and creating a support system to tackle challenges.

RECOMMENDATIONS

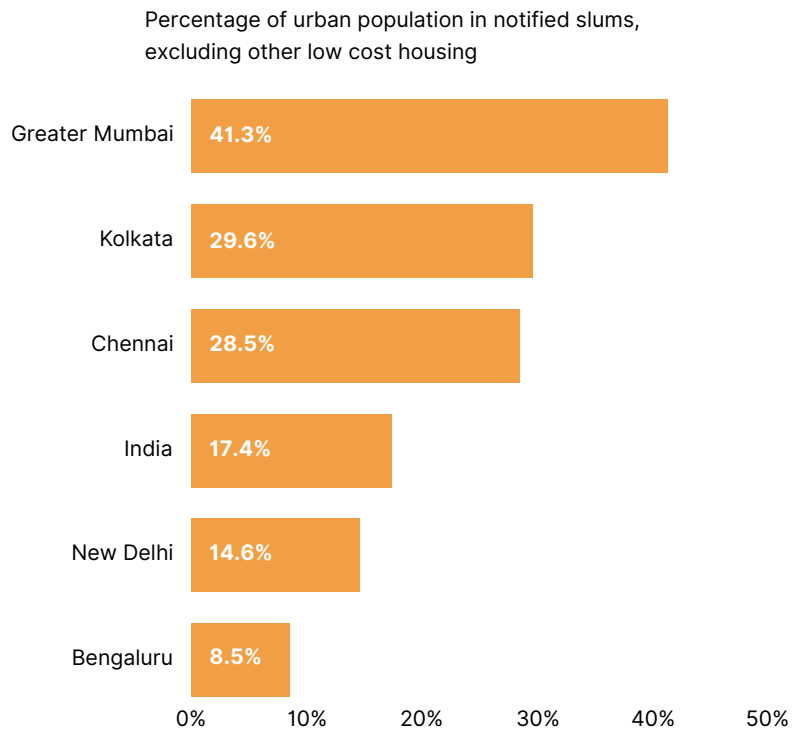
To enhance the intervention's scalability, it is recommended to establish a **structured Monitoring and Evaluation (M&E) framework**. This can be achieved by integrating M&E into the responsibilities of the volunteer cadre and maintaining a monthly visitor log at the Rangoonwala Community Centre (RCC) for internal assessment. Given that most stakeholders interviewed have been in the community for over a year, the incorporation of a **6-month tracking period** into the impact monitoring, particularly for skill-based activities, will provide valuable insights into the intervention's effectiveness.

Additionally, conducting **regular feedback sessions** involving various stakeholders could allow for systematic incorporation of additional courses or initiatives which consider the community's evolving needs, while enhancing community engagement.

Introduction

Background

India has undergone a rapid wave of urbanisation in recent decades, primarily driven by the allure of increased livelihood opportunities within cities.² However, the cities were ill-prepared to accommodate the surge in population, leading migrants from nearby towns and villages to seek temporary refuge in hastily constructed, makeshift shelters that lacked essential services like sanitation, clean water, and basic healthcare.³



These makeshift shelters, commonly referred to as slums, emerged as a consequence of this urbanisation. The unfortunate consequence of neglecting the needs of this population was the transformation of these slums into permanent residences for many, spanning multiple generations.⁴ A significant proportion of India's urban population, particularly the urban poor, now calls these slums home. According to the 2011 census, approximately **17.4 percent of the country's population was found to be residing in slums**.⁵ However, this figure is believed to be significantly higher, roughly double, when accounting for other types of low-cost housing, including non-notified and unofficial slums.⁶ The issue is particularly pronounced in the Greater Mumbai area, where a staggering 43.1 percent of the population resided in officially recognised slums as of the last census.⁷

Amidst the backdrop of extreme overcrowding in low-cost housing, there is a significant impact on overall health of the urban poor. This overcrowding leads to adverse health outcomes across various indicators. Notably, neonatal and infant mortality rates, gastro-intestinal infections, respiratory infections, and hypertension are notably more prevalent among this vulnerable population.⁸ Moreover, several interconnected factors compound these health challenges. The lack of bargaining power, limited access to resources, and the struggle to sustain a livelihood result in widespread stress, which, in turn, leads to detrimental effects on cognitive function and overall physical health, including chronic conditions. Constant anxiety and uncertainty related to accessing basic utilities due to poverty also leads to long-term depression.⁹ The pervasive nature of these conditions at a community level translates into intergenerational impacts as well.

² *Urbanization in India*. (n.d.). [Text/HTML]. World Bank. Retrieved 23 June 2023, from <https://www.worldbank.org/en/news/feature/2011/09/22/india-urbanization>

³ UN-Habitat. (2003). *What are slums and why do they exist?*

https://web.archive.org/web/20131021020527/http://www.unhabitat.org/downloads/docs/4625_51419_GCpercent201percent20Whatpercent20arepercent20slums.pdf

⁴ *Rapid urbanisation: Where do urban poor stand?* (n.d.). Retrieved 23 June 2023, from <https://www.downtoearth.org.in/blog/urbanisation/rapid-urbanisation-where-do-urban-poor-stand--78613>

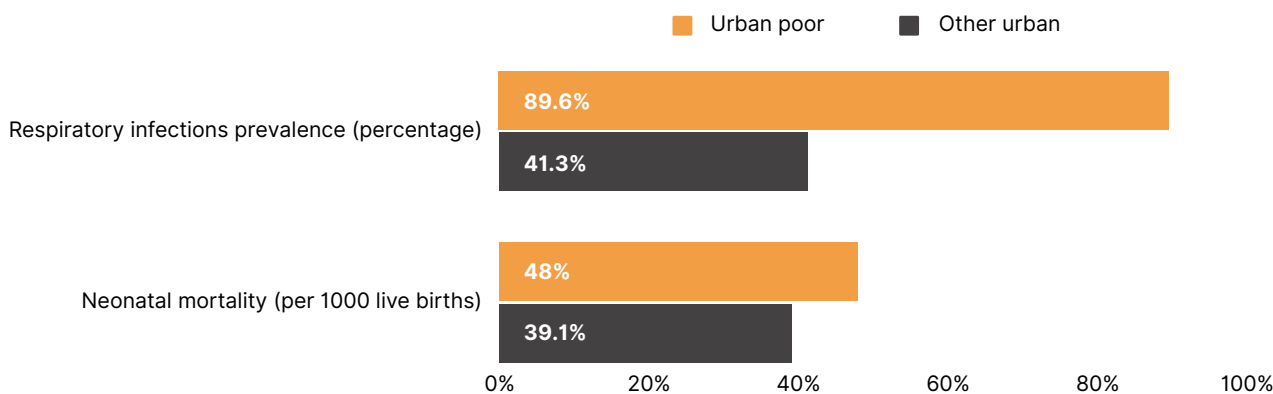
⁵ Census of India | Office of the Registrar General & Census Commissioner, India. India, 2009. Web Archive. <https://www.loc.gov/item/cwaN0017959/>

⁶ 17 percent of urban India lives in slums: Census. (2013, March 22). *The Times of India*. <https://timesofindia.indiatimes.com/india/17-of-urban-india-lives-in-slums-census/articleshow/19118219.cms>

⁷ *Report of the Committee on Slum Statistics/Census*. (2013). [https://mohua.gov.in/upload/uploadfiles/files/9Slum_Report_NBO\(2\).pdf](https://mohua.gov.in/upload/uploadfiles/files/9Slum_Report_NBO(2).pdf)

⁸ Vaid, A., Mammen, A., Primrose, B., & Kang, G. (2007). Infant mortality in an urban slum. *The Indian Journal of Pediatrics*, 74(5), 449-453. <https://doi.org/10.1007/s12098-007-0075-1>

⁹ *Low-income communities | anxiety and depression association of america, adaa*. (n.d.). Retrieved 24 June 2023, from <https://adaa.org/find-help/by-demographics/low-income>



While mental health is a significant concern for all urban poor communities, geriatric mental health is emerging as a growing crisis in the country.¹⁰ Longer and more challenging commutes exacerbate this issue, making it difficult for people to interact with each other and the broader community. Regrettably, this issue remains largely unaddressed in the country due to inadequate health infrastructure and support.¹¹ Resource constraints within these communities mean that members lack access to awareness campaigns, initiatives, free tests, and other forms of support that are more readily available elsewhere.

Furthermore, the urban poor face substantial challenges due to the limited availability of well-paying jobs and quality skill development opportunities.¹² Consequently, poverty worsens, leading to mental health issues, including addiction and substance abuse, particularly among men.¹³ Women in these communities, who often shoulder over 90 percent of household duties, bear the brunt of this burden. They experience regular verbal and physical abuse,^{14, 15} and have limited agency when it comes to income generation, as their earnings are frequently expected to be solely allocated for household expenses, hampering their mobility.¹⁶

Similarly, urban poor children experience particularly poor developmental outcomes¹⁷ compared to their urban counterparts living above the poverty line, as well as their rural peers with limited access to facilities.¹⁸ These challenges affect not only health outcomes,¹⁹ but also various other aspects of their lives.²⁰ The lack of access to quality livelihood and skill development opportunities often forces children and young adults to forego education in favour of taking up menial, low-paying jobs, which negatively impacts their future earning potential. Furthermore, the limited space and opportunities for children to play and interact with peers hinder their crucial developmental milestones.

In response to these multifaceted challenges, the Rangoonwala Foundation (India) Trust has taken a proactive approach by establishing six Rangoonwala Community Centres (RCCs) spread across in Mumbai in areas characterised by a high concentration of underserved communities. **They have carefully curated and tailored activities, events and programs, delivered through its RCCs, designed to address the specific needs and requirements of various stakeholder groups within these communities.**

10 Girdhar, Ritika & Sethi, Sujata & Parkash, Ravi & Khurana, Hitesh. (2019). Geriatric mental health problems and services in India: A burning issue. 6. 15-19

11 Tiwari, S., & Pandey, N. (2012). Status and requirements of geriatric mental health services in India: An evidence-based commentary. *Indian Journal of Psychiatry*, 54(1), 8. <https://doi.org/10.4103/0019-5545.94639>

12 Care India. (2015). Poor Women in Urban India: Issues and Strategies. <https://www.careindia.org/wp-content/uploads/2017/05/Poor-Women-in-Urban-in-India.pdf>

13 Ibid.

14 Jungari, S., Chauhan, B. G., Bomble, P., & Pardhi, A. (2022). Violence against women in urban slums of India: A review of two decades of research. *Global Public Health*, 17(1), 115-133.

<https://doi.org/10.1080/17441692.2020.1850835>

15 Brown, H. (2018, September 14). Gender discrimination: Women's rights & lives in slums. *Habitat for Humanity GB*. <https://www.habitatforhumanity.org.uk/blog/2018/09/gender-discrimination-slums/>

16 Ibid.

17 Ernst, K. C., Phillips, B. S., & Duncan, B. "Duke". (2013). Slums are not places for children to live. *Advances in Pediatrics*, 60(1), 53-87. <https://doi.org/10.1016/j.yapd.2013.04.005>

18 Ibid.

19 *Stress as a mechanism of poverty's ill effects on children*. (n.d.). <https://www.apa.org/pi/families/resources/newsletter/2012/07/stress-mechanism>

20 Hussain, A., Ali, S. M. K., & Kvale, G. (1999). Determinants of mortality among children in the urban slums of Dhaka city, Bangladesh. *Tropical Medicine and International Health*, 4(11), 758-764. <https://doi.org/10.1046/j.1365-3156.1999.00485.x>

Program Cardinals

About Rangoonwala Foundation (India) Trust

Established in 2003, the Rangoonwala Foundation (India) Trust RF(I)T is on a mission to catalyse socio-economic development within marginalised communities. This community-oriented organisation is deeply committed to fostering inclusive and sustainable progress. Their strategy involves targeted interventions that address key areas, such as healthcare, livelihood, capacity building, and community services. Through these initiatives, RF(I)T endeavours to empower marginalised communities, facilitating their long-term socio-economic self-reliance and ensuring lasting sustainability.



Six (6) Rangoonwala Community Centres (RCCs) are strategically located across two Municipal wards in Mumbai: **K East and P North**. These six RCCs are located in Premnagar (2005), Subashnagar (2008), Shivtekdi (2008), Mahakali (2008), Anandwadi (2010), and Pathanwadi (2011). These centres have been thoughtfully designed to engage a diverse community, catering to the needs of children, women, youth, senior citizens, and other community members. They offer a wide array of activities, ranging from health checkups to skill-building programs to serve the unique requirements of each segment of the community.

Intervention at a Glance

<p>Details of the Implementing Organisation</p>	<p>Name: Rangoonwala Foundation (India) Trust Year of establishment: 2003</p>
<p>Locations of the Intervention studied</p>	<p>Two Municipal wards in Mumbai K east, P north</p>
<p>Stakeholders Involved</p>	<ul style="list-style-type: none"> • Children • Youth • Women • Senior Citizens • Groups • Community needs response beneficiaries (started during COVID-19)
<p>Objectives of the Intervention</p>	<ul style="list-style-type: none"> • To ensure holistic development of the children and youth with meaningful activities, career guidance and skill training; preparing them for the future • To empower the women with skill training and improving their confidence, creating support systems and promoting health-seeking behaviours • To senior citizens with activities that make them feel valued and joyful • To cater to the overall well being of the community through need based interventions

RF(I)T's Activity-to-Impact Methodology

The Rangoonwala Community Centres follows 6-K approach, as depicted below:



The implementation of the Activity-to-Impact Methodology by the RCCs involves aligning the centre's activities with intended outcomes and understanding its subsequent impact on stakeholders' lives and the overall community within the designated geographical areas. This process is delineated as follows:

Activities conducted at the RCCs

Intended outcomes and impact

Work with Children

Bal Utsav, Bal Umang, Summer camps and festival camps, education activities, health check-ups and immunisation

Ability to express themselves creatively and foster friendships, cultural sensitivity and improvement of their well-being

Work with Youth

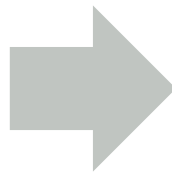
Skill trainings, career guidance, scholarships, reflect group, volunteering opportunities, camps

Creating a sense of responsibility among the youth groups and providing them with support and options for pursuing the choice of their career

Work with women

Short term & long term vocational training, debate forums, monthly open forums, health camps, consultations, counselling, awareness

Empowerment of women through development of support systems, ability to access earning opportunities that contribute to the household income, improvement in confidence and increase in health-seeking behaviours



Work with Senior Citizens

Monthly meetings, organised picnic and exposure visits, social awareness, health camps, Aashayein Club

Development of peer groups and health-seeking behaviours, access to recreational activities resulting in well-being and creation of self-aware and active members of society

Work with Groups

Computer literacy program, Tuberculosis support, community outreach

Creating opportunities for community members to be able to improve their skills, health and have access to spaces focused on their betterment

COVID-19 needs response

Sanitation support, ration support and awareness, additional support such as provision of digital devices

Catering to the needs of the community based on the pandemic, which has further continued as interventions to improve the sanitation facilities of the community

Social Lens Methodology

Purpose and scope of the Impact Assessment

Social Lens Consulting, an independent Assessor agency, was engaged to evaluate the outcomes and impact of RF(I)T's Rangoonwala Community Centres (RCCs). This report presents the results of the impact assessment from an independent, third-party perspective.

The study was conducted with the following objectives:

- To determine the contextual background of the intervention and the extent to which its objectives were consistent with the community members' needs, accounting for the socio-economic challenges faced by the target beneficiaries.
- To examine the role of intervention structure and nature of delivery in achieving the intervention's goals, outputs and outcomes.
- To understand the impact delivered through direct beneficiaries (children, youth, women, senior citizens, community people, other NGOs & CBOs working in the area, RCC volunteer cadre, other stakeholders linked to health and capacity building programmes - resource persons, area schools, Govt. Health officials, National Tuberculosis Elimination Programme officials etc.) as well as other stakeholders such as Centre Heads and RCC Programme Team.

Direct Beneficiaries	Indirect Beneficiaries/Partners	Intervention
Children	Health officials	RCC Programme Team (internal)
Youth	NGOs	Centre Heads (internal)
Women	Mandal committee in-charge, local CBOs	Volunteer cadre (external)
Senior citizens	Anganwadi & Community Health Volunteers (CHVs), government officials, elected representatives	Resource persons (external and/or internal)
Community members and groups		

Impact Assessment Framework

<p>Assessment Criteria</p>	<p>Indicators <i>Data points that are captured to assess the changes within the community resulting from the intervention. They serve the purpose of gauging whether the broader objectives align with the assessment criteria that have been achieved.</i></p>
<p>Relevance <i>To understand the alignment of the intervention and its programmes with the community's needs, as well as its significance in empowering various community stakeholders to address the challenges they face.</i></p>	<ul style="list-style-type: none"> • Challenges faced by the stakeholders (children, youth, women, senior citizens, community members) • Challenges due to lack of safe and empowering spaces in the community • Socio-economic background of the target communities
<p>Impact <i>To understand the intervention's impact on stakeholders in achieving self-reliance and a fulfilling life as a long-term outcome.</i></p>	<ul style="list-style-type: none"> • Change in the way of life of senior citizens and the community at large with respect to health practices • Change in prioritisation of health of various community members • Increase in health-seeking behaviours among the senior citizens • Change in access to various services (health, vocational courses, digital literacy) • Contribution to income levels by women and youth • Improvement in sanitation facilities in the localities • Increase in access to creative avenues for children • Increase in mental and physical well-being of senior citizens
<p>Sustainability <i>To understand how the RCCs actively engage the community in the administration of the intervention and ensure that the intervention's effects on individual community members result in a lasting and meaningful difference.</i></p>	<ul style="list-style-type: none"> • Empowerment of the community members • Instilling ownership amongst the community members by nurturing and building a robust volunteer cadre • Engaging with multiple stakeholders to ensure sustained programme delivery
<p>Behaviour change <i>To understand the effectiveness of the activities conducted at the RCCs in achieving the long-term goal through shifts in behaviour.</i></p>	<ul style="list-style-type: none"> • Implementation of learnt skills in life • Change in confidence levels • Forging friendships and networks/community support • Personal growth/ self-awareness • Practices pertaining to health, sanitation etc.



Methodology

Primary and Secondary Research

The study employed a mixed-methods approach, which entailed the collection and analysis of both quantitative and qualitative data. This analysis drew from primary and secondary research sources. An in-depth review of the intervention's literature was conducted to grasp the organisation's objectives and the design of the RCC intervention. This information served as the foundation for creating assessment tools and indicators, as well as for identifying gaps and challenges.

Additionally, reports from various sources, including government publications (such as the Periodic Labour Force Survey, Census data, and the Annual Status of Education Report), social enterprises, and independent studies were examined to assess the intervention's relevance in addressing beneficiaries' needs.

A multi-stakeholder approach was embraced to gain a comprehensive understanding of the intervention's impact. Through participatory research, qualitative and quantitative data were gathered from various stakeholders, both external and internal. These stakeholders included beneficiaries (women, youth, children, senior citizens, community members, and RCCs volunteer cadre). Contextualised tools were designed for each stakeholder in line with their involvement in the intervention. The primary research activities encompassed:

- Online and on-field surveys and interviews with a sample of beneficiaries (women, youth, children, senior citizens, community members and RCCs volunteer cadre) directly involved in the intervention.
- Online and on-field surveys and interviews with RCC's field-level staff and management team.

Sample selection

A random sample of study participants was selected for this assessment through random stratified sampling²¹. The sample size for the primary participants was determined through a sample size calculator that is based on the:

- Sampling Confidence Level of 95 percent: A percentage that reveals how confident one can be that the population would select an answer within a specific range
- Margin of Error of 5 percent: A percentage that indicates how much one can expect one's survey results to reflect the views of the overall population. The smaller the margin of error, the closer one is to having the exact answer at a given confidence level

21 Random stratified sampling is a sampling method in statistics and research that involves dividing a population into distinct subgroups, or strata, based on certain characteristics or attributes (children, youth, women, senior citizens, community members), and then selecting a random sample from each stratum



Results

Outcomes and Impact

The RCC's envisioned impact, at the core of its vision to enable community development in slum communities, is to empower individuals to realise their full human potential, despite the challenges and constraints they face. Through an activity-centric model, the goal is to create a supportive space that enables individuals to become self-reliant.

RCCs proactively mobilise the community by building strong relationships with community organisations and functionaries, such as Anganwadi workers, teachers, school principals, and other community figures through regular community visits, fostering a strong rapport. The activities are thoughtfully curated with a clear rationale to cater to diverse community groups, aligning them with the envisioned impact. Volunteers play a pivotal role in creating awareness and facilitating outreach within the community. Furthermore, the RCCs encourage talent showcase events, exemplified by initiatives like RCCs 'Pratibimb', which is RF(I)T's Women's Day celebration featuring performances by children, women and senior citizens, guided by professional choreographers. RCC's 'Pratibimb' is also a platform to encourage entrepreneurship and showcase skills learnt through RCCs.

For a comprehensive understanding of the impact, the specific activities and results derived from interviews with each stakeholder group are detailed in the subsequent subsections.

a. Work with Children

In slum communities, a multitude of challenges such as the lack of access to clean water, sanitation systems, poor health, limited quality education, employment opportunities, substance abuse, and a higher risk of crime are prevalent. These challenges are particularly exacerbated for children, who experience a childhood vastly different from the idealised 'universal childhood' often advocated. Interviews with the children in the intervention communities highlighted that their childhood involved lack of access to opportunities to express themselves, playing on rough, uneven grounds with limited access to toys and educational resources.

Working closely with these underserved communities, the RCC intervention has identified the specific challenges faced by the children in their respective localities. Interviews with the Programme Team revealed that parents in these communities are often overwhelmed by their work, household responsibilities, and low income, which leads to the limited attention towards their child's educational and extracurricular learning.

To address these challenges, RCC has implemented the following activities across all its RCCs:



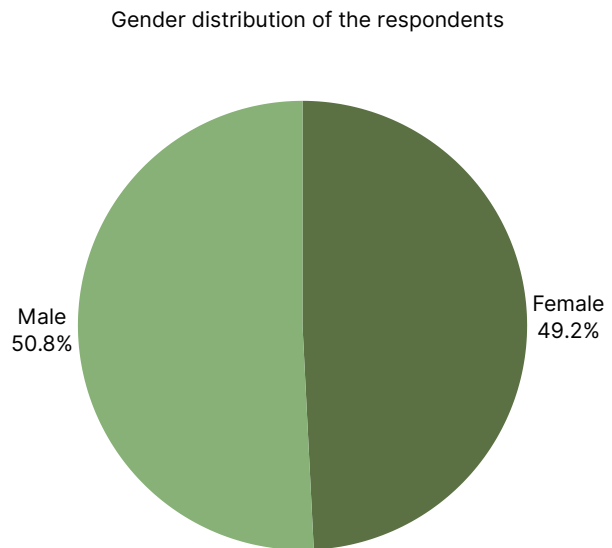
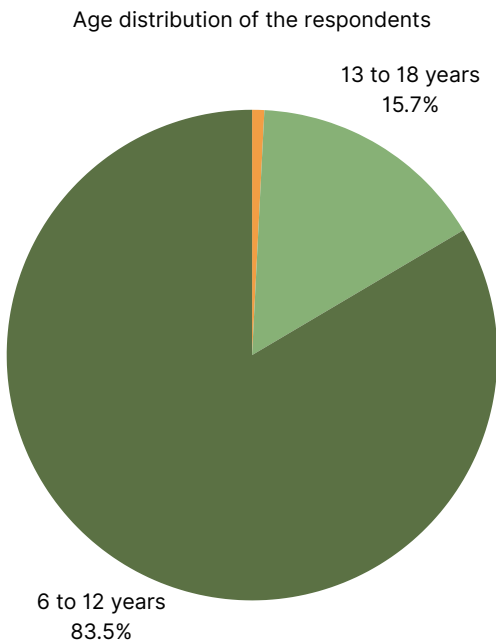
1. **Bal Utsav:** An annual flagship event organised to celebrate Children's Day, consisting of both cultural and co-curricular activities. This event includes games, informative speeches, project and cultural competitions, do-it-yourself activity kits for children as part of the Reaching the Unreached initiative; with the aim of improving their well-being and encouraging self-expression among those who lack access to such opportunities otherwise.
2. **Bal Umang:** Bal Umang focuses on children aged 6 to 12 years and is implemented through centre-based, home-based, and community-based group activities. Activities like projects are also integrated into Bal Utsav. Children are encouraged to explore their interests and are provided a platform to develop their creativity and skill sets. Simultaneously, core life skills like communication, self-awareness, interpersonal relationships, and critical thinking are instilled in them.
3. **Summer camps and festival camps:** During school vacations, RCC conducts camps with a variety of fun activities for children, including drawing workshops, art and craft sessions, self-defence classes, exhibitions, and yoga sessions.
4. **Educational activities:** To enhance children's awareness and confidence, RCCs promote activities such as awareness sessions on gender and disability, yoga sessions, addressing environmental concerns, and organising educational trips to places like the zoo, Nehru Planetarium, and the science museum.
5. **Health check-ups and immunisation camps:** RCC previously conducted health and immunisation camps. However, the RCC now offers its facility as a centre for government-led immunisation and health camps specifically tailored to children's needs.

The results presented in the following section are based on the data collected from the interviewed sample, which is outlined below:

Type of Interview	Sample Planned Across centres	Sample Covered Across centres
Individual	30	41
Focus Group Discussions (FGDs)	60	16 FGDs (85 participants)

Demographic Profile

The survey with 126 children covered a nearly equal number of male and female respondents with a slightly higher percentage of males (50.8 percent) compared to females (49.2 percent). The most significant portion of the surveyed children falls within the age group of 6 to 12 years, constituting a substantial 83.5 percent of the total respondents. Additionally, 15.7 percent of the respondents were older than 12, indicating that RCC activities have extended their reach to older children as well or the children continue to be associated through other activities of the Centre



A significant majority of the respondents, specifically 76.98 percent, had been residing in their respective localities since birth. A majority of the remaining respondents had been residing in their respective communities for an average of 5 years. This group may include children who moved to the community at a relatively early age but not necessarily from birth. A small percentage, 6 percent, of the respondents had only moved to the communities within the past 3 months.



Children's awareness and their participation in RCC activities

All the surveyed children were aware of the various activities organised and conducted by the RCCs for them. They primarily received this information from their parents, friends, and other community members. Interviews with the children revealed that their peers spoke highly of RCC's activities, which motivated them to participate.

For urban, resource-poor children, access to play and recreational opportunities is limited. For many of these children, the limited playtime at school is their only chance for leisure and interaction with peers.²² The RCCs provide a safe space for these children to learn and thrive, not only motivating them to participate but also encouraging them to recommend the same to their peers.

36.51 percent of the children interviewed had actively participated in the Bal Utsav event, held annually, while all of the respondents were aware of the said event. Further, 29.37 percent attended either the summer camp or the festival camp. This shows that these seasonal activities are well-received and attract a considerable number of children, providing them with additional opportunities for learning and recreation during their breaks. RCCs also organise and conduct a range of diverse activities, such as rangoli making, painting, paper art, poetry writing, dancing, computer sessions, aerobics, and events.

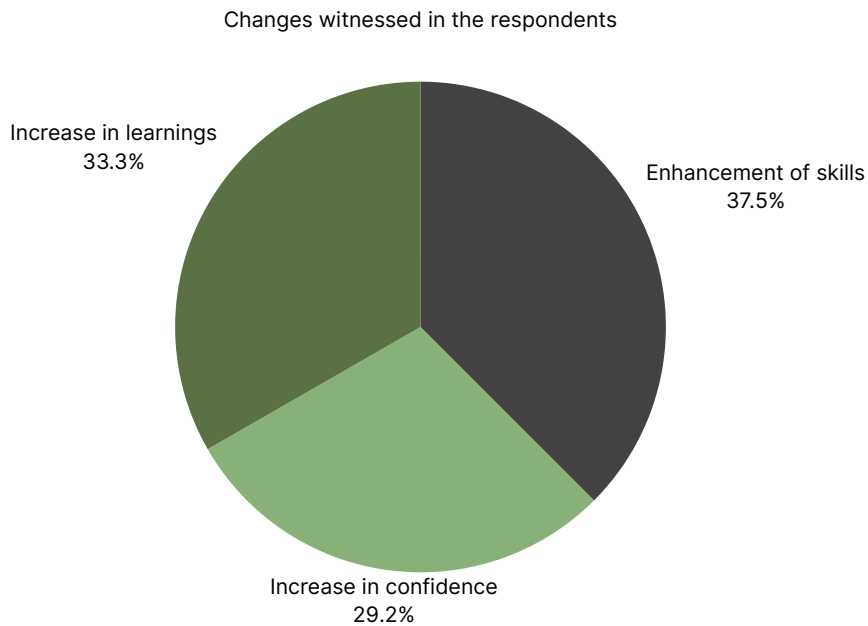
36.51 percent of the children participated in these broad spectrum of activities, which also reflects RCC's commitment to cater to the diverse interests and talents present among the children. Furthermore, 5.56 percent of the respondents reported attending health camps and 4.76 percent in the Bal Utsav competitions. The RCC's have successfully cultivated a nurturing and secure environment for the children. Within this supportive space, they are not only encouraged to express their creativity and explore their individuality but also to pinpoint their unique areas of interest.

Children's learnings from the RCC interventions and activities

All the children surveyed reported finding the activities, programs and events organised and conducted by the RCC extremely beneficial for them and expressed their willingness to stay connected with the RCC for the years to come. Children, therefore, have not only found value in the intervention, but have also formed a strong bond with the RCCs. **An impressive 86.9 percent of respondents mentioned enjoying being a part of the multiple activities, both virtually and in person, underscoring the positive reception.**

A significant 76.19 percent of the respondents reported experiencing some form of positive change as a result of their engagement with the RCCs. The most prominent changes reported were:

- Enhanced Skill Sets:** For 37.5 percent of the children, RCC activities, events and programs provided them with opportunities to explore and develop their skills, hone their interests and creativity. Activities such as drawing, dancing, arts and crafts, writing, and effective communication allowed them to enhance their abilities, which the respondents continue to practice even in their free time. This suggests that RCCs are instrumental in fostering creativity and skill development among the children.
- Increased Confidence:** Notably, 29.2 percent of the children reported an increase in their confidence levels after participating in RCC activities. While 29.2 percent of respondents specifically identified an increase in confidence as a key takeaway, it is important to note that, all respondents in fact reported some degree of increase in their confidence levels after participating in RCC activities. This is a powerful testament to the effectiveness of intervention in bolstering the self-assurance of these children. It's worth emphasising that this boost extends beyond public performance alone. The heightened confidence is also manifested in their newfound independence, as evidenced by their ability to independently set up stalls during exhibitions and assume responsibilities in school. This underscores how RCCs not only empower children to be more self-assured but also enable them to take charge of their actions and responsibilities.
- Enhanced Learning:** About 33.3 percent of the children cited increased learning as a takeaway from RCC activities and events. This learning encompasses digital literacy sessions, reflection group sessions, and participation in events like Bal Utsav. The multifaceted approach to learning provided by RCCs is evidently valuable to the children's overall education.





“Prior to joining RCC, I was extremely shy and hesitant - there was no way I would be able to have this conversation with you earlier! Since I began attending the Bal Umang sessions, I have become a dancer, performing at multiple events, in front of several people. During the Bal Utsav, I even gave a speech on Lokmanya Tilak and received a certificate for it as well. RCC has contributed tremendously in helping me overcome my shyness and gain confidence.”

- Respondent 1, aged 13 years

Making memories and forging friendships

Each child we surveyed held at least one cherished memory intertwined with their participation in activities or programs conducted by the RCC. For some, the pinnacle of their experiences was gracing the stage at Bal Utsav, where their talents were celebrated with prizes. Others found their fondest moments in the camaraderie of camps and exposure visits, where they explored with peers who shared their enthusiasm. **Our conversations with these children revealed a common thread: they reveled in both independent and group activities.** From joining group dance performances to collaboratively crafting project exhibits for various events, RCC’s activities have not only nourished peer learning but also honed their interpersonal communication skills. These shared activities have forged meaningful friendships among the children.

Crucially, given the socio-economic background of the respondents, their opportunities to engage with peers of similar or different ages, learn from them, and participate in group activities are typically limited. However, RCC bridges this gap, providing them with a profound sense of belonging and nurturing long-term networks that extend beyond the bounds of their immediate communities.

Facilitating Health Checkups

The RCCs go beyond educational and recreational activities to address the holistic health needs of the children and the communities it serves. Field observations reveal that the areas surrounding the RCCs often face issues such as congestion, water accumulation, improper garbage disposal, and inadequate ventilation. These unfavourable conditions, combined with challenges in accessing clean water, proper nutrition, and health awareness, contribute to poor child health.

In response to these challenges, RCC has implemented proactive measures, including regular health checkups and immunisation drives for children. The data indicates that 53.97 percent of respondents have undergone routine height, weight, and body checkups at the centre underscores the significance and effectiveness of these initiatives. These checkups play a vital role in monitoring children’s growth and identifying cases of malnutrition or illness, allowing for early intervention and support.



Additionally, the RCCs collaborate with the government to host immunisation and health camps, with a particular focus on children. This partnership with the government underscores the intervention's commitment to addressing health issues in the community and enhancing the well-being of the children it serves.

RCC's role in bridging the gap faced by urban poor children

Over 56.4 percent of the children expressed that without the RCC, they would lack the vital access to extracurricular activities. For the remaining 43.6 percent, despite having some opportunities within the school, they acknowledge that the RCC provides a unique platform. They emphasised that RCC activities stand out due to their diversity and innovation, offering an environment where every individual can explore their interests and engage at their own pace, fostering a deep sense of personalisation and freedom. **This illustrates that RCCs are not merely a substitute but a complement to school-based extracurricular activities.**

Furthermore, respondents noted the extensive support provided by the RCC during the pandemic. The RCC distributed mobile phones to facilitate online classes and RCC sessions. The children also received financial scholarships, nutritional support through ration and immunity kits, and invaluable career guidance and support, demonstrating the holistic nature of RCC's contribution to their development.

Additionally, respondents emphasised that their experiences at the RCC go beyond immediate benefits. These learnings and takeaways contribute significantly to their academic pursuits and involvement in extracurricular activities within their schools. They point out that their participation in RCC activities significantly enhances their readiness for school, honing skills through art and craft activities, as well as opportunities like writing, public speaking, and digital literacy. This not only boosts their academic performance but also fosters holistic personal growth.

"The students enrolled in the school are predominantly residents of slum areas, with the primary occupation of their parents being manual labour. Since a majority of these families are dependent on daily wages, they face financial constraints. To address this challenge, RCC provides school kits with stationery and learning resources such as notebooks and textbooks for the students. Additionally, through its multiple cultural programs, RCC ensures meaningful learning and engagement for the children, providing them with opportunities that would otherwise be inaccessible to them. The impact of RCC's efforts can be reflected through the increase in children's participation in such activities and the reduction in dropouts and absenteeism in school."

- Respondent 2, Senior Teacher, LP Jagdale Vidhyalaya (Anandwadi)

In terms of the children's suggestions, they express a desire for diverse workshops, particularly in the realm of digital literacy, including CorelDraw, animation, and graphic design. They also underline the importance of English communication support due to limited opportunities. Moreover, they highlight the scarcity of open spaces for play and recreation, advocating for the expansion of activities beyond the RCCs. Additionally, they recommend the introduction of sports interventions like kabaddi, football, and cricket to broaden their exposure, providing valuable insights for more enriching and relevant engagement opportunities for these children.

b. Work with Youth

During the crucial formative years, adolescents in slum communities encounter formidable resource limitations that impede their access to career opportunities and personal development spaces. These constraints perpetuate a cycle of poverty, further reinforced by the scarcity of prospects resulting from their low-income backgrounds within these slum communities. This multifaceted challenge not only restricts avenues for career exploration but also engenders a sense of exclusion and isolation, which can lead to mental health challenges and substance misuse among the youth.

The primary goal of RCC's career guidance and career focus sessions, implemented across various locations, is to cultivate a community of responsible and well-informed youth who are attuned to their interests and equipped with the knowledge to make informed choices aligned with their passions. The sessions and programs undertaken by RCCs have provided youth with access to opportunities that foster a sense of responsibility and bolster their self-assurance. In this context, the following programs were designed to cater to the needs of youth members at the RCCs:

1. Skill training: RCCs regularly offer training sessions, akin to those provided for adults, encompassing a range of skills such as digital proficiency, mehendi art, painting, and more. These courses are made available to youth members at a minimal token, contribution promoting accountability and encouraging them to acquire valuable technical skills that enhance their employability.



2. Career guidance: To aid employability and support the youth in the community in identifying their interests, motivations, and career aspirations, RCCs provide individualised career guidance sessions. During these sessions, experts work closely with students to help them refine their interests and goals, facilitating a clearer path to a career that suits them.

3. Scholarship: RCCs actively encourage community youth to pursue further education by providing financial assistance for college fees. Students are motivated to raise awareness within their community, and upon successful completion of their volunteering assignments they are rewarded with scholarships. This initiative is part of RF(I)T’s Utkarsh Youth Development Programme, which focuses on overall development among the youth.

4. Reflect Group: The Reflect Group fosters a platform for youth to articulate their aspirations for the community and proactively engage in activities that help realise these aspirations. While RCCs provide the necessary space, the youth take on leadership roles and are equipped with materials like newspapers to guide them through structured discussions, enhancing their awareness of local issues. This initiative also serves as a robust platform for building peer group connections.

5. Volunteering opportunities: Active youth members participating in RCC activities are encouraged to volunteer their time and services, such as managing sessions, assist the team at events, conducting awareness campaigns, and more, involving all stakeholders. This volunteer opportunity is designed to help them cultivate leadership skills and a sense of community responsibility.

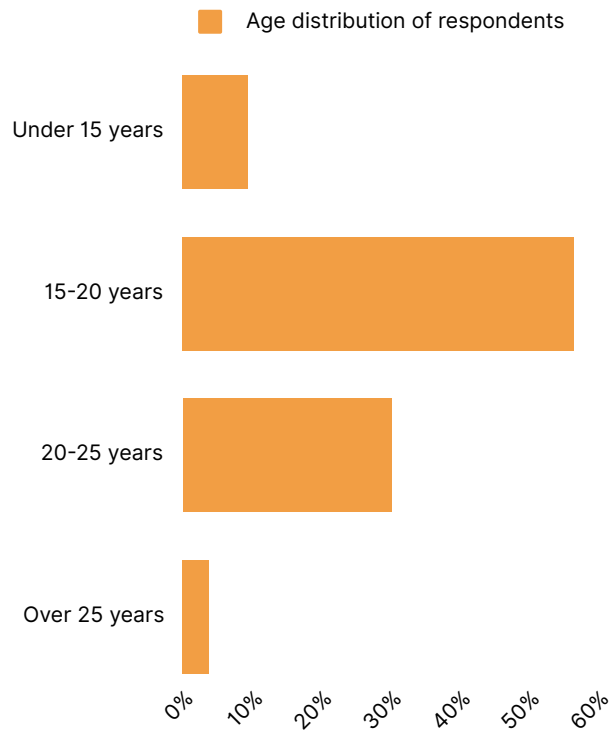
6. Other activities: RCCs also organise enjoyable programs, including summer camps, to engage adolescent girls. These programs facilitate peer learning through games, arts and crafts, competitions, and similar activities, providing a well-rounded learning experience for them.

The results presented in the following section are based on the data collected from the interviewed sample, which is outlined below:

Type of Interview	Sample Planned Across centres	Sample Covered Across centres
Individual	27	35
Focus Group Discussions (FGDs)	13	7 FGDs (27 participants)

Demographic profile

A sample of 62 youth members from various RCCs were a part of this impact assessment. Remarkably, 96.77 percent of the respondents have been long-term residents of their respective localities, either since birth or early childhood, with the remaining individuals having established roots in the area for at least a decade. On average, the surveyed group’s age slightly surpassed 19 years, indicative of the transitional phase from adolescence to young adulthood. These respondents were actively engaged with the centres in multifaceted roles, with several having sought out valuable career guidance and counselling sessions. Moreover, many of the participants had enthusiastically enrolled in skills training programs, encompassing a diverse array of subjects like computers and mehendi artistry, thereby reflecting the centres’ far-reaching impact on their lives.



Access to learning opportunities

During the study it was understood that skill development programs, particularly those centred on computer skills training, found overwhelming popularity among the surveyed respondents, with an impressive 58.06 percent having participated in these courses. These sessions were instrumental in equipping them with fundamental digital literacy, which proved invaluable for their academic pursuits and beyond. Moreover, a select group of participants, specifically women, also engaged in courses such as mehendi application and rangoli making, all of which were lauded for their effective instruction and enjoyable experiences.

Career guidance and counselling sessions proved to be a significant part of the RCC’s offerings for the youth, with an impressive 74 percent of respondents having attended them. These sessions were exceedingly well-received, providing invaluable insights into their potential career paths, interests, and the steps required to reach their aspirations. **Participants noted the personalised attention they received, with experts taking the time to understand their unique talents and passions before offering career recommendations.** Consequently, several respondents made informed decisions about their future, whether opting for traditional streams like commerce and science or venturing into vocational areas such as baking or hotel management. They expressed newfound clarity and confidence in their chosen paths, a testament to the effectiveness of these sessions.



To bolster their initial steps toward promising careers, some respondents were recipients of educational scholarships, which they judiciously used to alleviate financial barriers for secondary and undergraduate education. This support was indispensable, especially for students facing significant financial constraints, where their parents' limited resources made pursuing quality education a challenging endeavour. **Students who received the scholarships stated that they would not have been able to pursue education of a similar quality in its absence.**

Reflect Groups and Summer Camps

In addition to these structured courses and career-focused training, 24.19 percent of respondents had participated in Reflect Group sessions. These sessions encourage participants to engage in constructive discussions, enabling them to better understand and address prevalent community issues. They also receive guidance and resources to approach relevant authorities for problem-solving, such as municipal council members or government departments.

Adolescent girls shared their positive experiences of attending summer camps, where they immersed themselves in an enriching blend of group and individual projects, spanning creative arts, yoga, physical activities, and self-defence training. These 10-day camps foster camaraderie and support overall personal growth.

One of the most significant impacts of RCC's presence in the community was evident in the reduction of substance abuse among youth, a problem that previously plagued the Pathanwadi area in Malad East. The provision of engaging activities, courses, career counselling, and counselling sessions played a pivotal role in steering youth toward promising career paths and away from substance misuse.

"There was a huge substance abuse issue amongst the youth around Pathanwadi area in Malad East earlier. Since RCC had been within the community and engaging the children and youth to their activities, courses, career focus sessions, counselling, over a period the youth have moved towards a career path and there has been a reduction of substance abuse witnessed among the youth in the community. We now see them engaged in the activities with great interest and enthusiasm."

- Respondent 3, Youth, CLP programme

Personality Development and Volunteering

As part of its broader focus on youth development, RCCs also organises personality development activities aimed at enhancing communication skills. Participants attested to the value of these sessions in learning effective communication, leaving positive impressions during interviews, exhibiting good etiquette when dealing with strangers, and more.



Another manner in which respondents got involved with activities was by enrolling as volunteers. Five of the participants have been engaged as volunteers for at least the last 6 months. Inspired by the work that they saw being carried out, they decided to join the team to help out. They work with the staff present at the centre in supervising all activities, assisting them with functions to the extent of their abilities.

Confidence, Communication, and Community

The cumulative effect of these sessions, activities, and volunteering has been transformative for the respondents, boosting their confidence and communication abilities significantly. These experiences nurtured robust communication skills, honed teamwork abilities, and improved coordination with peers. One interviewee remarked that this has helped hugely in talking to elders around them, as they are able to communicate better and be more respectful. Gaining more hard skills has been useful as well, and has helped the respondents carry themselves in their schools and colleges with more confidence, and a clear vision of what they want to achieve.

“My daughter is a youth volunteer. Looking back on her journey, from enrolling at RCC as a youth partaking in short-term courses to becoming a youth volunteer and leading others; I have witnessed tremendous growth in her. She has become more confident, has developed leadership skills and aspires to support and empower her community.”

- Respondent 4, Parent; RCC beneficiary for the past 10 years

Moreover, their newfound skills empowered them to engage in their communities more deeply. Volunteers displayed a keen sense of purpose and drive to facilitate tangible change. The sense of community among regular participants grew stronger, fostering lasting connections and a shared commitment to community improvement. **The RCCs became spaces where domestic challenges could be set aside to focus on learning alongside like-minded peers from similar backgrounds.**

Overall, respondents overwhelmingly praised the RCCs, emphasising the need for expanded offerings, including support for additional trades and communicative English. They expressed their desire to see more centres open across different communities to amplify the positive impact of the RCC’s work. Their positivity and aspirations underscore the enduring significance of RCC’s efforts in empowering youth and promoting personal growth.

c. Work with Women

Urbanisation brings both opportunities and challenges, and its impact is particularly pronounced for women. Gendered expectations often place women in multifaceted roles, extending from managing their households to serving their communities, all while playing vital roles in income generation.²³ Recognising these complex roles and responsibilities, RCC actively engages with communities to identify and address the unique needs of women and children.

23 Gender Discrimination: Women’s Rights and Lives in Slums. (2018). Habitat for Humanity.



RCC's mission to empower underserved communities led to a focus on the pivotal role of women at both the household and community levels.

Amidst the bustling urban landscapes, the RCCs which act as dedicated spaces for learning and personal growth, offer women and children the opportunity to shape their own environments. These centres provide safe havens for addressing their developmental needs, with a primary focus on capacity-building and health improvements for women and children.

The following section delves into RCC's activities and initiatives for women, which address diverse needs, empower women to lead healthier and more fulfilling lives, and create positive change within their communities.

Capacity Development Initiatives

1. **Skill development:** RCC offers short- as well as long-term vocational courses in areas such as mehendi artistry, cooking, baking, beautician courses, and digital literacy, jewelry making, rangoli, etc. to enhance the skill sets of women. These courses not only imparted technical knowledge but also equip women with market-aligned skills, including pricing, presentation skills, and marketing. Following the training, participants are provided with platforms to showcase their newfound skills at exhibitions and annual events while facilitating networking opportunities. A nominal fee contribution is charged taken to create a sense of accountability among participants while ensuring affordability.
2. **Debate Forum:** RCC organises a monthly open forum debate forum to encourage women's active participation, allowing them to share their perspectives and express their concerns on a wide range of socio-political and environmental topics.
3. **Monthly Open Forum:** External resources, in collaboration with RCCs, share crucial information related to constitutional rights, such as obtaining ration cards, registering complaints with the BMC, government schemes, nutritional support, and subsidies. This creates awareness and helps women and their families benefit from available government support.



4. Project Udyamita: This project, launched during the pandemic, focuses on promoting women's entrepreneurship during challenging times, emphasising practical products over non-utilitarian artistic ones. The project also included a rapid assessment of community toilets, addressing the challenge of home-based quarantine without attached toilets. This initiative evolved into a continuing community sanitation and hygiene effort.

Health Programmes

1. Health camps, checkups and tracking: RCC addresses the issues of healthcare accessibility and affordability by conducting various health camps and check-ups throughout the year.

These initiatives covered routine checkups, screening for non-communicable diseases like cancer, anemia, bone density, kidney status and awareness sessions on female reproductive health and hygiene. RCC ensures that women can access screenings like sonography, mammography, and CT scans, making treatment, medicines, and diagnostics available to those facing financial constraints. The results of health camps are followed up by a consultation with doctors.

2. Health awareness: RCC promotes health awareness through a range of outreach and community-based initiatives, such as street plays followed by community walks, community desks, and health exhibitions. Specific health camp themes are pivotal in disseminating health awareness throughout the community.

3. Activities for health and self-expression: Aerobic and yoga sessions provide platforms for promoting health and self-expression among women. These sessions not only encourage physical well-being but also bridge the gap between mental and physical health, making it a valuable addition to the health intervention.

4. Counselling sessions: Consistent with research²⁴ - some combination of domestic abuse, financial crisis, healthcare challenges, and family responsibilities were found to be the causes of deteriorating mental health among women – and they had no avenues to express themselves and their difficulties, or to access professional help. RCC recognises the importance of mental health and created a confidential space for women to address mental health challenges. Trained paraprofessionals offer support, fostering a mindset to understand the underlying reasons for behaviour, develop coping mechanisms, and access professional help when necessary.

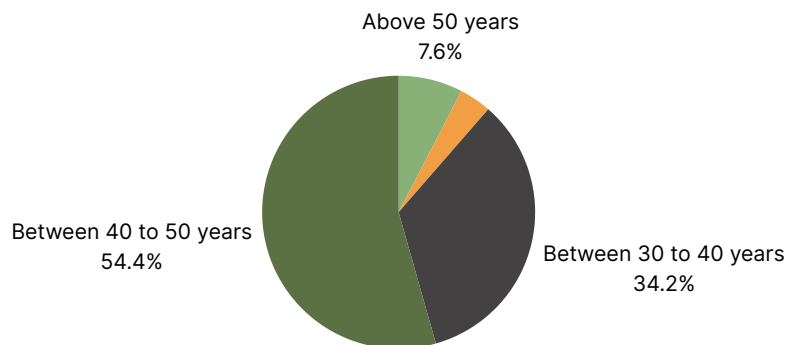


The results presented in the following section are based on the data collected from the interviewed sample, which is outlined below:

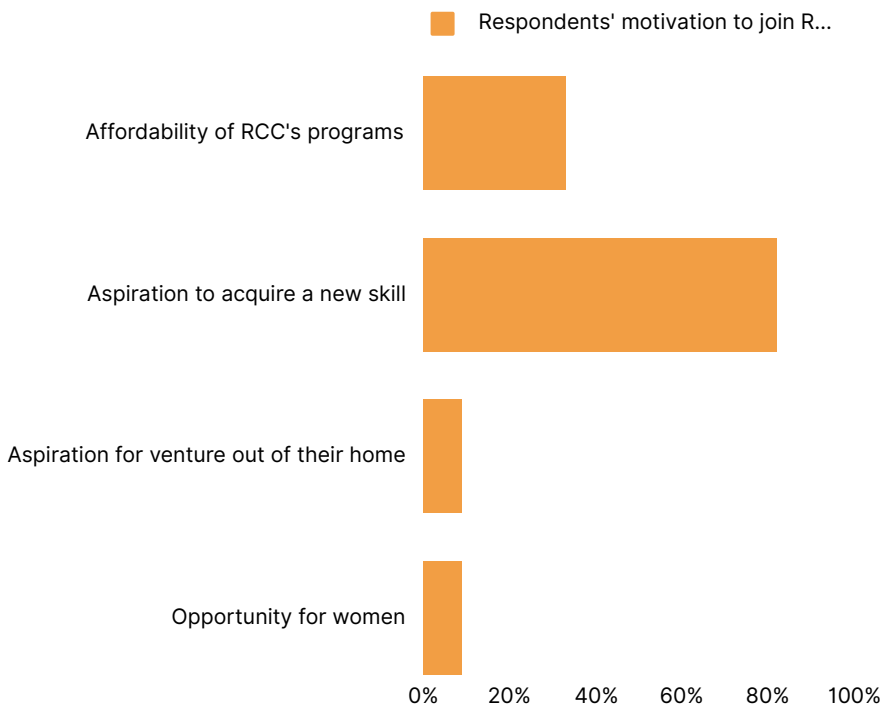
Type of Interview	Sample Planned Across centres	Sample Covered Across centres
Individual	48	57
Focus Group Discussions (FGDs)	92	19 FGDs (107 participants)

Demographic profile

The survey encompassed 156 women, with the most prominent age group being between 40 and 50 years, making up 54.4 percent of the respondents. The second-largest age group fell in the range of 30 to 40 years, constituting 34.2 percent of those surveyed. It's noteworthy that a substantial majority of these women had been residents near their respective RCCs for an average of 24 years.



Age distribution of the respondents



Women’s motivation to engage with RCC

Based on interviews conducted, a remarkable 82 percent of the women revealed their strong inclination toward acquiring new skills as the foremost motivation for their engagement with RCC. Notably, 33 percent of the respondents highlighted the affordability of the courses as a key factor motivating their pursuit of new skills.

An additional 9 percent of the participants stressed the potential for community engagement and personal growth as compelling reasons, with an equal 9 percent expressing their desire to explore opportunities beyond their homes. **This suggests that they see RCC as a platform not only for individual development but also for fostering connections within their community and for personal empowerment.**

During interviews, the women candidly discussed their experiences of feeling marginalised and confined within their respective communities. **A significant proportion of the respondents conveyed a sense of isolation within their neighbourhoods, and the presence of RCC emerged as a catalyst, encouraging them to venture outside their homes and actively participate in various activities.**

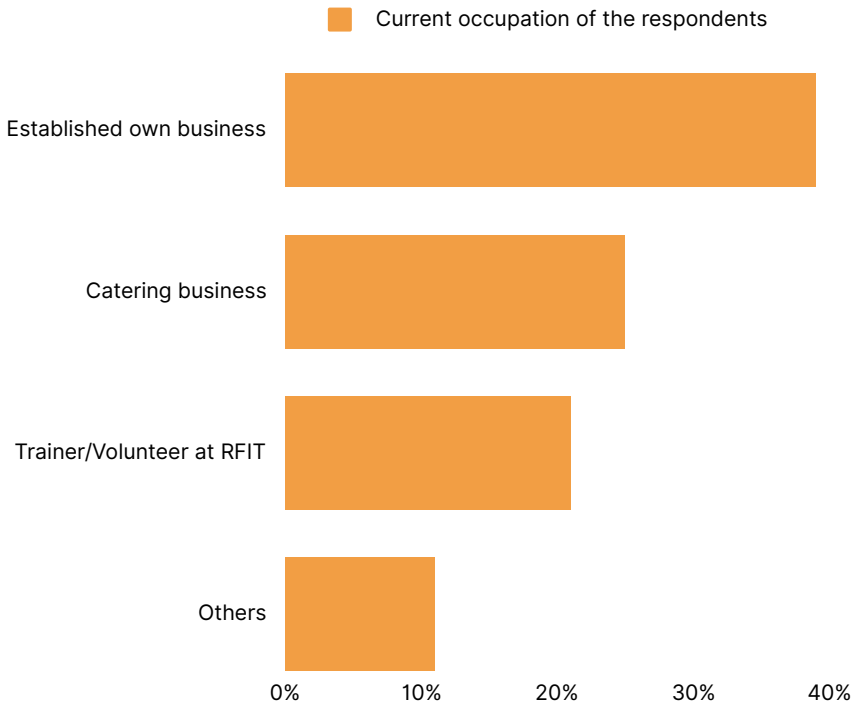
All the women underlined the transformative impact of RCC, offering them the chance to break free from the confines of their households and explore their interests. RCC has provided them with opportunities to acquire new skills, broaden their horizons, access avenues for self-employment and income generation, and gain valuable insights into health, public information, and career prospects.

Subsequent to enrolling in RCC programs, various motivating factors ensured their sustained engagement with the centres, including the enhancement of their skill sets through short-term and long-term courses, a boost in their independence, and the affordability of the programs.

Skills acquired at the RCCs

The skill courses offered by RCC are comprehensive, covering approximately 40 diverse training modules tailored to the specific needs and interests of the community. This diverse range includes courses like mehendi art, beautician training, Warli painting, baking and chocolate making, bridal makeup, embroidery, jewellery designing, and phenyl making. **This breadth of offerings reflects RCC’s commitment to addressing various interests and fostering skill development.**

Among the respondents, notable percentages have successfully completed these programs, demonstrating the value of these courses. 44 percent completed the beautician course, while 42 percent acquired skills in baking and cooking, and 35 percent pursued the mehendi course. It's worth highlighting that other courses, such as computer literacy, rangoli, warli painting, and flower making, have also attracted interest.



The success of these programs is evident in how they have equipped women with entrepreneurial skills and the ability to establish businesses. Many women have initiated their own beauty parlours, catering services, and training initiatives, serving as trainers themselves and sharing their acquired skills in computer literacy, yoga, beautician techniques, and bridal makeup with their students. Moreover, many have taken on catering orders for cooking, baking, and chocolate making, setting up food stalls at community events, exhibitions, and even taking orders from their own homes.

This not only adds to their family incomes but also showcases their impressive entrepreneurial spirit. Additionally, a number of women have engaged with RCC as volunteers, contributing to community awareness initiatives and participating in events and sessions organised by RCC.

Aspirations of the women post intervention



The women who have harnessed their skills through RCC’s programs have expressed a strong desire for growth and advancement. A remarkable 58 percent of them aspire to expand their services and reach a larger client base, while 35 percent aim to transition from home-based services to establishing their own parlours or food enterprises within the community. This drive underscores their determination to improve their financial well-being and professional standing. **These women have exhibited remarkable determination by stepping out of their comfort zones to acquire income-generating skills and earn a reasonable income to support their families and drive their endeavours to the next level.**

Additionally, these women emphasise the importance of education for their children. They encourage their children to partake in courses offered by their respective RCC and are even open to allowing their children to pursue education in distant locations for the promise of meaningful employment. **This forward-thinking mindset reflects their commitment to breaking barriers and creating better opportunities for themselves and their families. It underscores the intergenerational impact of RCC’s programmes, which extend beyond individual empowerment to future generations.**

Access to Health Care

The participation in health camps and teleclinics has yielded significant benefits. 49 percent of the women noted that the health camps increased their health awareness, enabling them to identify symptoms and treatment measures for various illnesses.

This has been instrumental in promoting health-seeking behaviour among the community members, fostering early diagnosis and intervention. Moreover, 26 percent of the women cited the affordability of these health camps as a key factor in accessing essential healthcare services. The minimal cost ensures that a larger segment of the community can benefit from these crucial initiatives.

■ Respondents' perspectives on the contribution of the health interventions



Additionally, 13 percent started prioritizing their health post the interventions, followed by 8 percent who said that the camps were a positive experience. 4 percent acknowledged the expertise of the medical professionals involved in the health camps, further instilling confidence in the community in seeking medical assistance and receiving quality care.

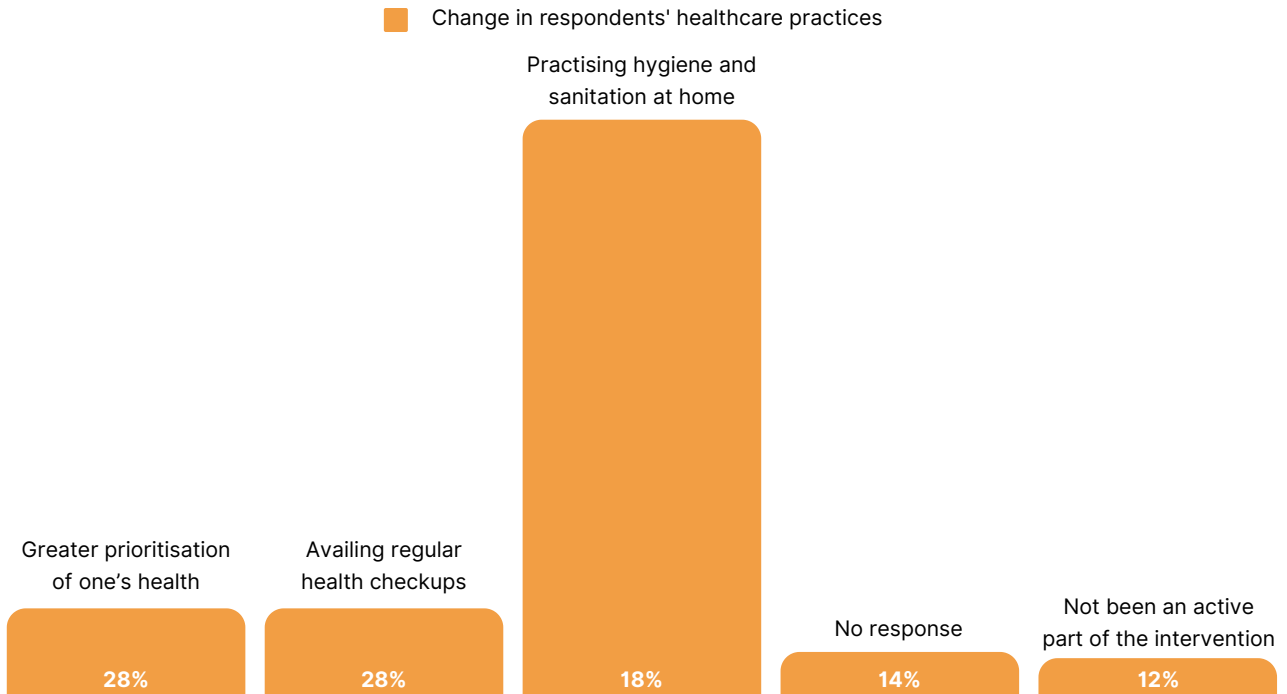
“We have been partnering with RCC for the past 10 years, assisting in the execution of cancer detection camps. The objective is to ensure access to knowledge, health checkups, awareness, detection and rehabilitation for the community members. From conducting annual check ups and follow-ups to conducting screening for specific diseases such as cancer, we have witnessed a drastic change in the community’s health care practices. There has been a reduction in the usage of tobacco and an increasing awareness in the community’s prioritisation of their health and well- being.”

- Respondent 5, Cancer Patients Aid Association

During the challenging period of the COVID-19 pandemic, where access to medical care became increasingly difficult, RCC recognised the pressing need for teleconsultation services. Through health consultation teleclinics (HCTC), community members were able to receive timely advice and guidance regarding their health status, medical reports, and medication, effectively ensuring the well-being of the community.

Behaviour Change Through Health Initiatives

As a result of RCC’s health initiatives, the community has witnessed positive behavioural changes. A substantial 28 percent of community members have embraced healthier lifestyles, including regular exercise, balanced diets, and increased water intake. Additionally, they have adopted better hygiene practices during their menstrual cycles.



As a result of engaging in physical activities such as aerobics and yoga, some women have reported positive health outcomes, including the alleviation of sinus issues, weight reduction, and improved digestion. Furthermore, a few women have taken the initiative to train other women from the community, thereby spreading awareness and empowering their peers to embrace self-care practices.

Furthermore, 28 percent have become regular participants in health camps and doctor visits at RCC for their health concerns. Another 18 percent have adopted sanitation practices at home, prioritising cleanliness in their surroundings. **This shift in behaviour is a testament to the effectiveness of RCC’s health promotion initiatives.**

RCC’s health camps have played a pivotal role in raising awareness about various health issues. These camps have led to the timely diagnosis and treatment of conditions such as calcium and vitamin deficiencies, kidney stones, and menstrual problems. Their minimal cost ensures that deserving individuals within the community can access the check-up opportunities. Moreover, **conducting these camps within the community, specifically among women, creates a safe and comfortable environment that promotes their active participation.**

Support for Women’s Mental Health

In addition to physical health, the RCCs demonstrate a strong commitment to addressing mental health. A comprehensive approach to counselling is offered, covering a range of issues, including parenting concerns, educational challenges, domestic violence, and emotional well-being. **13 percent have sought counselling specifically for parenting-related issues**, 8 percent have received counselling to manage educational and exam-related challenges, 3 percent have sought assistance for domestic violence concerns, and 4 percent have sought guidance on managing depression, anger, and navigating difficult life situations.^{25, 26} To enable a confidential and safe environment for the community to address these concerns, RCC’s trained volunteers encourage people to seek counselling on the designated days at RCCs. The impact of this is illustrated through **women who have actively reached out for counselling support on a range of issues such as parental concerns, domestic violence, anger management, and depression**. They have also prioritised their health and adopted a new perspective on life. Moreover, they have developed effective problem-solving skills, actively engaging in various activities and overcoming emotional weaknesses. Additionally, **they have conquered the fear of venturing outside their homes, communicating with others confidently, and even opening their own bank accounts, marking a significant step towards financial independence**.

Respondents' perspectives on the significance of counselling



This comprehensive approach to counselling reflects RCC’s dedication to supporting the community’s mental health.

25 Refers to 'Others' in the Graph

26 The recorded figures pertaining to counselling through the RCCs solely represent women who have participated in counseling sessions.

Significance of the Interventions

The significance of the support of RCC has been illustrated by the respondents’ **as 49 percent stated that in the absence of these interventions, they would not have gained any exposure to the outside world or acquired employable skills or generated an income.** Additionally, without the health interventions by RCC, women would not have been proactive about the improvement of their health.

“During the COVID-19, my husband passed away and it was a traumatic period of my life as I was unaware of the future. A volunteer from RCC shared about the various programs and I enrolled for the Udyamita program and learnt how to make cleaning materials such as phenyl, floor cleaners, toilet cleaners and bleach for various purposes. Thereafter I started marketing the cleaning products within the community and my confidence increased to reach out to more clients beyond the community. Today, I am able to earn an income and take care of my family needs. I aspire to expand my business to Corporate companies.”

- Respondent 6, 38 years old

“After my marriage, I was supporting my husband in his garment business but I always had a desire to achieve something on my own. As I became aware of RCC programs within the community I participated in a few activities and I decided to accomplish something on my own. Over a period of time, I joined as a volunteer for coordination of activities and to create awareness within the community thus increasing my confidence and communication. Recently I received a Mahila Puraskar award for my contribution within the community. This has been a delightful experience thus making my family proud and earning respect among the community. Today I have established my own identity and people know me for the work I am doing within the community.”

- Respondent 7, 45 years old

“I had always been a creative person and pursued fashion designing after school, but due to circumstances I could not pursue the fashion designing career. I was introduced to RCC beautician training, I immediately enrolled because of my keen interest and affordability. After completion of the program I became confident to provide beauty services to clients, gradually I started growing and started taking Bridal Make up orders too. Later on, RCC approached me to support the Centre as a resource person and training many ambitious women. Today I am an independent professional and a Trainer enjoying my work to the fullest.”

- Trainer, 47 years old



d. Work with Senior Citizens

Healthcare becomes an essential need for individuals, especially those aged 60 years and above. As people reach the age of 60 or 65, they often experience a significant decline in mobility, which disproportionately affects women due to changes in their bodies, leading to an increased reliance on external support.²⁷

Research on the needs of the elderly community in India reveals that they face difficulties in accessing government-provided schemes due to various reasons, including poverty and inadequate services for the elderly.²⁸ Moreover, alongside physical health concerns, there is a growing concern about the prevalence of depression among the elderly. Studies have shown a notable increase in mental health issues within this demographic in recent years.²⁹

A study³⁰ conducted in the slums of Mumbai highlighted the challenges faced by the elderly, including isolation, neglect, and a lack of open spaces for recreational activities. These challenges underscore the multifaceted needs of the elderly in India, all of which are addressed through various interventions by Rangoonwala Community Centers (RCCs)

RCCs take a unique approach to elder care by promoting the well-being of the elderly community and encouraging their active participation in personal decision-making and recreational activities while offering a robust support network. This approach goes beyond addressing health needs; it incorporates elements of enjoyment and fun, creating an engaging experience for the elderly. The activities designed specifically for senior citizens are comprehensive, addressing the diverse needs of senior citizens and emphasising their well-being, social engagement, and overall quality of life, including:

27 Sharma, Ritu, and Marwah, Ekta Bhambri. "Rising Demand for Community Based Long-term Care Services for Senior Citizens in India." *Indian Journal of Gerontology*, vol. 31, no. 4, 2017, pp. 519-528. University of Delhi, (New Delhi).

28 Ibid.

29 Ibid.

30 Sudhakar, Rohini Kashikar. "Life of Aged Residing in the Urban Slum Areas of Mumbai." *Quarterly Publication of the RCUES of ALLSG, Mumbai*, vol. 8, no. 1, 2015.



1. **Monthly meetings:** RCCs organise regular monthly meetings for members across centres, providing senior citizens with a platform to share their experiences, concerns, ideas, and celebrate birthdays together. These meetings foster social connections, build a sense of community, and address any specific issues faced by senior citizens.
2. **Exposure visits:** Periodic picnics or outings are planned specifically for senior citizens, encouraging recreational activities and offering opportunities for relaxation, enjoyment, and socialising with peers. These outings promote mental well-being and provide a break from the monotony of daily routines.³¹
3. **Social awareness:** RCCs conduct campaigns and workshops that focus on the rights, needs, and challenges faced by senior citizens in informal settlements. These initiatives educate the community about issues such as elder abuse, healthcare access, and government support schemes. An example of this are the “Satark Patients Rights” sessions, which focus on entitlements and Rights of Citizens as patients. Senior Citizens have used the information to access health services.
4. **Health camps:** In addition to health check-ups organised for women in the community, RCCs also cater to senior citizens. These health camps provide essential services like medical check-ups, bone density assessments, full-body check-ups, and health education sessions.
5. **Aashayein Club:** This weekly gathering, named the “Aashayein Club” by the seniors themselves, focuses on themes such as anger management, promoting good health, and cultivating positive thoughts to enhance the overall well-being and health of elderly individuals. These sessions complement the health check-ups in the community.

The results presented in the following section are based on the data collected from the interviewed sample, which is outlined below:

Demographic Details

A total of 47 senior citizens, all women, participated in the study, with 33 of them engaged in Focus Group Discussions. Of these respondents, 72.34 percent fell in the age bracket of 60 to 70 years, while 8.51 percent were nearing 60 years, and 19.15 percent were above the age of 70.

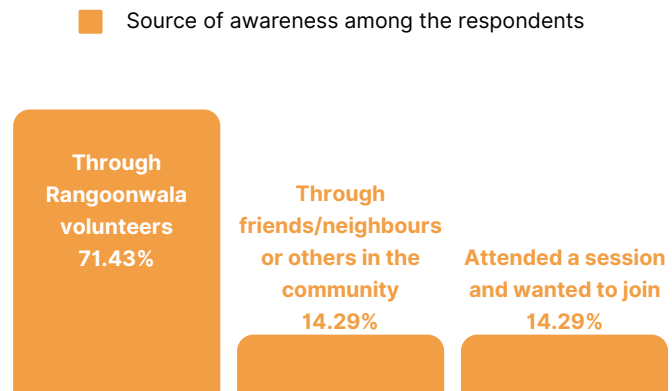
Type of Interview	Sample Planned Across centres	Sample Covered Across centres
Individual	12	14
Focus Group Discussions (FGDs)	24	7 FGDs (33 participants)

31 Team, T. U. (2021, October 22). Importance of recreational activities for seniors. Unmukt - The Senior Hub. <https://unmukt.in/blog/importance-of-recreational-activities-for-seniors/>

The vast majority (71.43 percent) learned about the RCCs and their activities directly from the RCC team and volunteers, while 14.29 percent were informed by friends or attended a session that piqued their interest.

Enhanced Well-Being

Concerning the well-being of the participants, all respondents attested that the sessions took place regularly.



Notably, 47.62 percent cited the friendships they forged during these sessions as their primary motivation for continued participation, underscoring the significance of a sense of belonging in the intervention’s effectiveness for senior citizens.

Health-related interventions emerged as a significant contributor to their well-being, such as being mindful of their diets and incorporating yoga into their daily routine.

A considerable 52.38 percent reported making positive changes in their lives since attending health sessions and yoga activities, and 28.57 percent of the participants highlighted the positive impact of learning yoga on their physical and mental well-being.

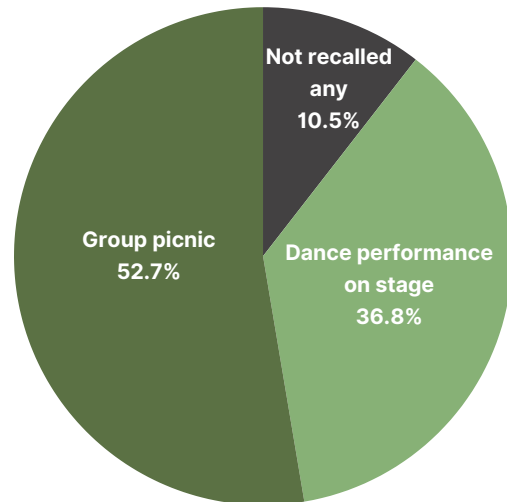
The most recalled activities included kidney check-ups, full body assessments, bone density checks, and cancer screenings. Encouragingly, 33.33 percent of respondents felt that these sessions helped them manage their health issues, reducing the challenges they faced.

Finding Joy: Recreational Interventions

Activities, such as yoga, dance, birthday celebrations, health check-ups, English classes, information about senior citizen schemes, medical support, picnics, and “Pratibimb” (an event where they can showcase and sell items they've made), have contributed significantly to their lives. Dance activities and the chance to put on makeup during celebrations have brought joy and new experiences to the daily lives of these women, thus enhancing their overall well-being.

Notably, 52.63 percent of the respondents most vividly remembered group picnics, while 36.84 percent highlighted dance performances as their most cherished activities. These two activities stood out as contributing significantly to an increase in the participants' confidence.

Most Memorable Activities Recalled



Sense of Belongingness

A strong sense of belongingness was fostered through these activities. Over a quarter (28.57 percent) of respondents expressed that they would have felt bored and restricted at home due to reduced mobility, given their age. The interventions addressed these feelings of boredom, persistent health issues, and low confidence by providing them with friends, daily health check-ups, and a sense of self-worth, ultimately boosting their confidence levels.

One senior citizen shared her experience, illustrating the transformative impact of the activities on her life, emphasising the newfound activity, knowledge acquisition, teaching opportunities, and delightful trips, all of which have enriched her life and relationships.

“I’ve experienced a significant transformation in my life. Previously, I used to be reserved, staying at home to take care of my grandchildren. However, since coming here, I’ve become remarkably active, engaging in various activities, acquiring valuable knowledge, teaching others, and enjoying delightful trips. The people I’ve met have not only become my closest companions but also my dearest friends.”

- Senior citizen, Age 70

Without the support of RCCs, the respondents believed they would have been confined to their homes, lacking a sense of community and relevant information. They also credited the activities conducted for helping them learn yoga and gain confidence. Impressively, **90.48 percent of the respondents were eager to recommend these activities to others, actively striving to introduce more friends to the sessions due to their belief in the benefits they bring to senior citizens.**

e. *Work with Groups*

RCC’s group interventions have been designed to build capacities and enhance the skills of specific target groups through tailored initiatives. Additionally, RCCs excel in addressing the unique challenges faced by community members, offering specialised activities and initiatives to cater to their distinct needs. For instance, they provide dedicated support to tuberculosis patients, recognising the specific requirements of this group.

In addition to skill development, RCCs are actively involved in community outreach efforts, serving as a vital bridge to connect with the broader community. To accomplish this, RCCs have established a structured volunteer system, comprising various levels such as volunteers, Spearheads, and Sahayaks.

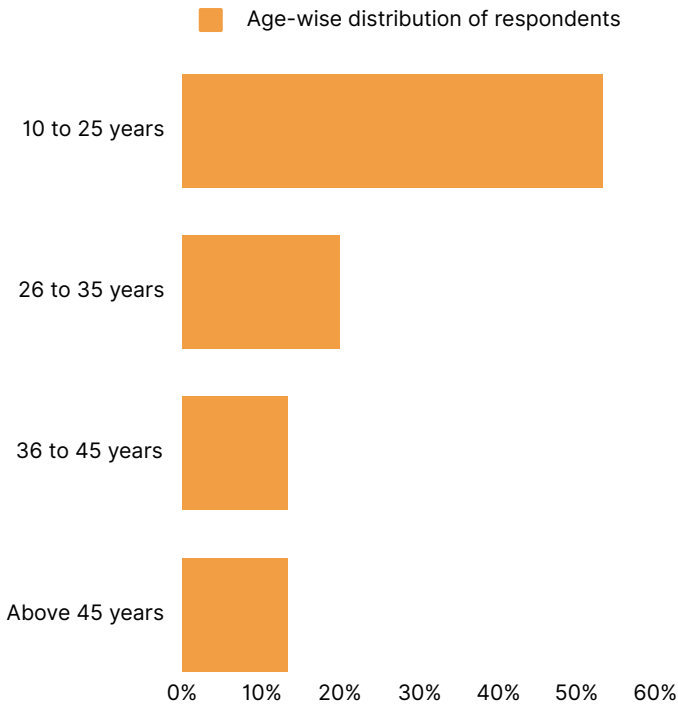
The following programs and activities are conducted by RCC:

1. **Computer Literacy Program:** This program acknowledges the growing significance of digital literacy and computer skills in today’s world. It equips individuals with essential computer knowledge, including proficiency in Word, Excel, and advanced courses like Tally. These programs empower participants to enhance their employability, explore educational opportunities, and improve their overall socio-economic prospects.
2. **Tuberculosis (TB) support:** RCCs offer comprehensive assistance to TB patients, which includes providing psychological counselling, ensuring ration support, and connecting them with relevant medical professionals.
3. **Community outreach:** RCCs maintain a strong presence in the community through regular engagement. This proactive approach enables RCCs to understand the needs of community members and provide them with support and resources as required. This engagement includes the dissemination of information, organising awareness campaigns, and facilitating access to various services. These efforts strengthen the bond between RCC and the communities it serves, fostering a sense of unity and mutual support.

The results presented in the following section are based on the data collected from the interviewed sample, which is outlined below:

Stakeholder	Type of Interview	Sample Planned Across centres	Sample Covered Across centres
Computer Learning Program (CLP)	FGD	18	4(16 participants)
	Individual	6	9
Tuberculosis patients	FGD	12	5 FGD(14 participants)
	Individual	6	7

Stakeholder	Type of Interview	Sample Planned Across centres	Sample Covered Across centres
Community Outreach	Individual	-	1



Computer Literacy Program (CLP)

Among the respondents that were interviewed, it was found that 53.3 percent of the interviewed respondents were aged between 10 to 25 years, with 20 percent falling between the ages of 26 and 35, and 13.3 percent between 36 to 45 years, while those above 45 years constituted the remaining percentage.

Many respondents vividly recalled acquiring valuable skills during their time at their respective RCC. They frequently mentioned the significance of Tally, a vital software for accounting and financial management.

Moreover, respondents highlighted their proficiency in Microsoft Excel, a powerful spreadsheet application, as a significant skill obtained. Additionally, they mentioned their newfound competence in Microsoft Word, enabling them to create and edit documents effectively. These basic computer skills empowered respondents to navigate technology confidently and actively participate in the digital world.

Remarkably, 55.5 percent of the respondents leveraged these skills at their schools and jobs, underlining the practicality of the courses.

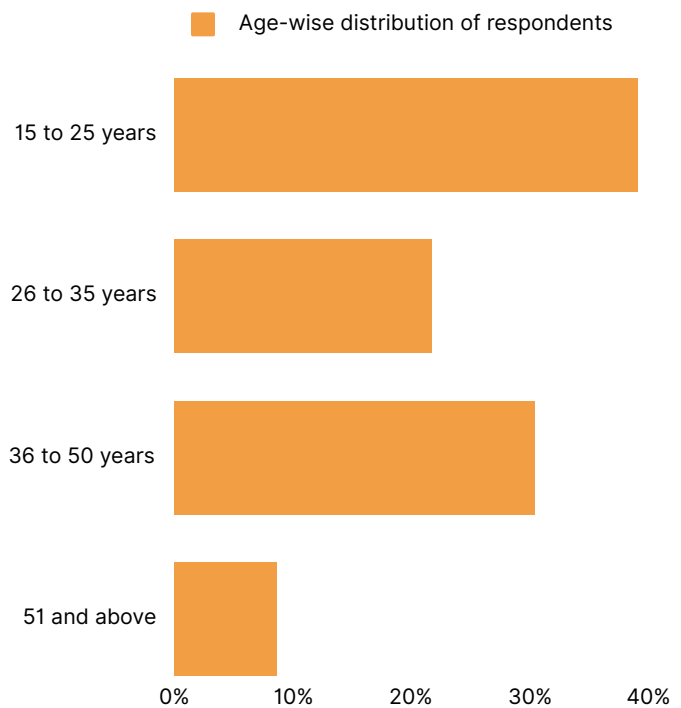
Furthermore, 44.4 percent expressed their confidence in these newfound skills, believing that the program gave them a competitive edge. Notably, 22.2 percent specifically mentioned that their families noticed positive changes in their mindset due to these acquired skills.

“I joined RCC as a Computer Literacy Program (CLP) candidate and progressed to take on the role of a CLP trainer. I teach the students the basics of operating a computer, using applications such as excel, desktop publishing and tally. The students who enrol in the program belong to different age groups such as children, youth, women and senior citizens. While every student is different, we have curated a computer course syllabus that caters to the needs of all the students. Some of the students have gone on to secure employment in the accounts and administration department of various organisations. In my opinion, in addition to the syllabus, the affordability factor is the main reason for such high enrolments in the course.”

- Trainer, Computer Literacy Program

Tuberculosis (TB) Patients’ Support

Among the respondents that were interviewed, 39.13 percent were between the age group of 15 to 25 years followed by 30.43 percent who were between the ages of 36 to 50 years, and 21.7 percent were between the ages of 26 and 35. Meanwhile, a minority of 8.7 percent of the respondents were above 51 years of age.



The interviewees highlighted RCC's extensive support for TB patients, which includes essential assistance such as ration support, covering treatment expenses, and facilitating doctor consultations.

In addition, RCC offers invaluable counselling services that contribute to the overall support system, addressing the psychological and emotional well-being of the community members.

Furthermore, RCC's function as an advocacy group within the framework of the Government's National Tuberculosis Elimination Program (NTEP), aiming to ensure that patients receive the necessary medications.



“When I was in a critical condition with low chances of survival, I underwent treatment at JJ Hospital. It was a challenging time for me, but with determination and the support of RCC, I managed to overcome the odds and survive. RCC stood by me throughout my journey, providing the necessary support and assistance I needed.”

- Tuberculosis Support Respondent

The intervention by RCC has resulted in a noticeable increase in weight of all the respondents, indicating improvements in their overall health and better management of TB.

“Every year, RCC conducts a session on World TB Day, to impart awareness and knowledge pertaining to tuberculosis, its symptoms, early signs of detection and the measures to be taken post-detection to combat the illness. For the TB patients, not only does RCC provide nutritional support in the form of protein-rich ration, but also provides counselling to the patients and their caregivers to provide them with moral support and motivate them in their fight against the illness.”

• District TB Officer (Goregaon)

Community Outreach: Insights from the respondent interviewed

“During my journey with Rangoonwala Community Centre (RCC), I have successfully completed three courses. RCC goes beyond just conducting classes; they provide a tremendous amount of motivation to pursue these courses. In the beginning, I faced challenges in obtaining permission to attend the classes, but thanks to RCC’s strong community connection, I was able to proceed.”

- Community Outreach Beneficiary

f. COVID-19 Needs Response

Communities residing in Mumbai’s informal settlements face a multitude of challenges, especially concerning access to healthcare and infrastructure. The onset of the pandemic further compounded these difficulties, and individuals from low-income families are disproportionately affected. Research has highlighted that in India, the urban poor are often excluded from social protection systems, and many were unable to access the relief measures introduced in response to the COVID-19 pandemic.³² Moreover, women and children were particularly vulnerable, experiencing adverse effects on their mental health, educational opportunities, recreational spaces, and access to essential goods.³³

Recognising these challenges, the RCCs tailored their activities to cater to the specific needs of these communities and individuals, particularly during the pandemic.

32 Aslam, S., & Schmidt-Sane, M. (2022). Evidence Review: COVID-19 Recovery in South Asian Urban Informal Settlements. Social Science in Humanitarian Action Platform.
33 Ibid.

As a result, a dedicated COVID-19 response initiative was developed to address the pressing needs of the community during this crisis. Even as the pandemic evolves, RCCs continue to provide essential support and facilitate various interventions, including sanitation assistance.

RCC’s response to COVID-19 encompasses the following activities:

1. **Sanitation support:** RCC understands the critical importance of proper sanitation and hygiene, particularly in a pandemic. To this end, RCC has taken measures to enhance sanitation facilities by providing four types of cleaning materials and teaching women how to make them, thereby creating income generating opportunities within the community.
2. **Ration support and awareness:** RCC has implemented a comprehensive response to address the urgent needs arising from the COVID-19 pandemic. This includes providing medical support and essential supplies, such as ration, to affected individuals and communities. Additionally, the intervention has focused on raising awareness about essential hygiene practices to combat the spread of the virus.
3. **Additional support:** Before the pandemic, all of RCC’s activities were conducted in person. With the pandemic in 2020, RCC swiftly adapted to the evolving circumstances by transitioning to virtual platforms. While ensuring online participation presented challenges due to the lack of access to digital devices, electricity, and reliable internet in the regions, RCC stepped in to support the communities. They provided mobile phones and internet connections, ensuring the continued engagement of parents and children in the RCC-organised activities and programs.

The results presented in the following section are based on the data collected from the interviewed sample, which is outlined below:

Stakeholder	Type of Interview	Sample Planned Across centres	Sample Covered Across centres
Community Members	FGD	-	20 FGDs (70 participants)
	Individual	-	30
Sanitation Volunteer	Individual	-	1
Chronic Kidney Disease patients	FGD	-	1 FGD(2 participants)
	Individual	-	6



The COVID-19 pandemic, as conveyed by the interviewed respondents, brought about a multitude of challenges that deeply affected various aspects of their lives. Among the significant challenges, the foremost was the struggle to secure an adequate supply of ration and food. Many individuals confronted severe financial hardships and job losses during this challenging period, making access to basic sustenance a pressing concern. Another notable issue raised by the respondents was the dire employment landscape. With limited job opportunities and heightened competition in the job market, sustaining a livelihood became a major preoccupation for many. Moreover, the pandemic-induced disruptions in education, driven by lockdowns and restricted access to online learning, posed substantial hurdles for students. The impact on their academic progress was pronounced, with consequences that rippled through their futures.

In addition to these concerns, health emerged as another pressing issue. Access to healthcare services became limited, and individuals felt an increased vulnerability to the virus. The need for support and resources in these crucial areas was fervently emphasised by the respondents, underscoring the urgency of addressing these challenges brought on by the COVID-19 pandemic.

“The COVID-19 pandemic presented our community with numerous challenges, particularly the loss of jobs and widespread unemployment. During this trying time, Ragoonwala stepped forward as a beacon of support by providing ration to those in need. They tirelessly went from door to door, ensuring that the community’s essential needs were fulfilled. Their regular distribution of ration during the COVID-19 crisis played a crucial role in alleviating the stress and hardships faced by many of us in the community.”

- Ration cum Hygiene Kit Beneficiary

Amidst these trying times, RCC emerged as a steadfast pillar of support for the individuals who were interviewed. The intervention played a pivotal role in delivering vital assistance across multiple domains. Foremost, RCC extended a helping hand by distributing ration to those in need, ensuring that individuals and families had access to food and essential supplies during the crisis.

In addition to ration support, RCC provided crucial monetary assistance. This support was instrumental in alleviating financial burdens and offering much-needed relief to those grappling with job losses or reduced income. Recognising the significance of healthcare and medication, RCC actively bolstered this area. Their efforts facilitated access to essential healthcare services and medications, ensuring that individuals received the medical care they required.

The multifaceted support provided by RCC, encompassing ration distribution, monetary aid, and healthcare resources, had a profoundly positive impact on the well-being and resilience of the interviewed individuals during these challenging times.

“I have been involved with Rangoonwala since before the lockdown as a sanitation volunteer. In our chawl, we have shared washrooms, and another volunteer and I work together to keep them clean. We handle issues like blocked pipes and communicate with the residents about maintaining cleanliness. One challenge we face is the lack of awareness among the community members regarding hygiene protocols, especially with regards to keeping the washrooms clean after using menstrual pads. Some individuals, including men, misuse the washroom for alcohol consumption. While we can’t change everyone’s mindset, we try to convince people to follow proper hygiene practices.

We rely on cleaning supplies like phenyl and bleach, and sometimes we need extra phenyl due to people spitting around the toilet. RCC provides us with the necessary equipment and support to maintain cleanliness. Additionally, RCC’s health interventions are closely connected to sanitation as they prioritise the well-being of the community and raise awareness about health issues. Since their involvement, they have provided us with tremendous support.”

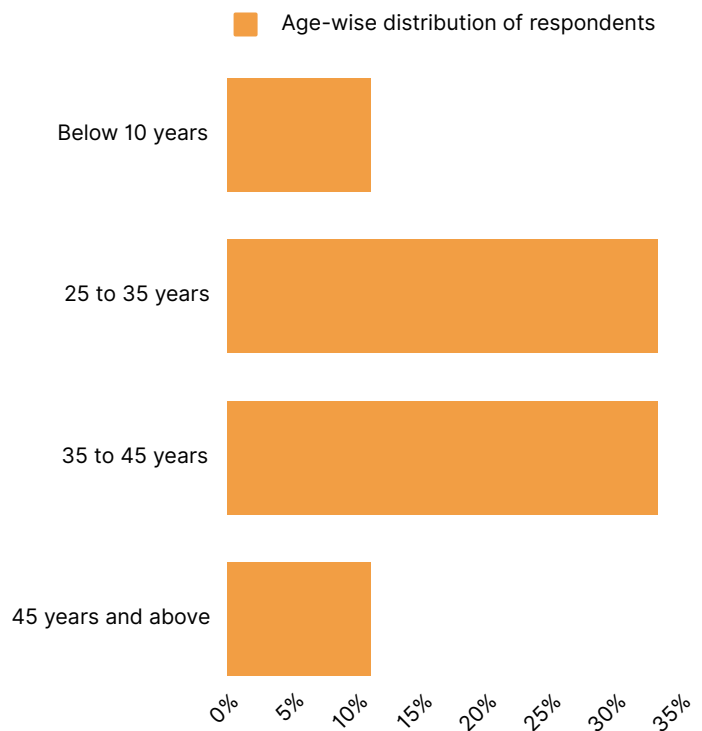
- Volunteer, Subash Nagar

The Ummeed Health Program: Supporting Chronic Kidney Disease (CKD) patients

The Ummeed Health Program admirably addresses the holistic needs of CKD patients, which extend beyond the purview of RCCs. Nonetheless, it’s noteworthy that the CKD patients interviewed during the assessment have also reaped benefits from the ration support provided by the RCCs. This is especially significant given the substantial and lifelong financial burden that Chronic Kidney Disease (CKD) imposes on affected families.

Among the CKD patient respondents we interviewed, 33.3 percent fell within the age group of 25 to 35 years, while another 33.3 percent were between 35 to 45 years old. Furthermore, 11.1 percent were below the age of 10, and there was also a segment above the age of 45.³⁴

According to the respondents, RCC extended support in various ways, primarily through ration support, ensuring access to essential food supplies. The Ummeed Program complemented these efforts by providing financial assistance for medications, covering dialysis costs, and offering support with expenses related to retina operations and other essential treatments.



³⁴ The data on age was not obtained from 11.12 percent of the participants.



Although RCCs and Ummeed operate as distinct community development interventions, their collaborative approach aligns their efforts to cater comprehensively to the needs of CKD patients, resulting in a holistic approach to patient care. This comprehensive support is pivotal in addressing both the basic needs and healthcare requirements of the CKD-affected community members.

“When my family disowned me, I felt completely abandoned and lost. It was during this difficult time that RCC extended a helping hand. They showed me immense support, providing for health and financial assistance.”

- CKD support beneficiary

Furthermore, the respondents conveyed their active participation in all the health camps organised by RCC, underscoring their commitment to their well-being and the regularity of these health camps. They also emphasised the vital role that RCC plays in helping them manage their challenging situation, highlighting the indispensable support provided.

g. Perspectives of Rangoonwala Community Centre Alumni

Children: Two of the children interviewed are no longer an active part of the RCC activities or programs. One of them shared that receiving a prize at Bal Umang and ongoing appreciation still holds significant meaning for them. The other child expressed that their confidence has markedly grown as a result of their involvement in extracurricular activities at the RCC.

Youth: Among the youth interviewed, four are presently not engaged in the centre's activities. However, it's noteworthy that all of them highlighted the invaluable impact of career guidance and career-focussed sessions. These resources have provided them with clarity and expanded their understanding of available career opportunities.

Women: Out of the women we interviewed, 12 are no longer active participants at the RCCs. Yet, they unanimously stressed the enduring importance of these Centres in their lives. They cited enhanced confidence, the formation of lasting friendships, and the ongoing value derived from skill-building activities. These activities have not only contributed to their personal growth but have also increased their earning potential.

“Before joining the computer classes, I had no knowledge about computers, and I lacked confidence due to shyness. However, the teacher at the Centre provided excellent instruction, encouraging us not to fear and assuring us that learning was possible with familiarity and confidence. I learned valuable skills such as Excel and Tally. Over time, I grew more confident and started assisting as a replacement teacher, which significantly improved my communication skills. I also volunteered to help others. Though I had to resign temporarily after getting married, I am now back as a teacher. RCC has played a vital role in making me financially independent. The classes are conveniently scheduled, and they ensure that even women who stay at home are well-informed and contacted for participation.”

- Computer Literacy Program, Alumnus

“I have actively participated in various activities at RCC. During a challenging phase in my marriage, I felt lost and unsure about whom I could confide in. I could not share such personal matters with others. However, RCC provided me with counselling support that not only helped me navigate my married life but also supported my personal growth. Additionally, I pursued a beautician course, which enabled me to generate income. Recently, I experienced the heartbreaking loss of my husband, and it has been an incredibly difficult time for me. Nonetheless, RCC has been a safe haven for me, providing me with emotional support and offering opportunities for financial stability.”

- Counselling Beneficiary

h. Insights from External Stakeholders

“Cheshire Home has been collaborating with RF(I)T for the past 12 years. The RCC has provided an opportunity for the 50+ differently-abled children enrolled at the Cheshire Home at Andheri, to participate in the Bal Umang and Bal Utsav activities. The children have been able to access opportunities to participate in games and activities such as drawing, writing, creating craft items and showcase their talents.”

- Respondent from Cheshire Home

Enabling sharing and transfer of institutional knowledge

“In addition to funding Chehak Trust, RF(I)T has provided us with guidance and knowledge on tracking the progress of our programs and developing meaningful indicators to conduct regular monitoring and evaluation of our interventions. RF(I)T has not only enabled us to forge meaningful connections with the communities we work with, but also expanded our professional network by connecting us to other organisations that work in similar domains. Such networks have enabled the sharing and transfer of institutional knowledge and enabled us to enhance our program delivery.”

- Trustee, Chehak Trust



Social Lens' Observations from RF(I)T's Health Talk Session

Two members from the Social Lens team had the opportunity to attend a reproductive health session at the Prem Nagar Centre. This session attracted a significant turnout, with approximately 15 girls aged between 15 and 20 years. An external resource facilitated the session, imparting valuable insights and information on reproductive health to the participants. The following key observations were made:

- 1. Interactive format of the session:** The session adopted an interactive format, which encouraged active participation and allowed young attendees to contribute to discussions by sharing their own experiences.
- 2. Group activities:** To keep the session engaging, attendees were grouped and given different topics for discussion. This approach not only facilitated in-depth conversations but also encouraged active participation among the groups.
- 3. Practical knowledge:** The sessions were thoughtfully tailored to meet the specific needs and interests of young girls. They provided relevant and meaningful content that went beyond theoretical knowledge. Importantly, the sessions offered practical guidance and actionable points, empowering the participants to initiate and implement positive changes, thereby fostering personal growth.



Social Lens Commentary

Conclusion

The Rangoonwala Community Centres (RCC) implemented by Rangoonwala Foundation (India) Trust span across six eight locations in Mumbai. For the purpose of this impact assessment study, visits were conducted to six centres, namely, Subhash Nagar, Mahakali, Premnagar, Shivtekdi, Pathanwadi and Anandwadi, to observe the socio-cultural context of the surrounding communities, and interact with the various direct and indirect stakeholders impacted by the intervention. The RCC intervention aims at empowering urban poor, underserved communities. The RCCs are physical centres, set amidst the informal settlements and its communities, including senior citizens, women, youth, children, etc.

The objective of the RCCs is to engage the community members through activities and empower their lives. This is achieved through creation of safe spaces that enable creation of social networks, capacity building and opportunities in mental and physical wellness. Through the activities, the centres have created a support system for all of the stakeholders while simultaneously addressing some of the most pressing issues faced by them such as access to healthcare and health checkups, ration support, career guidance, vocational upskilling, avenues to self-employment, and income generation.

The purpose of this assessment was to assess the efficacy and impact of the RCC intervention and its activities. This study intended to understand the changes brought about by the intervention in terms of changes in the employment status, mobility, agency, health, confidence levels, aspiration levels, and earning potential of program participants as well as changes in their participation and contribution to their household.

a. Volunteer Cadre and Sustainability of the Interventions

One of the primary objectives of RCCs interventions is to empower the community members to take on ownership and sustain the interventions' activities. To enable this, RCCs have developed a strong volunteer cadre, consisting of community members who are trained to work closely with the communities and sustain the intervention's operations.

From the stage of mobilisation, RCCs have proactively engaged the community in their interventions, ensuring active participation from all stakeholders. The activities conducted for each stakeholder group have been diverse and tailored to their specific needs and interests. The volunteers and resources needed to conduct the activities are also individuals from the community. A strong community connection, with a collaborative approach has fostered a sense of ownership and shared responsibility among the community members.

b. Alignment of the program to the community's needs

It is important to emphasise the comprehensiveness of the RCC intervention. Each of the RCC's programs and activities is thoughtfully designed to address the unique challenges faced by the stakeholders. These initiatives range from organising relevant health camps and checkups for community members, offering vocational courses to women and youth to create meaningful income opportunities, to providing access to mental health support through group and personal counselling sessions.

RCC has meticulously identified the specific needs of each stakeholder group and has implemented targeted activities and programs to address those needs. Through interviews with multiple direct and external stakeholders, it was evident that, to a significant extent, the intervention aligns perfectly with the beneficiaries' requirements.

c. Empowerment of the stakeholders

- **Enabling the holistic development of children:** The RCC's approach to children's programs and activities extend beyond the conventional academic emphasis. By offering activities such as art and craft, creative writing, dance, and yoga, RCC seeks to provide extracurricular opportunities for children who might otherwise be confined to their schoolwork, with limited chances for play, learning, and leisure in their surroundings. These targeted interventions, especially focused on the critical age group of adolescents, play a vital role in fostering the holistic development of these young individuals.
- **Development of leadership skills for youth:** Through sessions like the Reflect Group and various group activities organised for the youth members at the centres, a substantial enhancement in their leadership skills has become evident. They have begun to show increased interest in community matters and actively engage with those in their vicinity. Additionally, they've stepped up by volunteering at the centres, participating in activities that benefit all stakeholders. These experiences, combined with their participation in skills development sessions, position them favourably for future educational and professional opportunities.
- **Income generation opportunities for women from the comfort of their home:** Project Udyamita provides women with training in the production and distribution of sanitation materials tailored for women, empowering them to become entrepreneurs. Furthermore, the vocational courses for women have made significant contributions by enhancing their skills in providing beauty parlour services and enabling them to establish home-based businesses, including cooking, baking, and crafting household items like paper bags, among others.
- **Women Empowerment:** One of the primary goals of RCC is to empower women from underserved communities. In the context of the gender-specific challenges faced by these communities, women confront a host of difficulties, including limited mobility, instances of domestic abuse, restricted employment and income-generating opportunities, and inadequate access to healthcare. Furthermore, they bear the heavy burden of numerous household responsibilities.

In response to these challenges and with the aim of enabling women to take control of their own destinies, RCC has implemented a diverse array of initiatives. Insights from interviews with female beneficiaries and relevant external stakeholders have underscored the significant impact of the RCC initiatives. These have played a pivotal role in elevating women by enhancing their skills, bolstering their interpersonal abilities, instilling a sense of ambition, expanding their mobility, agency, and decision-making capabilities, and ensuring their access to essential services, as well as opportunities for self-employment and income generation.

- **Interventions for Senior Citizens:** RCC's programs tailored for senior citizens adopt a distinctive approach to safeguarding their mental and physical well-being. Senior citizens often encounter challenges related to limited mobility, which restrict their access to various opportunities. In response, RCC has developed programs that not only address their health-related requirements, but also infuse elements of fun and enjoyment into their lives. This approach extends beyond the realm of physical well-being, as it places a strong emphasis on fostering activities that promote their mental health and overall quality of life.



Annexures

Way Forward and Recommendations

- **Incorporating Monitoring and Evaluation:** To incorporate monitoring and evaluation processes, it is recommended to establish a structured M&E framework. This can be implemented by incorporating M&E as an integral part of the volunteer cadre's responsibilities. Most stakeholders interviewed have resided in these informal settlements for over a year. Given this, a six-month longitudinal tracking post-engagement with skill-based activities could effectively assess the intervention's impact outcomes. Additionally, maintaining a log of visitors at the RCCs and subsequently tabulating this data on a monthly basis can provide valuable insights for effective intervention assessment and improvement.
- **Conducting Feedback Sessions:** Through the course of the impact assessment, there were multiple suggestions by the various stakeholders to incorporate additional courses at the centres, including tailoring, sports activities for children, English sessions - these suggestions can be addressed through these feedback sessions and will ensure a systematic approach to involving community members in curation of the activities. This can form a part of the Monitoring plan of the intervention.
- **Capacity Building of Volunteer Cadre:** To strengthen the tracking processes, the capacity building of the volunteer cadre can be effective in supporting M&E and overall implementation. This can be accomplished by offering a structured training or an internship lasting approximately six months.

Snapshot of Assessment Tools

Children

1. Have you participated in any activities/attended any sessions conducted by Rangoonwala Foundation? [Probe: health camps, Bal Umang]
2. What do you do in your free time? Do you think there are opportunities for you to showcase your talents? [understand if the students are able to get exposure to creative activities and thinking otherwise]
3. If it were not for these activities, would you have been a part of an activity where you would get to showcase your creative skills?
4. Do you have a regular health check-up?
5. How has your experience been of the summer camps/Bal Umang, etc. What have you taken back from these sessions? [A reflective question to understand what the children both internally and externally sustained from the program]
6. Have you, in any way, stayed connected to the things you discussed during these sessions? Or to the people that you met during these classes? [Probe to understand if the child has sustained the learnings]



Youth

1. Have the career guidance sessions helped you gain clarity on what you would like to do? Did they provide you with information on education and training required for your chosen career?
2. What skills were you trained on as part of skills training sessions? Please describe your experience in these sessions. Have they helped you in becoming more job-ready?
3. Are you able to apply your learnings to the workplace? In what way have the sessions helped you in your professional life?
4. Have you taken part in any Reflect Group sessions? If yes, what was discussed in these?
5. How was your experience? Has it helped you in tackling issues you see around you? In what way? (Probe: have you joined any existing active group? Have you helped in a Rangoonwala program? Have you taken the initiative to start something on your own?)
6. Have you received any scholarship from the foundation? If yes, how has it helped you in your academic journey? What has it allowed you to pursue? Would you have been able to continue education in the absence of such a scholarship?
7. Could you describe any change in your lifestyle/job/access before and after your involvement with Rangoonwala? Do you think that it has empowered you, your family, and your community? In what way? (Probe to understand confidence, initiative, leadership, involvement in community)

Women

1. How were you made aware of the RCC community centre and its various programs? What motivated you to enrol in the program/s?
2. Can you list some of the technical skills you have gained from the program? (Technical skills/ expertise wrt beautician course, mehendi art, baking, jewellery making etc.)
3. Can you share an instance of how you have put into practice the skills and knowledge you have gained from the program? (Elaborate on the journey of establishing own business/ baking at home or for friends and family/ offering beautician and mehendi services to friends and family etc)
4. In your opinion, what has been the contribution of this program in your life? What changes have you witnessed in yourself post course completion?
5. How has attending the health camp benefitted you?/ How does the health camp address any healthcare challenge that you face? Have these interventions enabled you to implement good healthcare habits? (Are they able to implement the knowledge they have gained wrt healthcare/ hygiene/ menstruation etc.?)
6. Have you attended the Closed Group Counselling sessions? Can you tell us about the various sessions held?/ which topics were covered? How have these sessions motivated you to take responsibility and bring about a change in your life?
7. Has attending these sessions helped you change your approach to tackling the obstacles you faced? (Wrt parenting, being a single parent, domestic violence)
8. In the absence of these programs, what would you be doing?

Senior citizens

1. In your opinion, were there any challenges faced by the senior citizens within the community? Please elaborate? Have these challenges been addressed through RCC's programs for Senior Citizens? If yes then how?
2. Could you share the support provided by RCC with regards to the Senior citizens within the community? (The kind of interventions implemented for the senior citizens)
3. Have you been able to implement any change in your life/ daily routine due to these interventions? (To understand increase in responsibility to drive positive change in their lives/ implement good habits)
4. With regards to the health sessions covered, to what extent have you been able to implement what was taught at home/ with family/ with the community? Please elaborate.
5. What has been your experience with respect to the sessions on Health and physical development sessions(yoga, dance therapy, self defence) Please elaborate. (Share examples of implementation)
6. In your opinion, has the support towards the senior citizens made a difference in the community ?
7. In your opinion, what would be the scenario of the community without the support of RCC?

Community members

1. Could you share, were there any challenges faced within the community during covid 19? During this period, has any support been provided by RCC? Please elaborate on the type of support?
2. With regards to the health of TB and Chronic Kidney disease patients in the community, what has been the challenge? Has any support been provided to address the health of TB and CKD affected members in the community? Please elaborate.
3. In your opinion, has the support been able to address the challenges? How? (Probe- improvement in health status, recovered from the disease, timely care given)
4. What has been your experience with respect to the sessions on Counselling sessions, Health teleconsultation, Stress mgmt, parenting, substance abuse, RTI? Please elaborate? (Share examples of implementation)
5. Was there any challenge the community was facing with regards to hygiene and sanitation? If yes, how has this challenge been addressed? (Probe- type of awareness sessions, cleanliness drive, thought process towards cleanliness, shared responsibility)
6. What is the current status of the community with regards to hygiene and sanitation?(Probe- clean environment, proper disposal of garbage, reduction in people falling ill) Could you share what measures are being taken regularly to maintain the hygiene and sanitation of the community? In your opinion, how are these measures contributing to the community?

**Ethical considerations**

- Verbal consent was obtained from all survey participants for on-field and online data collection. The participants could withdraw at any point in the study.
- The beneficiaries were identified and contacted through the implementing partners. The implementing partners were present during the data collection as deemed necessary by them.
- Confidentiality of data is maintained by the researchers.
- Neither unlawful means nor plagiarism were used to present data.

Limitations of the study

- Participants (subjects) in an experiment have a tendency to act in ways that they believe the experimenter or researcher wants them to perform, whether consciously or unconsciously. Further, when a construct being assessed or the behaviours that characterise it are not the same in different cultures, there may be misinterpretation of questions or of responses. These may result in data of poor quality or misleading data in the analysis.
- Ratings of the same items on a scale may differ based on the subjectivity of the surveyor, and on the interpretations of the items based on their phrasing. The ratings may also fail to capture nuances if the items are not carefully constructed to prevent ambiguities.

About Social Lens

Social Lens was founded in 2016 out of Mumbai as a for-purpose organisation that brings professionals working in close collaboration with philanthropy and grant making institutions to drive transformation for SPOs in India. Social Lens services INR 500+ crores of philanthropy capital working with change makers and grant giving bodies with solutions that touch over a million end participants. With 10 years of experience, we have the expertise to strengthen the Impact Ecosystem, by making value driven changes. It addresses the critical challenges in organisation development or program building. We collaborate and design sustainable solutions to achieve better outcomes for end beneficiaries that encompass education, livelihood, women's empowerment, water, micro-finance, and healthcare initiatives.

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