CHAPTER V

ACTIVITIES OF THE VOLUNTARY ORGANISATIONS FOR CHILD WELFARE

This chapter discusses the activities of voluntary organisations in Kamrup district for welfare of children. Attempt has been made to understand the motivational factors that prompting the VOs to undertake child welfare activities. The chapter also examines the strategies adopted by the VOs for planning, implementation and evaluation of their programmes.

1. Motivations Behind Child Welfare Activities

Efforts have been made in the present study to know what motivated the VOs to take up activities for welfare of children. It has been found that different VOs are motivated by different factors to work for children. A large number of VOs (40%) covered by the present study have taken various initiatives for well being of children because they consider children as the most vulnerable section of the society. On one hand they are the future citizens of the country, and for building a strong nation it is essential that all children get opportunities to develop into physically and mentally healthy individuals. On the other hand, a large section of children in our country are deprived from many basic necessities of life. Therefore, these VOs intend to provide necessary support and interventions to such needy children, and thus, children constitute one of the prime targets of their welfare programmes. The specific activities undertaken by these
VOs for children differ from organisation to organisation. Some VOs have taken up educational programmes for children, while some are engaged in activities relating to health and nutritional care of children. Some of the VOs organise recreational or hobby development activities, and again, some VOs are carrying out several activities simultaneously.

There is a section of VOs (18%) who are especially moved by the plight of disabled and other such children with similar problems. It has already been mentioned in Chapter IV that a number of VOs have been formed to offer services to disabled children as there is very little or no support from other quarters for the disabled children. Personal life experiences have also motivated many to get together and form VOs to work for prevention, management and rehabilitation of disabled children. In fact, a number of persons deeply involved with a few VOs of the study sample working for disabled children experienced the problems of such children from a very close quarter in their personal lives. Their own traumatic experiences prompted them to get together with other like minded people and form voluntary organisations to work for these children.

The following two cases depict how personal life experiences have motivated some people to engage in activities for welfare of children. The names of the concerned individuals have been changed to protect their identities.

- Mr. and Mrs. Goswami is a working couple living in Guwahati. They have a daughter who is about 15 years old now. She has been suffering from a chronic mental illness from about 3 years of age which has no permanent cure. Her illness was not acute in nature and did not require hospitalisation but needed
special care at home or at an appropriate facility. As there was no day care center for such children with problem, Mrs. Goswami eventually had to give up her job to take care of her daughter. However, Mrs. Goswami soon realised that it is not possible for her alone to look after her daughter properly as the ailing child needed special care under the guidance of psychiatrists, psychologists and other professionals. Such services can be availed of in specialised hospitals or nursing homes but generally is very costly. In course of time Mr. and Mrs. Goswami came into contact with many parents and guardians of mentally ill as well as mentally retarded children who faced similar problem of day to day care of such children. The problem is more among the small nuclear families and particularly so, if both parents are working. Both Mr. and Mrs. Goswami realised that all these parents like them require a place where mentally ill or retarded children can spend a major part of the day and receive specialised services like psychotherapy, physiotherapy, etc. to improve their condition without any cost or at a very nominal cost. They discussed the issue with some of their close friends and along with the willing friends formed a voluntary organisations to work for such children. To start with, the VO opened a day care center in Guwahati for mentally ill, mentally retarded and children with similar problems by mobilising helps and assistance from various quarters including psychiatrists, psychologists and other professionals.

Dr.(Mrs) Dutta is a leading psychiatrist of Guwahati. During her course of work she came across numerous cases of mentally retarded children, who, with proper therapeutic and rehabilitative services could grow up to lead a normal or near normal life. However, due to various reasons like ignorance of parents, non-availability of such services or very high cost of such services compel majority of mentally retarded children to lead a miserable life. These children are not only deprived from opportunities to lead a better life but also become somewhat burden for their parents and society. As a concerned professional Dr.(Mrs) Dutta felt that a collective initiative needed to be taken to mitigate the problems of these children. She motivated some other people to join with her and a voluntary organisation was born in Guwahati with the objective of working for mentally retarded children. This VO established the first ever institution in the North-East India for mentally retarded children and since been
offering its services to these children with support and assistance of government
and non-government agencies and other individuals.

The urge to bring in succour to the lives of orphan, destitute and other such
neglected children motivated 16 per cent of the VOs to work for these children. After
witnessing the sufferings of such children these VOs have taken up programmes to
provide food, shelter, clothing and much needed love and care to orphan and destitute
children. The philosophy that serving children is equal to serving God has motivated a
few VOs (13%) of the study sample to work for children. These organisations stated they
have been motivated and driven by the love of God. As God loves and is concerned about
children, it is their cardinal duty to ensure welfare of children through various activities.
The VOs run by Christian missionaries belong to this category. It has been revealed that
another 13 per cent of VOs have undertaken child welfare programmes not because they
were particularly motivated by one or the other factor to dedicate themselves for the
cause of children, but simply because government grants were somewhat easily available
for this purpose. Quite a few VOs, particularly those located in rural areas, got engaged in
child welfare activities in this manner.

2. Nature of Activities

It has been discussed in Chapter I that child welfare includes all such activities
which are directed towards fulfilling the basic needs of children as well as some special
needs of physically, mentally or socially handicapped children. Thus, the activities
carried out by the VOs in Kamrup district for child welfare too are diverse and aim at
meeting the basic and also some special needs of children and are supportive, preventive
and curative in nature. The activities of the VOs may be grouped under the following heads:

(i) Creches/Balwadis and Pre-school Centres.
(ii) Activities for health and nutritional care of children.
(iii) Care of orphan, destitute and other categories of children in difficult circumstances.
(iv) Programmes for disabled children.
(v) Other educational programmes for children.
(vi) Recreational activities for children.

Under each head many different activities are carried out by different VOs. It has been found that some VOs carry out activities belonging to any one of the above mentioned categories, while some VOs are involved with several activities belonging to different categories. Table 12 shows distribution of VOs engaged in activities of various mature for welfare of children. The table makes it clear that running crèches, balwadis or pre-school centres is the most common activity taken up by a large percentage of the VOs. Activities relating to health, nutrition and recreation of children are also organised by quite a good number of VOs. Comparatively, lesser number of VOs are involved in organising services for orphans, destitute and disabled children. A detailed discussion on various activities under each category follows.
Table 12

Distribution of VOs according to nature of activities for child welfare

N=38

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<th>Activities</th>
<th>No. of VOs</th>
<th>Percentage</th>
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<tr>
<td>Activities for health and nutritional care of children</td>
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<td>Services for care of orphan, destitute and other children in difficult circumstances</td>
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<td>18.00</td>
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<td>Programmes for disabled children</td>
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<td>18.00</td>
</tr>
<tr>
<td>Other educational programmes for children</td>
<td>08</td>
<td>21.00</td>
</tr>
<tr>
<td>Recreational activities for children</td>
<td>11</td>
<td>29.00</td>
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</table>

(a) Creches/Balwadis and Pre-school Centres

As the table 12 depicts, about one third of the VOs are running crèches, balwadis or preschool centres. These services are meant for children in the age group 0-6 years. A crèche is a place where children from 0-5 years of age are kept at day time when parents go out for work. At times, children of ailing parents or children of single parents are also kept. During their stay children are taken care of, fed and various games and play activities are organised for the children and their other needs are attended to till the time when their parents come and take them back. Periodical health check ups of the children are also carried out by medical or paramedical personnel. In a pre-school centre young children in the age group 3-6 years are imparted non-formal pre-school education through play way methods. The main objectives of the activities of pre-school centres are to foster all around development of the children and to prepare them for formal schooling after
they attain 6 years of age. A Balwadi is a combination of a crèche and a pre-school centre where services are offered to children in the age group 2 ½ years to 5 years of age. The activities of the balwadis include day care of children, feeding and pre-school activities.

It has been found that 21 per cent of the VOs covered by the study are running crèches for children. These crèches cater to the needs of the surrounding population where the VOs are located. The crèches usually target the children of poorer section of the community where both parents go out to work or children of those parents who cannot look after their children properly at home for some reason or other. The VOs are organising the crèches with assistance from Assam State Social Welfare Advisory Board (ASSWAB). The Board bears about 95 per cent of the expenditures for each crèche as per the standard budget by the Central Social Welfare Board (CSWB). The concerned VO bear the rest 5 per cent of the expenditures. Besides, of course, the VOs also receive a non recurring grant in the first year of launching the programme and then after every 5 years. According to the schematic pattern each creche can admit a maximum of 25 children in the age group 0-5 years. However, it has been observed that a few VOs have admitted 30 to 35 children in a creche as there are more than 25 children who require the services of a creche. Again, in another few VOs less than 25 children are enrolled in the creche as in those areas there are not many children who need to attend the creches. Two creche workers or creche attendants look after the children during their stay at the creche. In a few VOs (11%) however, only one creche worker has been found to be working for children. The creches generally remain open for 5 to 6 hours every day except on Sundays and holidays. The timings of the creches differ from one VO to another depending on convenience of the parents whose children come to the creches. The creche
workers play games, sing rhymes, and do other playful activities to make the children happy and also to foster growth and development of the children. The creche workers also attend to other needs of the children, impart toilet training, and attempt to inculcate socially desirable behaviour pattern amongst the children. Besides, the children are given some kind of nutritious food everyday to supplement whatever they eat at home. Though the type of food given differ from organisation to organisation, it generally consist of items like seasonal fruits, soaked or boiled Bengal gram, groundnuts, milk, biscuits, etc. The VOs receive a certain amount of money to be spent on food for the children as a part of the grant. However, all the VOs have informed that this amount is very insufficient and the VOs have to spend some amount of money from their own funds to meet the expenditures for food. Thus, those VOs who can spare more money from their own resources give better quality food, and those who are not in a position to spend much manage with whatever amount received as grants. It has also been found that the quality of other services offered to the children at the creches differed in different VOs depending on factors like the infrastructures of the VOs, capabilities of creche workers/attendants, etc. In those VOs which have spacious accommodation, play materials and other facilities, the children enjoy their stay. Likewise, in 13 per cent of the VOs who have trained creche workers/attendants the activities of the creches are being managed more efficiently than those VOs whose creche worker/attendants are untrained.

A few VOs (08%) of the study sample have pre-school centres for children in the age group 3 years to 6 years. These centres offer their services mostly to children of economically weaker parents, particularly those who cannot afford to send their children to nursery schools. In each centre 30 to 40 children of the above mentioned age group
have been enrolled. The centre opens during the morning hours for about 3 to 4 hours and two trained workers conduct pre-school activities with the children. The activities at the pre-school centre aim at promoting physical, social and psychological development of the children, and also to groom them for formal schooling later on. All such activities are conducted in an informal, playful manner so that the young children can enjoy it. The pre-school sessions conducted at the centre include singing action songs, rhymes, drawing, colouring, solving simple puzzles, different types of creative activities, indoor and outdoor games, etc. To make the pre-school programmes interesting, lively and effective for the children different types of play materials and teaching aids are used. When a child attending the pre-school centre attains 6 years of age, the child's parents are advised to enroll the child in primary school.

A number of Balwadis are being run by one (3%) of the VOs amongst whom the present study has been conducted. As mentioned earlier the Balwadi offers a mix of services of a creche and a pre-school centre. The Balwadis, managed by a VO situated at the heart of Guwahati city, caters to children in the age group 2 ½ years to 5 years. Most of the children coming to these Balwadis are the children of daily wage workers, rickshaw pullers and other such low income category people. The parents send their children to Balwadis because these look after their children when they go out for work and also because the children receive some basic education through its pre-school programme. A trained child care worker called balsevika and her assistant carry out the activities of the Balwadi which include general care of children, pre-school activities and feeding children with nutritious food. The Balwadi also arranges for immunisation and health checkup of children from time to time in collaboration with the local Community
(b) Services for Care of Orphan, Destitute and Other Children in Difficult Circumstances

Taking care of the orphan, the destitute and other such children was one of the oldest welfare services for children. In a developing country like India, this service assumed particular importance, since the children were hard hit by the lower economic standards and lack of social security and social assistance programmes. The early social workers concentrated on provision of orphanage and destitute homes. The orphan child has been receiving sufficient attention from the society and it continues to be so even today (Chowdhry, 1971:110). Thus, quite a few VOs of Kamrup district too are engaged in providing services to such socially handicapped children.

Generally two types of services are organised for these children— institutional and non-institutional services. In institutional type of services, groups of such children, small or large, live together in an institution where they not only receive food, shelter, clothings and other necessities of life but also education, vocational training, etc., so that after a period of time they are able to take care of themselves. Orphanages and destitute homes are such institutions. In non-institutional kinds of services the child is not placed in an institution with many other children but efforts are made to provide the necessary services to the child at his biological family as far as possible, or in a foster family. Some times an orphan child is given for adoption to a willing family. Foster care, adoption services, sponsorship are some of the non-institutional services for children. The basic
objective of these services is to ensure that the child gets enough opportunities to grow up in a congenial familial atmosphere.

It can be seen from table 12 that 18 per cent of the VOs under study are engaged in activities relating to care of orphan, destitute and other categories of neglected children. Of these 10 per cent VOs are running institutional programmes like orphanages/destitute homes, a small section of VOs (05%) are carrying out some non-institutional programmes and only one VO (03%) has both institutional and non-institutional programmes for such children.

The residential institutions being run by the VOs admit both orphans and destitutes. Some institutions, however, prefer orphans than others for admission. Then there is one VO in the study sample who mostly takes in orphaned or abandoned new borns. There is no lower age limit for children for admission into these institutions and children are taken in right from birth. However, all the VOs have set a upper age limit for admission which varies from organisation to organisation with the maximum found to be 12 years of age as prescribed by one of the VOs. It has been found that 3 VOs (8%) admit both boys and girls into their institutions, whereas 2 VOs (5%) are running the orphanages/destitute homes only for boys. It could also be learnt that needy children find their way into these institutions through various channels. Sometimes the VOs themselves pick up abandoned or orphaned children from hospitals or such other places. In this connection it may be mentioned here that one of the VOs regularly sends its members to bus/railway station, hospitals, or other public places in search of such children. Often, law enforcing agencies like the police or courts of law refer needy
children to the VOs. Again, one of the VOs has taken especial initiatives to accommodate children affected by ethnic conflicts, riots and natural disasters in the district as well as in the region. Different VOs admit different numbers of children into their institutions. In the present study sample there is one VO who has 15 children in its orphanage and at the other extreme is a VO with nearly 200 children under its care.

In all these institutions except one, children are being provided with dormitory type of accommodation. Besides arranging for food, clothings and other essential amenities for these children, the VOs are also making efforts to ensure that the children receive adequate education and also vocational training so that when they grow up, they can earn their own livelihood. It must be mentioned here that the standard of facilities and services differ from institution to institution depending on resources of the VOs. Most of the VOs have engaged a few ladies whom the VOs have designated as matron or house mother or in a similar fashion. These ladies mainly look after the children under the supervision of the office bearers of the VOs. In all the institutions children are taken care of till a certain age. Boys are generally allowed to stay till late adolescence period. Most of the VOs, however, have not defined specific age limit, but as they near adulthood, maximum efforts are made to rehabilitate the boys in society by helping them to acquire a source of income and enable them to live as independent members of society. In case of girls, it is learnt that, emphasis is also laid on marrying them off with suitable matches besides providing with education, vocational training, and making them economically self reliant. There are many instances of such successful rehabilitation of boys and girls. All the VOs also encourage such outgoing children to keep in touch with the institutions. It also needs to be mentioned here that some of these VOs also give away young children, particularly
infants, for adoption to willing and eligible parents. While doing so VOs generally go through all the necessary legal and procedural formalities. Most of the VOs running these orphanages or destitute homes receive financial assistance under the scheme for welfare of children in Need of Care and Protection being implemented by Ministry of Social Justice and Empowerment, Government of India.

It has been mentioned earlier that children in orphanages or destitute homes are mostly accommodated in dormitory type of facilities. In fact, not only the accommodation, in other aspects also, the environment of these institutions resemble that of a hostel or boarding house where some designated personnel look after the children. However, one of the VOs covered by the present study, that is, the SOS Children's Village, Guwahati, is providing not only shelter and other essentials for children to live but also a family, a home with a mother. This Children’s Village established by SOS Children’s Village of India has given the orphan and destitute children a permanent home and a strong foundation for an independent and secure life. Children in this SOS village grow up in a family comprising of their ‘SOS Mother’ and boys and girls of various ages who grow up as brothers and sisters. Generally a single or a childless widow is engaged and trained to act as the mother to about 8/9 orphan and destitute children. Each of these families live in separate individual cottages and the mother heads the family. Mothers are supported and helped by an efficient team of professionals led by a Village Director. Mothers are provided with requisite finances and materials to run their families by the SOS Village authorities. At present 172 children are being taken care of in 16 families in the SOS Childrens Village in Guwahati. After attaining a certain age the boys and girls go to live in youth hostels and other such facilities established by the organisation itself. All
facilities are provided to the SOS Children to pursue education and obtain vocational or professional qualifications as per their aptitudes. The Children's Village also runs various outreach programmes for the communities living near the village. Such projects provide opportunities to the children and youth of SOS Village and the local communities to interact and ultimately help the orphan and the destitutes to assimilate with broader society. The uniqueness of SOS pattern of care of orphan and destitute children lies in the fact that, unlike in other institutions, children here get back their lost family life.

Non-institutional programmes taken up by the VOs in Kamrup district for orphan and destitute children is limited to arranging adoptions for orphan children. It has been found that a few VOs running institutional programmes for these children also make efforts to give children for adoption to willing and eligible couples. The VOs carry out extensive pre-adoption activities before allowing a couple to adopt a child. VOs enquire about the background of the intending couples and only when it is established that the child would get a conducive environment to grow up, the child is given away for adoption. Besides, legal formalities are also completed to avoid any problem in future. As and when necessary adoptive parents as well as the child are counselled for facilitating acceptance of the child into the family of the adoptive parents. Other non-institutional programmes for orphan or destitute children like foster care, etc. was not reported by any of the VOs under study.

Besides the orphans and the destitutes there are some other categories of children in difficult circumstances, who too, are deprived of the basic necessities of life for some reason or other. Many of these children have their parents but miss a congenial family or
home life to live in and grow. A large number of such children live in streets or spend a major part of the day in the streets. These street children roam the hostile streets looking for any means to satisfy their hunger and become vulnerable to many evils of life. Then there is a huge population of children who are forced to work to earn a livelihood or to supplement their parents' income. At a time when they should go to school or play with their friends, these young children toil hard as labourers in tea shops, auto workshops, small private industries and even as domestic help. In the process they not only lose their childhood but are also deprived of the opportunities to grow into physically and mentally healthy individuals. These problems are more acute for children in urban areas and many VOs undertake some activities to help these children. Guwahati, the capital city of Assam, has a large number of such children and in the present study sample there are 3 VOs (8%) who have taken up some programmes for welfare of street children and child labourers. The activities under these programmes include initiatives for rehabilitation of these children by providing them with health care, education and skill training. Accordingly non-formal education, literacy classes, craft classes, etc. are conducted for street and working children. Besides, regular health checkup of these children are carried out and they are also given first aid and simple medicines to treat some minor ailments like skin infection, cuts, etc. Life in the streets and engagements in hazardous occupations also make these children susceptible to various diseases and, therefore, health education constitute an important part of the programmes for these children. The VOs also attempt to engage the elderly children in some gainful employment based on their skills. One of the VOs also provide mid day meal to the selected street and working children when they come to attend the vocational training sessions and arrange for various recreational
activities for these children. Those children who desire to pursue formal educational are
admitted in schools and the expenditures for this are borne by the VOs and the
performances of such children are regularly monitored. The VOs carry out these activities
for street and working children with financial assistance from Ministry of Social Justice
and Empowerment, Government of India, and also reportedly with support of some
corporate agencies, private trusts, etc.

It has been mentioned earlier that besides implementing their own programmes
VOs also assist in implementation of government sector programmes. In such an
endeavour one of the VOs under study is acting as a collaborating agency for a
programme for children in distress launched by the Ministry of Social
Justice and Empowerment, Government of India. The programme called Childline
being implemented in Guwahati is a 24 hours free telephone service for children
in need of immediate help. Any child facing a crisis may call the telephone
number 1098 which is a free number and help would be available within a very
short time. In case the child is not in a position to call the number himself or herself, any
other person witnessing the child’s condition may call the number and seek assistance
on behalf of the child. On receiving the distress call, a team of social workers reaches the
child and attend to the problem of the child and finally links the child to various short or
long term services according to the needs or problems of the particular child. The
concerned VO in the study sample as the collaborating agency, has taken the
responsibility of attending to the calls made and providing immediate necessary helps to
the distressed child with its special team of workers.
(c) Programmes for Disabled Children

The programmes of the VOs for disabled children relate mainly to management and rehabilitation of children affected by disabilities. Different VOs work for children with different types of disabilities. Of the 7 VOs (18%) in the study sample working for disabled children, 2 are catering to mentally retarded and mentally ill children. Again, 2 other VOs are rendering their services for children with locomotor and related disabilities. Another VO has specialised in management and rehabilitation of spastic children. One VO is running or Child Guidance Centre for children with developmental and learning disorders and still another VO is working exclusively for visually handicapped or blind children.

Depending on the type and degree of disability, the VOs organise a number of services for disabled children. Though it is rather difficult to categorise the services, these can be discussed under the following heads:

(i) Diagnostic Services

The VOs offer diagnostic services to children for assessing the impairments leading to disabilities and also for deciding on courses of correctional and rehabilitative actions to be taken. Some of VOs have their own diagnostic clinics where children are examined on arrival by psychologists, psychiatrists, neurologists, special educators, speech therapists, etc. After the initial diagnosis of the problem(s) of a particular child the steps to be taken for management of the problem(s) are decided upon. Some of the experts and specialists attending these clinics offer their free voluntary services while some others are paid honorarium by the VOs. A few professionals like the special
educators, physiotherapists, speech therapists, etc. have been appointed by the VOs on part time or full time basis. It has been found that 3 VOs (8%) do not have their own diagnostic clinics and these VOs get the children examined and diagnosed by the doctors and other specialists at Guwahati Medical College and Hospital or other government hospitals or health care centres situated in Guwahati city.

(ii) Day Care Centres

All the VOs working for disabled children run day care centres. This is the place where these children receive special education and training to overcome their handicaps to the maximum possible extent and function like normal human beings. The activities of the day care centres are generally run much on the lines of normal schools. However, the children here are classified based on their mental abilities and functional level. For each group different curriculum consisting of specialised activities suited to the needs of the children are carried out. For example, children with mild nature of disabilities go through normal academic activities. Of course, the teaching methods are different than that of normal schools. Depending on the nature of disability or problem of the children different methods and techniques and aids are used. For the blind children Braille method is used for reading and writing, while for the hearing impaired various gadgets like hearing aids, microphones, etc. are used. Likewise for mentally retarded, educable spastic children or for autistic children the special educators take help of specialised techniques and teaching aids. Again, the activities for those who are profoundly disabled, physically or mentally, aim at enabling such children to acquire as much possible functional skills. Counselling, physiotherapy, speech therapy and different types of medical inputs are also provided to the children through these day care centres. Music, dance and other forms of creative
activities like drawing, paintings, etc. constitute other regular activities at these centres. Such activities not only bring happiness to the lives of disabled children but also act as a kind of therapy for the children as claimed by a few functionaries of these VOs. In some day care centres, particularly those where mentally retarded, mentally ill and similar children are taken care of, children are also taught proper social habits like manners, dressing, properly, talking properly etc. Most of the VOs also conduct physical education sessions in the day care centres like exercises, yoga, meditation, etc.

(iii) Vocational Training

Vocational training is considered one of the most important elements for rehabilitation of children with disabilities. Therefore, all the VOs working in this field have incorporated vocational training as a part of their programmes for disabled children. The ability to receive vocational training differ from child to child depending on nature and extent of impairment. Thus, different type of vocational activities are undertaken by the VOs covered by the present study. It has been observed that most of these VOs impart trainings in simple vocational skills such as sewing, embroidery, weaving, envelop making, chalk making, grinding and packaging spices, dyeing, etc. A few VOs (8%) also reported that they enroll their capable children at Vocational Rehabilitation and Training Centre run by Ministry of Labour, Government of India, to undergo training in various trades such as typing, stenography, carpentry, weaving, fabrication, etc. The VOs not only arrange for vocational training of disabled children but also make efforts for their placement in various agencies or help them to undertake some self employment initiatives.
(iv) Parent Counselling

Counselling the parents and guardians of children affected by disabilities or developmental problems is another important activity carried out by the VOs working in this field. Because problems of disabled children are often aggravated due to ignorance, misconception and mishandling, most of these VOs interact closely with the parents and advise them on dealing with such children. It has been found that 10 per cent of the VOs of the study sample regularly conduct such counselling sessions in which trained special educators, counsellors, psychologists, etc. counsel the parents. Detailed strategies for home management of these children are also worked out for parents in counseling sessions and these are again monitored and modified based on the feedback.

(v) Out Reach Centres

Besides offering their services to the needy children from their premises located in Guwahati city, 3 VOs (8%) are also serving some outlying rural and semi-urban areas located within Kamrup district and also in some other districts of Assam by launching Out Reach programmes. It has come to light that through their Out Reach Centres these VOs carry out survey for identifying disabled children in these areas and provide professional help to affected children who have hitherto had no access to such services. These Out Reach Centres are run mainly with the help of local trained volunteers and professionals from the concerned VOs visit these centres periodically.

In addition to the above mentioned activities a few VOs also offer some other facilities for the disabled like making arrangement for corrective surgery where required, running hostels for outstation children, organising awareness generation programmes, etc.
It has been learnt that one of the VOs working for children with locomotor disabilities often help poor children for undergoing corrective surgical procedures or such treatments, if prescribed by the attending specialists. For this purpose, the VO mobilises resources, consults the experts, attends the patient during treatment at hospital and also follow up the cases. Again 3 other VOs (8%) have also set up hostel for outstation children attending the day care centres and 2 out of these 3 VOs provide free boarding and lodging for such children in the hostels whereas the third one charges a nominal fee for food and accommodation. Such facilities have enabled children from interior areas of Kamrup district as also from other districts to avail the services of the VOs. A few VOs working in this field also undertake awareness generation programmes particularly amongst the rural masses on prevention, identification and management of childhood disabilities. Such awareness generation drives are usually carried out through the Out Reach Centres.

(d) Activities for Health and Nutritional Care of Children

Health care of children is one of the important fields of activities of voluntary organisations. It has been found that 29 per cent of VOs covered by the present study are engaged in various activities connected with health and nutritional care of children. However, it may be mentioned here that health care programmes usually require extensive technical expertise and material resources and as such voluntary organisations mostly play a supportive role in government sponsored health care initiatives. The programmes of these VOs include periodic health check up and treatment of children, immunisation, referral of needy children, Reproductive and Child Health (RCH) activities, prevention and control of malnutrition among children, promotion of
traditional system of medicine, organisation of trainings of health workers, awareness
generation and health education of communities, prevention of HIV/AIDS, particularly
amongst children, etc. It must, however, be made clear at this point that some of these
activities of the VOs are meant for not only children but also people of all age groups.
Children, however, receive a special attention in all such cases. Again, on many aspects
health care of children is intricately linked to health care of mothers and, therefore, some
of the programmes like RCH target both the mother and the child in somewhat an
integrated manner.

About 21% per cent of the VOs working in this field organise periodic health
checkup and immunisation camps for children. Usually such programmes are carried out
in collaboration with government agencies. Doctors and other paramedical personnel
from government hospitals conduct health checkup of children and administer vaccines.
Medicines and vaccines are also generally supplied by the government hospitals. The
concerned VOs on their part coordinate with the government agencies, mobilise the
people to bring their children to these camps, make physical arrangements and also
follow up certain cases. If required, these camps also refer some children to referral
hospital or other such government institutions for better treatment. It could be learnt that
a few VOs (8%) organise such health checkup camps on their own without entering into
collaboration with government departments. These VOs utilise the services of willing
physicians for these camps and often collect medicines and other materials from various
sources as donations. However, in such individually organised camps immunisation of
children is not carried out. This is because mass immunisation of children in India is done
under certain government programmes. If a VO organises immunisation services for a
group of children without proper coordination with the concerned government agencies, it may not only lead to duplication of services but may also have serious consequences. Therefore, in those occasions VOs avoid vaccination of children in health check up camps.

Control and prevention of malnutrition amongst children is another issue for which quite a few VOs have taken up different activities. As ignorance has been identified to be the most important reason after poverty for rampant malnutrition amongst young children, the VOs undertake different programmes of health and nutrition education for community. Such educational programmes dwell mainly on appropriate feeding habits for young children and other vulnerable groups like pregnant mothers, nursing mothers, etc. It has been found that while organising such educational campaigns the VOs utilise technical support from various government agencies particularly the Community Food and Nutrition Extension Unit, Government of India, located in Guwahati. Keeping in view the target groups various methods and techniques are used for imparting the education. Demonstrations on preparation of low cost nutritious recipes for children, small group discussions amongst the mothers, audio visual shows, etc. are some of the methods used for this purpose. As innovative programme has been taken up by one of the VOs under study to help poverty stricken malnourished children in their families. The programme named 24 Hour Famine is basically an annual public awareness and fund raising event. On a fixed date of the year participants of this event go without solid food for 24 hours and get their family and friends to sponsor them to do so. According to the VO the objective of the programme is to sensitise participants to the issue of poverty and hunger and to raise funds for fighting malnutrition among children besides other
activities. The resources thus collected are used for organising feeding programmes for malnourished children. Under this programme the VO also helps some poor agriculturist families to adopt improved methods of cultivation for increasing production. This is done to enable the families to raise their income and subsequently improve the quality and quantity of nutrition intake to minimise incidences of malnutrition. It may also be mentioned here that nutritional interventions is an important component of many other programmes of the VOs discussed in the foregoing paras. Although crèches, Balwadis, programmes for street children and also out reach programmes of SOS Children’s Village, Guwahati, are not residential in nature yet these include a nutrition component. Under this, beneficiary children are provided with nutritious food and even mid-day meals with the objective of preventing malnutrition among such vulnerable groups of children.

The VOs in Kamrup district are also involved with awareness generation activities on various subjects relating to mother and child health. The VOs organise these activities their own and sometimes in cooperation with other organisations like Department of Field Publicity, Government of India, Department of Health and Family Welfare and State AIDS Control Organisation, Government of Assam, etc. VOs often bring out processions chanting slogans and displaying playcards and festoons with relevant messages on health and nutrition to attract the attention community. Some VOs, conduct street plays and skits, hold baby shows, seminars, public meetings, etc. as a part of awareness generation programmes. Efforts are made to raise public awareness on a number of important subjects like care during pregnancy, birth control measures, care of new born and young children, prevention of HIV/AIDS, prevention of disabilities
amongst children, etc. through these activities. One of the VOs also prepare and publish simple and comprehensive communication materials like booklets, brochures, posters, etc. for greater awareness generation amongst the people about various issues relating to mother and child health.

A small number of VOs (8%) of the study sample are also involved with implementation of Reproductive and Child Health (RCH) Programme of the Department of Family Welfare, Government of India. The programme mainly provides interventions for safe motherhood, child survival, family planning and birth control, prevention of sexually transmitted diseases (STDs) and HIV/AIDS, adolescent health and sex education, etc. The concerned VOs are mainly working for advocacy of RCH programme at the grass root level. The VOs counsel the eligible beneficiaries on the importance of the programme and also facilitate the process of availing the services under the programme. Trained workers of the VOs deliver preliminary paramedical services to needy beneficiaries and refer and link the beneficiaries with the government health care facilities. The VOs also carry out awareness generation activities and provide feedback to the government.

Another activity undertaken by the VOs which has some bearing on health care of children is promotion of Traditional System of Medicine (TSM). Since in most rural and remote areas people depend on ethnomedicine for common ailments, some VOs have been working on proper identification of herbs and medicinal plants, and their cultivation. The VOs also focus on identification of genuine TSM practitioners and development of their skills and awareness generation about the uses and values of TSM. It has been found
that 8 per cent of VOs under study are carrying on this activity in Kamrup district with financial assistance from Ministry of Health and Family Welfare, Government of India.

It has been found that a few VOs (11%) in Kamrup district are contributing to welfare of children also by organising and conducting trainings for grass root level child care functionaries. These VOs have been engaged in imparting trainings to field workers of both government sector programmes as well as programmes of voluntary organisations. One of these VOs is running three training centres for training of Anganwadi workers. The Anganwadi workers are the grass root functionaries of a government programme called Integrated Child Development Services (ICDS) Scheme focusing on the mother and the child. The Department of Women and Child Development, Government of India and the Department of Social Welfare and Probation, Government of Assam are the implementing agencies of the ICDS scheme. These two Departments have entrusted this particular VO with the responsibility of training the Anganwadi workers. The VO not only trains the workers of Kamrup district, but also cover the workers of other districts of Assam too. The other VOs having such training activities usually target the functionaries of voluntary sector through their training programmes. All these VOs impart trainings on various aspects of mother and child care like health, nutrition, pre-school education, community mobilisation, etc.

An innovative programme called Khoj is being implemented by one of the VOs of the study sample in Kamrup district. Khoj is actually an integrated programme which combine health care initiatives with income generation among rural populace. It has several components like health care of community with emphasis on women and child
health, sanitation, income generation and preservation of environment. Under this
programme the VO has set up 10 centres in twenty villages covering about 1000 families
at Dimoria Development Block in the district. Each of these centres organise health
checkup camps, maternal and child health services, health education and also income
generation activities through self help groups. Assisting people to adopt low-cost
methods of sanitation and motivating and guiding community for preservation of their
environment are two other important aspects of the programme. This programme is
implemented by the VO with financial and technical support of Voluntary Health
Association of India.

(e) Other Educational Programmes for Children

Quite a large number of VOs in Kamrup district are engaged in various
educational activities for children. Discussions on Pre-school Centres run by a few VOs
have already been incorporated in section 2.(a) of this chapter. In this section it is
intended to highlight the other educational programmes for children undertaken by the
VOs. These include running primary, middle and high schools, infrastructure
development of village schools, sponsoring education of children by providing text
books, dresses and school fees of poor students, library/book bank services for needy
children, conducting moral education classes for young children, organising free
coaching for school students, etc.

It has been found that a total of 4 VOs (11%) have established schools for
children. While 2 VOs (5%) are running schools upto primary level, one VO (3%) is
managing a middle english (M E) school for girls. The fourth VO (3%) again is running a
primary as well as a high school. All these schools cater to students in remote areas of the
district and admit poor children of the areas where those schools are functioning. All
these VOs are managing the schools with their own resources collected mainly through
donations. One of the VOs, however, is receiving financial support from the organisation
Child Relief and You (CRY), Kolkata. This particular VO is running the primary schools
following the methodology evolved by Vikramshilla Education Resource Society
(VERS) of Kolkata for all round development of the children.

It has come to light that one of the VOs (3%) under study has undertaken
extensive programmes for improving the infrastructure of the schools located in some
interior areas. Accordingly the VO constructed approach roads to the schools, built stairs
leading to school premises located in hilly areas, arranged for essential facilities like
drinking water, toilets and also provided furniture and fixtures for the schools. A small
number of VOs (16%) in the district are also helping poor children in pursuing education
by paying their school fees and by providing them with text books, other materials and
also the school dresses. Usually all these VOs offer such helps to those students who are
meritorious and show good results. Often these VOs discontinue their aids if the students
cannot produce good results and fail to get promoted to next higher classes. One of the
VO, however, has made a more systematic approach to help needy students. This VO has
identified the school going or school age children of poor families in a particular rural
area of the district where it is operating. After assessing the needs of these children and
the expenditures involved for helping them, the VO has mobilised the resources through
various means. Thereafter, it has been covering the children of the area in a gradual
manner depending on their needs and also availability of funds. The VO has motivated a
good number willing donors to sponsor the education of these children in a regular manner. The VO through its community coordinators regularly follow up the performance of these sponsored children and counsels the students and their parents. It also keeps communicating the sponsors about the progress of the sponsored children.

Imparting moral education to children is another programme which a few VOs (10%) of the study sample are engaged in. Through different activities these VOs aim to inculcate a high moral standards among the children and teach them to tread the path of truth, love and honesty. Some of these VOs also seek to infuse the spirit of nationalism, patriotism and also to develop an attitude of respect towards traditional values of Indian society among the children. With these objectives the VOs organise lectures, discussions, story telling sessions based on lives and works of famous personalities of the world as well as India and also on Indian Freedom Movement. At times, the VOs also encourage and guide the children to engage themselves in some socially useful productive works like cleaning their school premises, community halls or other public places, plantation of trees, etc.

Organising free coachings for students studying in various classes is another activity undertaken by 10 per cent of VOs. These VOs organise the coachings on various subjects for poor students free of cost. In some cases, the coaching classes are conducted by the members of the VOs themselves. However, on those occasions when the members cannot conduct the classes, the VOs hire the services of qualified teachers by paying them an honorarium. At times the VOs also motivate and mobilise some teachers to render free services for the students. Text books for school going children are provided
on loan through library/book bank services by 3 (8%) VOs. These VOs collect text books of different classes from passed out students and keep them in their libraries/book banks. Needy students can borrow these books for a session and then have to return the books after passing out from the particular class. Of course, on certain occasions several such students studying in the same class have to exchange the books amongst themselves as adequate copies of the same book are not always available to be borrowed by each student separately.

(f) Recreational Activities for Children

Activities for recreation of children are considered vital for their all round development. Thus, voluntary organisations have been involved with such activities since long past. In the present study it has been found that some of the VOs incorporated avenues for recreation as a part of certain other programmes for children. For example, services for disabled children or orphaned and destitute or street children invariably included components for recreation of such children. On the other hand, there are quite few VOs (29%) which organise recreational activities as a core service for all children of community. The various recreational activities of the 29 per cent of the VOs are discussed in the following paras.

Games and sports are the most popular form of recreation for children. Therefore, a good number of VOs organise sporting events for children, some of them regularly and some occasionally. It has been found that 16 per cent of the VOs have procured equipments for different indoor and outdoor games and encourage the children of the village/locality to play these games by providing them with the equipments. At times the
adult members of the VOs also take part in those games and coach the children. On special occasions like during the celebration of Children’s Day or other National Days or Annual Day function of the VOs and also during local festivals many of the VOs organise sports and athletics competitions amongst the children.

A few VOs (18%) in the study sample are providing opportunities to young children to learn, practice and develop their skills in music, dance, dramatics, etc. It has been found that musical instruments and other materials are procured by these VOs for use by the young children. Often the VOs impart trainings to the children to improve their singing, dancing or acting skills. As in case of sports, music and dance competitions are held by these VOs on certain occasions. These VOs also encourage and at times, make necessary arrangements for the children trained by them to take part in competitions at various levels. Some of these VOs make extra efforts to enable the child artists nurtured by them to perform to wider audiences by taking part in musical functions or programmes of radio, television, etc. It could also be learnt that the child artist troupes of several VOs have earned accolades for their performances on different occasions. Drawing and paintings is another creative activity promoted by some VOs among children. It has been found that 11 per cent VOs hold drawing and painting competitions among children and distribute prizes to encourage the children.

It has been found that 2 of the VOs (5%) covered by the present study hold regular recreational sessions for children where a variety of activities are conducted. In one such VO the sessions take place every day in the afternoon for about 50 children in the age group 5 years to 17 years and the other VO conducts the session weekly on every
Sunday with 40-50 children of 5 years to 16 years of age. Children attending these sessions take part in activities like meditation, yoga, group games, recitation, debates, quiz, singing, fancy dress competitions, skits, etc. Children are also taken out on local excursions/trips to nearby places of importance from time to time. In case of both the VOs the sessions are conducted by the experienced members of the VOs. On certain occasions the VOs also invite some eminent persons from different fields to interact with the children and often to teach or guide children in some of the activities like yoga, recitation, etc. It has been observed that through these activities the VOs also make efforts to generate strong feelings of patriotism, nationalism and brotherhood amongst the children.

Summer holiday home camp is another recreational programme for children and 2 of the VOs (5%) under study organise such camps. In these holiday home camps children from different places and with different backgrounds live together under the same roof for a certain period and engage themselves in a host of activities under the guidance of senior members of the VOs. One of the two VOs invite children from not only Kamrup district but also from other districts of Assam through its district branches to join these camps. The other VO announces about holding such camps through newspapers and also other media and usually admit children of Kamrup district on first come first serve basis. In case of one of the VOs children between the age group 6-12 years only are allowed to join such camps. The other VO admits children of 7 years and above in such camps. The usual duration of the camps is for two weeks. During their stay in the holiday home children are assigned various tasks and taught to manage the day to day affairs of the camps on their own to promote self reliance among them. They are also engaged in
different creative and recreational activities ranging from music, elocution, debate, 
dramatics, holding mock parliaments, etc. Through these camps children not only can 
involve themselves in productive activities, but also get away from their routine lives and 
learn to live in groups meet new friends and above all, can have a lot of fun.

3. Strategies of the Voluntary Organisations for Planning, Implementation and Evaluation of Activities

Like any other organisation, VOs too adopt their own strategies for planning, 
implementation and monitoring their programmes and activities. Since VOs are supposed 
to be closer to the people and are flexible and democratic in nature, it is expected that the 
approaches of the VOs would be somewhat innovative, informal and people centred. The 
present study also sought to understand these operational aspects of the VOs of Kamrup 
district.

| Table 13 |

Factors considered by different VOs while planning programmes

<table>
<thead>
<tr>
<th>Factors</th>
<th>Number of VOs</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objects and ideologies of the VOs</td>
<td>21</td>
<td>55.00</td>
</tr>
<tr>
<td>Ideas of the members of the VOs</td>
<td>15</td>
<td>39.00</td>
</tr>
<tr>
<td>Suggestions of consultants/experts</td>
<td>09</td>
<td>24.00</td>
</tr>
<tr>
<td>Needs of community children</td>
<td>17</td>
<td>45.00</td>
</tr>
<tr>
<td>Previous experiences of the VOs</td>
<td>12</td>
<td>32.00</td>
</tr>
<tr>
<td>Consultation with community members</td>
<td>05</td>
<td>13.00</td>
</tr>
<tr>
<td>Existing government programmes/schemes</td>
<td>15</td>
<td>39.00</td>
</tr>
</tbody>
</table>
It has been found that the VOs take into consideration certain factors while planning their programmes. Table 13 makes it amply clear that the VOs are influenced by several factors at the time of selecting and formulating the programmes. A large number of VOs (55%) are guided by the objects and ideologies of the concerned organisations in this respect. Thus, while formulating the programmes these VOs keep in view their objectives and ideology, over and above other considerations. Needs of community’s children is another important factor that prompts VOs to undertake certain activities as found in case of 45 per cent of the VOs of the present study. Fairly good number of VOs (39%) of the study sample also depend on personal ideas of leading members of the organisations for programme planning. An equal number of VOs take into account the existing government programmes and schemes, besides other factors at the time of deciding their own agenda. Experiences of the previous projects undertaken by the VOs are invariably recalled and analysed by some of the VOs (32%) to plan their present programmes. As the table 13 depicts, less that one fourth of the VOs involve outside consultants or experts in the planning process. Table 13 also shows that very few VOs plan programmes in consultation with community members. This goes on to prove that although VOs are considered as being closer to the people, yet only a very small section of them actually involve community members in planning programmes.

Assessment of the needs of the target groups is an important prerequisite for effective planning of the intervention programmes for welfare and development. It is imperative that the VOs working for children too carry out some exercises to understand the needs of the children in their respective areas of operations. Investigations revealed that only 29 per cent of the VOs covered by the study undertake systematic need
assessment exercises. These VOs utilise various methods for this purpose like conducting baseline and mid course survey, systematic observations, close interaction with different sections of the community through home visits, small group discussions, etc. Some of the VOs also collect relevant information from various government and non-government agencies working in the area. A few VOs (5%) also reportedly use modern community based methods like Participatory Rural Appraisal (PRA) and Participatory Learning and Action (PLA) for assessing the needs and problems of children of an area and also to decide on the course of action to be taken. Majority of the VOs (71%), however, do not generally go for any need assessment exercises but rely more on the experiences, ideas and knowledge of the numbers and the personnel. As many of the VOs are operating at local level and as their members and personnel also usually hail from the same area, the VOs are generally well conversant with the local situation. Therefore, these VOs do not feel that any particular need assessment activity is required.

Table 14

<table>
<thead>
<tr>
<th>Nature of support</th>
<th>Number of VOs</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial assistance</td>
<td>30</td>
<td>79.00</td>
</tr>
<tr>
<td>Technical</td>
<td>21</td>
<td>55.00</td>
</tr>
<tr>
<td>Materials and equipments</td>
<td>15</td>
<td>39.00</td>
</tr>
<tr>
<td>Information</td>
<td>27</td>
<td>71.00</td>
</tr>
</tbody>
</table>
For smooth functioning to achieve their objective, and also for ensuring appropriate implementation of their programmes VOs have to invariably interact and coordinate with various government and non-government agencies including other VOs of similar nature. Such interactions and coordinations amongst these different organisations serve the interest of all. Voluntary organisations with their limited human, financial and other resources particularly benefit from such a process. The VOs working for child welfare in Kamrup district too coordinate with a large number of government/statutory bodies and other VOs. Through such coordination the VOs reportedly receive various kinds of support for carrying out their activities. Table 14 shows the nature of supports received by different VOs due to interactions with government bodies and non-government agencies working in allied fields. As reflected in the table financial assistance is the commonest form of support received by the VOs. Obviously, it is also the most important support required by the VOs for programme implementation. Information, data on issues/subjects related to their activities are the other kinds of support obtained by a large majority of VOs through their interactions with government and voluntary agencies. Technical support extended to more than half of the VOs covered by the study comes mainly in the form of training, technical know-how for programme formulation and management, etc. Materials and equipments required for programme implementation are also received by some of the VOs (39%) as another type of support from different government departments and other voluntary organisations. The selected VOs of the present study reportedly interact with various government departments like Social Welfare, Health and Family Welfare, Education, Field Publicity, Women and Child Development, etc. both at the level of State and Central Government. A statutory
body with which almost all the VOs frequently interact is the ASSWAB because it provides grants to the VOs. Some other institutions with which VOs maintain functional relationship are Rehabilitation Council of India (RCI), National Institute of Mental Health and Neuro Sciences (NIMHANS), NIPCCD, NIRD, CAPART, Khadi and Village Industries Commission (KVIC), CSWB, etc. VHAI, Child Relief and You (CRY), Rehabilitation International, Spastic Society of Eastern India, SOS International, etc. are some of the prominent national and international VOs with whom the VOs working for children in Kamrup district coordinate. Besides, all these VOs also maintain relationships with other VOs working in the district and the state. As can be understood from the above discussion, such relationship immensely help the VOs in planning and executing their programmes.

Voluntary organisations usually entrust the responsibility of implementing a particular programme to one or more selected person(s) of the organisations. The persons(s) may be office bearer(s) or executive member(s) or ordinary member(s) of the VO. Very often, for implementing certain programmes, particularly the long term programmes, VOs hire the services of some persons against payment of honorarium or salary. Successful implementation of a programme launched by a VO depend, to a large extent, on the performance of these functionaries. Therefore, the VOs devise their own system of monitoring and supervising the performance of the persons responsible for programme implementation. In the present study attempt was made to examine a few aspects of monitoring and supervision of functionaries by the VOs.
Table 15

Authorised supervisors in different VOs

<table>
<thead>
<tr>
<th>Supervisors</th>
<th>Number of VOs</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Designated Office Bearer</td>
<td>21</td>
<td>55.00</td>
</tr>
<tr>
<td>Executive Committee</td>
<td>14</td>
<td>37.00</td>
</tr>
<tr>
<td>Designated Sub-committee</td>
<td>03</td>
<td>08.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>38</strong></td>
<td><strong>100.00</strong></td>
</tr>
</tbody>
</table>

In all organisational set ups a person or a group of persons are entrusted with the responsibility of supervising the other functionaries. In voluntary organisations usually some office bearers or the executive committee and at times, some smaller sub-committees act as supervisors of the functionaries. It can be seen from table 15 that amongst the majority of the VOs covered under the present study designated office bearers of the VOs like the President, the Secretary, the Joint Secretaries, etc. supervise the other functionaries. In a large number of the VOs (37%) the Executive Committees are empowered for this purpose and only in a very few VOs sub-committees are constituted and have entrusted with this particular responsibility.

Reporting by the functionaries to their controlling authorities on various aspects of implementation of a programme/project is an important element for management of the programme. Depending on the type of organisation and nature of activities reporting may be verbal, written or both. Table 16 shows the mode of reporting followed in different VOs for the functionaries to report to their respective controlling authorities. It
can be observed from the table that both the system of verbal and written reporting are practiced by the VOs. However, majority of the VOs insist on written reports from the functionaries over and above any verbal communication. Comparatively fewer VOs rely on only verbal reporting. Predominance of the system of reporting in black and white also indicate that many VOs now are adopting some practices for systematic management of the VOs and also that, the informal aura of the VOs is gradually diminishing. The period prescribed for such reporting differ from VOs to VOs and also depend on the mode of reporting. It has been learnt that in majority of the VOs written reports are sought monthly or quarterly. On the other hand, no fixed period is usually followed for verbal reporting and it is done as when necessary or asked for.

Table 16

Mode of reporting by functionaries to supervisors/controlling authority in different VOs

<table>
<thead>
<tr>
<th>Mode</th>
<th>Number of VOs</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Verbal Report</td>
<td>8</td>
<td>21.00</td>
</tr>
<tr>
<td>Written Report</td>
<td>12</td>
<td>32.00</td>
</tr>
<tr>
<td>Both Verbal and Written Report</td>
<td>14</td>
<td>37.00</td>
</tr>
<tr>
<td>No system of reporting</td>
<td>04</td>
<td>10.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>38</strong></td>
<td><strong>100.00</strong></td>
</tr>
</tbody>
</table>

Evaluation is considered an indispensable component of management of any programme. Evaluation is a process through which strength and weaknesses of a programme and its impact and effectiveness can be gauged by applying certain criteria.
Evaluation enables the programme managers to continuously improve the quality of the programmes undertaken. It is expected that voluntary organisations too carry out some kind of evaluation exercises for their programmes for introducing necessary modifications/rectifications for enhancing quality of programmes. In case of the present study it has been found that in 68 per cent of VOs programme evaluation exercises are undertaken. In rest 32 per cent VOs no evaluation of the programme is conducted. The evaluation of the programmes of the VOs are generally carried out by different agencies. Sometimes the fund giving bodies evaluate the programmes sponsored by them. Often the VOs themselves conduct the evaluation. On certain occasions community members are also involved by the VOs in the evaluation exercises. In some cases evaluations are conducted by several agencies in the same VO. Data revealed that in 47% per cent of the VOs evaluations are done by the funding agencies to see whether the programme sponsored by them are being implemented properly or not and has had the desired impact upon the target group or not. The VOs themselves or their parent agencies carried out evaluation in 34 per cent of the VOs. Again, in 34 per cent of these VOs both the sponsors as well as the VOs themselves carried out programme evaluation. Community members have been involved in conducting evaluation in 16 per cent of the VOs. It may be mentioned here that the evaluations by the funding agencies are usually done methodically, but the evaluations initiated by the VOs are not always methodical. It has been found that evaluations of the programmes of the VOs under study are conducted at different stages. Data reflected that in 34 per cent of the Vos mid-course evaluations are conducted, that is, evaluations take place while the programme is still going on. In 21 per cent of the VOs evaluations are reportedly carried out at the conclusion of a programme.
whereas in 13 per cent of the VOs evaluations are done while implementing the programme as well as when the programme comes to a conclusion. Investigations revealed that mid-course evaluations are mostly conducted in case of those VOs whose programmes for children are long term and continuous in nature. In some VOs which are involved in projects for children spanning a fixed term or period, evaluations are done mid-course and also at the end of the project. The VOs that take up short term and occasional programmes for children generally evaluate the activities when they are over. In may also be mentioned here that amongst the VOs selected for the present study, there are some VOs which undertake several different programmes for children. But the concerned VOs do not necessarily evaluate each and every programme. Evaluations are carried out for certain selected programmes only.

It has already been mentioned in Chapter IV that the majority of the VOs working for children in Kamrup district also serve other sections of community. Thus, these VOs are engaged in a host of other activities besides child welfare. The VOs have undertaken such programmes in various sectors like health, education, income generation, community development, etc. Some of the activities undertaken by these VOs in the health sector other than the maternal and child health programmes include, prevention of HIV/AIDS, rural sanitation, blood donation camps, vaccination against Hepatitis B, welfare of Leprosy and Cancer patients, etc. The major activities taken up by the VOs in education sector are adult and non-formal education, developing Information, Education and Communication (IEC) materials, organising condensed courses of education for school drop outs, library services, youth camps, etc. A major chunk of the VOs are involved in diverse activities for uplifting the economic condition of women as well as
other weaker section of community. Vocational training in different income generating activities, formation and mobilisation of self-help groups (SHGs) among women, entrepreneurship development, micro-credit, etc. are some such programmes of the VOs. Besides, the VOs are also carrying out various community development programmes like awareness generation, family counselling, social justice and advocacy, infrastructure development in backward areas, emergency and relief work during men made and natural calamities, preservation of environment, so on and so forth. It may, however, be noted here that although these activities are not primarily aimed at children, yet benefits of some of these programmes are accrued to children also in an indirect manner.