

Retrospective: April 2023 - March 2024

Reflections, Learning, Impact, and the Future





ONE BILLION LITERATES FOUNDATION CREATING A CHANCE AT LIFE



Editorial

It has been OBLF's and my commitment to keep periodically communicating to you about our work, our impact and our journey. I hope you have been receiving our updates along the way.

As we approach the close of yet another academic & financial year, we look back at our work in a spirit of learning.

Each year we say that the current year has been like no other in the past. And it is so with the year 2023-24 as well. OBLF has experienced substantial growth and development. We have taken risks, pushed the boundaries, expanded our capacity, invested in emerging technologies, persevered and learned valuable lessons along the way

It's remarkable how quickly time flies when we're fully engaged in our work, tackling obstacles head-on, and continuously learning and evolving.

Together, we've overcome hurdles, seized opportunities, and made a difference in the lives of those we serve. The outcomes we are driving are a testament to the dedication and hard work of everyone involved. Let's carry this excitement forward as we embark on yet another year, knowing that we have the capability and determination to continue making a meaningful impact.

Here's to another year of growth, challenges, learning, and most importantly, making a difference.

Cheers to the future and all the possibilities it holds!

Anish Ramachandran CEO (Hon.)



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Building A Continuum Of Public Healthcare Access

Context & Background

Our Public Health Journey started in mid-2021 as a direct outcome of our experience during the Covid 19 pandemic, and seeing first hand how fragile the public health delivery system was – especially as it related to rural, under-privileged segments of our population.

The last two years of our work in Public Health has been focused on enabling access to primary healthcare, with a laser sharp focus on mitigation and prevention of Cardio - Vascular diseases through early screening, detection and treatment of Hypertension and Diabetes. Our approach has been to truly live into our vision of enabling a community-centric model which keeps the community and the patient at the center of our approach.

Needless to say, we have learnt much along the way. Equally importantly, we have validated the hypothesis that a community centric care model is possible – and critical to ensure that India's healthcare system delivers what is needed on the ground.

OBLF's experience has also resulted in significant other insights. Insights that have been possible only because of our consistent, untiring presence on the ground. And this is what you will see in the following pages. Read on to understand our work in Public Health, and the promise of the journey ahead.

The Twin Problems

- The rural / Peri-Urban population of Anekal Taluk is constrained by public healthcare that is not accessible, not available, not acceptable, and not affordable.
- Nestled within this problem is a larger healthcare crisis that points to rising cardiovascular diseases [CVDs], and preventable strokes – caused by lack of access to screening, diagnosis and treatment for Non-Communicable Diseases NCDs]

Solutions we Strive for

- Create and execute a proof of concept for primary healthcare that is accessible, acceptable, affordable, and predictable – to vulnerable households and communities.
- Reduce preventable cardiovascular diseases and strokes.
- Reduce Out of Pocket Expenditure

Outcomes We Drive

- 1. Conducting regular village clinics for cardiovascular diseases & cancer early detection, screening and treatment.
- 2. Regular house-to-house follow-up visits by our Community Health Workers to encourage increased screening and monitoring of medical protocols drive adherence.
- 3. Deeper insights into rural health dynamics through active screening and other health system interventions.
- 4. Treatment, monitoring and follow-up of Patients, including referrals for Secondary and Tertiary care
- 5. Reduced Out-of-Pocket Expenditure for these populations.

Insights from our Work

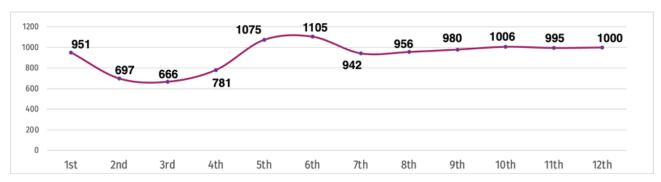
An executive summary

A plethora of research on Primary Healthcare deems it as subjective, complex and multidimensional. A holistic healthcare framework places focus on monitoring the availability, accessibility, affordability, acceptability, and appropriateness of healthcare. OBLF's Public health model integrates this robust framework with community mobilization by placing the community at the centre of our activities in Anekal.

There has been a noticeable shift in community sentiments and collective awareness around accessing timely healthcare and treatment. Quality screening and treatment, home visits, telephonic conversations, in-person counselling at clinics and dismantling of patientpractitioner power dynamics have transformed our clinics into spaces of community gathering & learning - where patients have now reclaimed the onus of their healthcare and voluntarily show up to clinics for screenings, treatments & follow-ups.

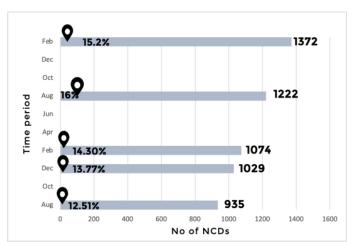
The frontline healthcare workers have been instrumental in deepening community ties, monitoring individual healthcare status across households & instilling a sense of awareness & confidence in other women in the community to access primary healthcare services. Women can discuss their sexual reproductive health concerns with the FLWs with the utmost privacy.

Clinics and Consultations



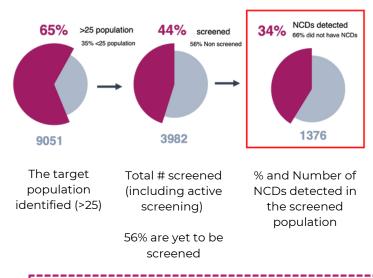
In approximately 12 clinic cycles, we have conducted over 360 clinics covering the panchayat, and a cumulative of 11,154 patient consultations have been done until Feb 2024.

Prevalence of NCDs August 2021-Feb 2024



- Prevalence of NCDs refers to the number of NCDs as a percentage of target population at a specific point in
- The prevalence trend affirms our hypothesis that greater screening will drive higher detection & treatment of NCDs.

NCD Screening & Detection



Additionally, nearly 19% of the screened population is pre-diabetic and/or pre-hypertensive. They are classified



OBLF & Public Health

What does the next year hold for us?

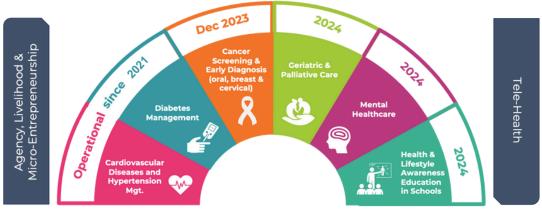
In the course of this work on primary care and NCDs – OBLF has identified complex challenges faced by older persons, those with Life Limiting Illnesses [LLIs]. It is often the bleakness of their existence and the air of constant uncertainty of the future that serves as the origin of mental health issues in these communities. The prevalence in this population of anxiety, depression, loneliness – and their intersectionality with the other issues, adds to the complexity of managing primary care in rural, constrained settings.

Based on this deep contextual understanding of the situation on the ground, OBLF's hypothesis is that there is a need for integrated care approaches leading to meaningful outcomes in this group, and that this should be a comprehensive approach that both promotes wellbeing and alleviates suffering.

Mental health cannot be considered in isolation from culture and community. Older individuals often face complex health issues, including chronic illnesses and mental health concerns, requiring comprehensive geriatric and palliative care due to the prevalence of chronic progressive and life-limiting conditions. Mental health issues are common in the elderly, especially in the context of chronic illness, isolation, and end-of-life care.

Overcoming stigma and promoting awareness of mental health needs is crucial in geriatric and palliative care, and a Community-based model is not only more appropriate but also sustainable.

With a model that has well-established its efficacy within the ambit of public healthcare, we now continue to build on our continuum of healthcare, expanding into cancer screenings (Oral, Breast, and Cervical), geriatric and palliative care, and mental healthcare. We are also working on a model for promoting health awareness and education within the community and schools.



EQUITABLE PRIMARY HEALTHCARE ACCESS

Building Foundational Literacy & Bridging Learning Deficits

Context & Background



Our hypothesis of driving a combination of learner-centric models of curriculum, and investing deeply in teacher proficiency has been validated, with a significant upward shift in **student proficiency by 16.5%.**



Complementing Classroom Learning with highly contextualized learning activities using Educational Tech (Tablets/Gamified Content) drives learning acceleration. **Improvement of 28.5**%



Statistical analysis of assessment scores shows a clear increase in learner proficiency across language skills [Listening-Speaking-Reading-Writing] as they move up the Cambridge proficiency levels.



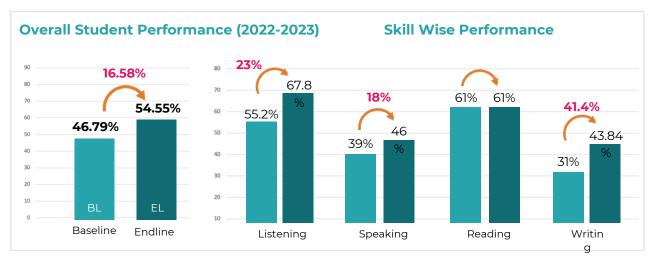
Multiple critical factors play a role in student learning outcomes: Teacher Proficiency, Quality of Curriculum, School Infrastructure, Teacher-Student ratio, and Regular Student Attendance.



Increasing investment in teacher capability /proficiency and Advancing Curriculum Quality continues to be critical for OBLF.

Baseline-Endline: An Internal Study Insights from our Work

An executive summary



Inferences

- The overall baseline score for students across levels is 47% and the overall endline score was 55%.
- Student performance improved by 16.5% in the academic year (2022-2023).
- Listening and speaking have significantly improved. This can be attributed to the fact that our student population comprises students predominantly at Pre-A1 and the integration of Phonics into our curriculum.

Impact of Oblf's Intervention In Primary Government Schools: An External Study

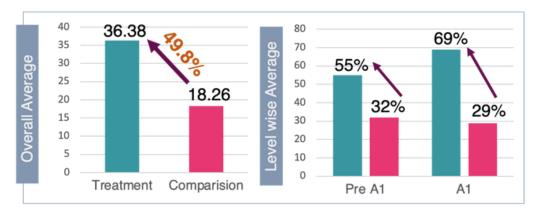
Study Hypothesis

Learners who are exposed to OBLF's CEFR-based levelled syllabus, curriculum, and model of instruction demonstrate significantly better English language proficiency as compared to learners in non-OBLF intervention schools.

Methodology

- A quasi-experimental, external study conducted by an independent social research organization, with field assessors and analysts who are in no way connected to OBLF or its operational model.
- Statistically significant and valid sample group comprising a 'Treatment group' and 'Comparison Group'- calculated using a confidence interval of 95% and an error rate of 5%.
- The treatment group comprises learners from OBLF partner schools for a min. of one year | The Comparison group comprises learners from schools who have had no partnership with OBLF.

Executive Summary



- Learners from OBLF partner schools scored on an average 49.8% higher than the learners from non-OBLF schools.
- The performance of learners from OBLF partner schools aka treatment group improves as their level goes up.

- Learners in the treatment group perform better than the comparison group across each of the components of the English language.
- In the two most challenging aspects of language adoption -Writing and speaking - the difference between the two groups is the highest.



Bottomline, This study conclusively validates the following:

- 1. Learners in OBLF partner schools have significantly higher English language proficiency than learners in non-OBLF schools.
- 2. The longer the learner stays in the program the higher the language proficiency, and the wider the gap between OBLF and non-OBLF learners.
- 3. Proficiency in productive skills of Speaking and Writing are markedly and significantly higher in learners from OBLF partner schools–relative to other components of Listening and Reading.
- 4. The scores validate OBLF's approach, methodology and emphasis on functional and productive English components in its syllabus and curriculum. This was a deliberate emphasis created as part of OBLF's shift to CEFR methodology 3 years ago.

Creating Livelihood Opportunities for Rural Women

Context & Background

Kickstart, our dedicated Teacher and frontline Health worker Professional Development initiative embodies the aspiration to spark an educational and health transformation in the heart of Anekal Taluk. The essence of the Kickstart program is about harnessing the potential of local women who are eager to contribute to their community. We recruit these enthusiastic individuals and provide them with comprehensive training, equipping them to effectively deliver our English Literacy Curriculum in government primary schools or work in our public health program as Frontline healthcare workers.

Teacher Training Track

- English Language Proficiency training course: Reading & Speaking focused
- Curriculum Mastery: Conducted for new teachers
- Pedagogy: Classroom Delivery
- On-field Coaching: Every teacher receives classroom visits and feedback

Frontline Health Worker Track

- Field visits to rural health missions
- Training on community health interventions
- Training on basic physiology and pharmacology

Professional Developmen

- Teacher's Collective: Training on Inclusive Education
- Teacher
 Conference
 (internal & external)
- Azim Premji
 Certificate courses
 & other English
 courses
- Tech Training, Child Safety Policies

Personal Development

- Financial Literacy (BUZZ Women sessions)
- Socio-emotional well-being (Snehadharal Foundation sessions)
- Menstrual Awareness & Gender (In-house sessions)

Sexual Reproductive Health & Rights in Rural Women Menstrual Awareness Program 2023-2024

About the Program:

Over the last 14 years, OBLF has been working closely with rural women, thus also making us privy to their gender struggles and social constraints. Their gender troubles range from a lack of access and awareness around health (menstrual, sexual, reproductive), domestic violence, differential care within the household, double burden of work and limited mobility and decision-making capabilities. These lived experiences have set the context for our gender vertical - which seeks to provide women access to critical information about the body, health & rights.

The first module under this program is menstrual awareness training. These sessions provide a safe space for women and men to discuss menstrual hygiene, debunk myths, and learn about sustainable practices. Through a series of interactive workshops, participants gain essential knowledge about the menstrual cycle, proper hygiene practices, and the importance of destigmatizing menstruation. Furthermore, the training equips women with the skills to make informed choices about menstrual products, fostering a sense of autonomy. The ripple effect of such training extends beyond individual women, creating a supportive environment that dismantles societal taboos and promotes a healthier, more informed community.

Curriculum Structure

ATTITUDES KNOWLEDGE PRACTICES #2 PRODUCTS & **#3 SIGNS & #4 LANGUAGE** #1 INTRODUCTION TO PERIODS PROCESSES DISORDERS AROUND PERIODS • Menstrual Products First Period/Period Stories

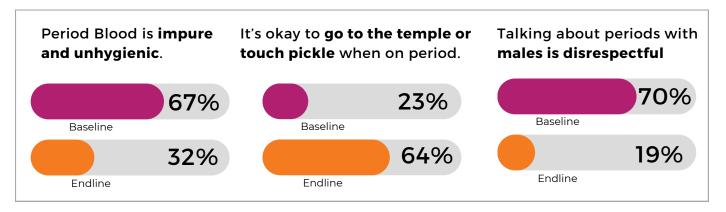
- & silence around Periods
- Internal External Female Reproductive System
- **Menstrual & Reproductive Processes**
- Myth Busting

- Disposal & Hygiene
- Menstrual Cycle & Period Planning
- Speaking to community members about periods
- Signs of the menstrual body - healthy periods & irregularities
- **Menstrual Conditions &** Disorders
- Nutrition & Self-care
- Language around Periods: Do's & Don'ts.
- Support during Menstruation
- Introduction to the Idea of a Period Leave

Outcomes we Drive

To capture a shift in perspectives & practices, a baseline endline was administered as well as FGDs with smaller groups.

A SNAPSHOT FROM OUR BASELINE-ENDLINE FINDINGS



- Participants can identify key features around the menstruation process, reproductive systems, menstrual products and disorders.
- Participants have shown a shift in perspectives around menstrual taboos, and women's experiences on their periods (men are more empathetic & women now focus on their own self-care and health needs when menstruating). There is open conversation around periods.
- There has also been a change in critical practices around menstruation such as disposal and hygiene management. Participants reduced/moved away from pad burning to more hygienic disposal forms. A lot of women participants also explored using other menstrual products such as menstrual cups and educated one another on their experiences.

What's Next For Us?

- We have introduced a period leave policy for all the female employees at the organisation. We will continue to operationalise it in 2024-2025.
- We will train select women from the cohort on disseminating menstrual education within their community - children and peer women. They will also receive gamified learning toolkits to conduct these sessions within their communities.
- This year, we extend the gender program in SRHR needs, family planning & socio-emotional well-being aspects.

Nurture: Rehabilitating Severely Marginalised Communities

Context & Background



Primary Healthcare & Sanitation

 Sustainable access to primary healthcare & shifting away from open defecation

Primary Education

- Designing and implementing innovative out-ofschool programs to enable learning & mainstreaming children into schools.
- Comprehensive Disaster Relief and Rehabilitation Including access to funds & materials for shelter & food security.

Outcomes We Drive

Trust & Goodwill

Education

Socio-Emotional Development

Health & Sanitation

- High levels of Trust & Goodwill with the local community & children.
- Predictability & Hope
- Willingness to listen. Ownership & Accountability.
- Established Basic Learning Skills in the Learning Center
- Mainstreamed learners to the Govt School. Enabled the shift to a formal system.
- Reduction in Grade-Gap: Bridging learners to age-appropriate grades based on progress.
- A higher degree of awareness and understanding of gender-related issues, sexuality, and gender roles.
- Clear progress in inculcation of critical social skills of Anger Management, Discipline, Ownership, and Accountability.
- 10 Toilets built
- Families moved away from Open Defecation. Self sustained maintenance.
- Bi-Weekly Primary Healthcare Clinics. Predictable access to Primary healthcare needs.







Sankalp 2024

Even as India needs its donor community to step up, it is equally imperative that non-profits take the initiative to step up themselves to create spaces where engagement can deepen, partnerships can flourish, and co-creation of charters can begin to take shape.

Sankalp is a platform and space to enable our eco-system of donors, partners, friends, and well-wishers to understand our work more deeply, to engage with our beneficiary partners even more closely, and to explore partnerships that are needed to address some of India's most pressing social issues.

It was held on the 19th of Jan 2024, at the Koramangala Club Auditorium, Bengaluru. We hope that the experiences and conversations from the event will provoke questions, spark imaginations, and hopefully drive partnerships that are needed to continue to enable meaningful social change.



Welcome Address by Anish Ramachandran, CEO (Hon.)



Vistas from an Immersive Experience: A reflective panel with a select group of OBLF's well-wishers sharing their firsthand experiences from ur project sites.



Verbal Ventures: A performative act in English by OBLF students on the real-world application of their classroom learnings.



Kenote Address by Ravi Sreedharan, Founder & Director of Indian School of Development Management



Brushstrokes of Fury: A Creative Arts Showcase The children from the waste picker community performed their personal stories around



OBLF and Me: Reflections Over the Years through a panel featuring long-time trustees, donor partners, and a community representative



Badalavane: Stories of Change, where teachers and supervisors share their stories of change



Nimma Kaiyalli Nimma Arogya: Public Healthcare on the Ground is a skit depicting our public health initiative and frontline healthcare workers' experiences.



Concluding Remarks by Anamika Majumder, Founder and Managing Trustee, OBLF.





The teacher created a vibrant rangoli with shapes, engaging Pre-Al students. Through handson matching activities, students developed 2D spatial understanding. Tangible connections to shapes in their environment fostered deeper learning.



Attended the Alpha to Omega conference on cognition, inclusion, and using music in teaching. Learned the importance of inclusive practices and promoting acceptance. Inspired to implement new techniques and grow as a teacher.



In July, the Huskur Government primary school two of our senior WPC children, Soni and Moni got the first prize high jump and long jump and were selected to represent the school in the Taluk level sports competition. Soni went on to win the third prize in the high jump event.



Shashikala, a frontline worker, led her team in using street theatre in collaboration with NSS students to raise awareness about hypertension and diabetes.



Witnessing the resilience and determination of Sharad and Maruthi, who faced challenges of muscular dystrophy and cerebral palsy respectively, we initiated monthly health check-ups and coordinated treatments at St. John's Hospital, covering expenses and provided both children with wheelchairs, to foster mobility.



Five teachers from our school have been selected for a certification course at Azim Premji University, marking their first formal higher education experience.



Looking Ahead to 2024-25

As we look forward to the upcoming our focus remains multiplying the impact of our work. For the first time in its 14-year journey. OBLF now actively is researching and exploring possibilities of expanding beyond Anekal Taluk. Our core values of community-centricity. and identifying meaningful ways deliver sustainable value to the communities we serve will continue to drive everything we do.

We will continue to actively listen to the needs and aspirations of the communities we work with. Through meaningful engagement and cocreation, we will develop initiatives that address pressing challenges and unlock new opportunities for growth and development. In the coming year, we will also continue to seek out opportunities for innovation and collaboration. As we pursue our mission, we will prioritize initiatives that not only deliver immediate benefits but also contribute building resilient and а more equitable future for all.

Come. Join us, in this journey.

Anish Ramachandran CEO (Hon), One Billion Literates Foundation