

# ***Awareness and Prevention of AIDS & HIV***

*The world at present feeling the rise in the population of aged people and this has attracted the global attention of scientists and social administrators. The number of old people in the world with an average age of 60 years or more already exceeds 350 million. The socio-psychological problems of aged and their management vary from society to society and also at different periods in the same society. Aging is substantially influenced by socio-cultural variations and the problems of aging can be well understood only through socio-cultural perspective. India's cultural and democratic setup demands a special treatment to this issue and the subject gained momentum with increased number of Social activists and NGO's plunging in setting-up Old Age homes, Day care centres, Counseling centers etc.,for the aged.*

*A sample project proposal for "Day Care Center for Old Aged" is given in detail under the heading of Age Care Center for the Old Aged".*

## **PROJECT PROPOSAL on "*Rehabilitation and Vocational Training of Commercial Sex Workers*"**

# PROJECT PROPOSAL

*on "Rehabilitation and Vocational Training of Commercial Sex Workers"*

## **Contents**

- 1. THE PROJECT - AN OVERVIEW**
  - 1.1. About the project
  - 1.2. Scope of the project & target group
  - 1.3. Objectives & Goals
  - 1.4. Social Acceptability
  - 1.5. Project planning & Methodology
  - 1.6. Standards
  - 1.7. Organisation and man-power
  - 1.8. Infrastructure
  - 1.9. Project cost & means of finance
  - 1.10. Implementation schedule
  - 1.11. Project evaluation
  
- 2. HIV AND AIDS IN INDIA**
  
- 3. PREVENTION AND CONTROL OF AIDS POLICY AND APPROACH**
  - 3.1. Prevention & Control of AIDS
  - 3.2. Need for setting up information centres on AIDS
  - 3.3. Policy
  - 3.4. Problems confronting health
  - 3.5. Approaches
  
- 4. PROJECT PLANNING & METHODOLOGY**
  - 4.1. The Project
  - 4.2. Target Group
  - 4.3. Methodology
  
- 5. ORGANISATIONAL SET UP AND INFRASTRUCTURE PLANNING**
  - 5.1. Infrastructure
  
- 6. ORGANISATION & MAN POWER**
  - 6.1. The organisation
  - 6.2. Organisational Chart
  - 6.3. Schedule of salaries & wages
  
- 7. PROJECT COST & METHOD OF FINANCING**
  - 7.1. Project Cost
  
- 8. VIABILITY ANALYSIS**
  - 8.1. Basis & Presumption
  
- 9. PROJECT IMPLEMENTATION SCHEDULE**
  - 9.1. Implementation schedule
  
- 10. EVALUATION AND IMPACT ANALYSIS**

# 1

## Project - An overview

### 1.1. About the project

This project is aimed at establishing a "Rehabilitation cum Vocational Training Centre" for commercial sex workers with an initial capital investment of Rs. 26,00,000. The activities like educating the sex workers about HIV/AIDS, dissuading them from the heinous profession and rehabilitating them into a respectful, income generating activity through vocational training, forms integral part of this scheme.

### 1.2 Scope of the project & target group

India has the largest HIV infected persons amongst the South East Asian Countries and it spreads mainly among young and reproductive age groups. The World Health Organisation, in its recent survey warned that around 7000 young people get infected with HIV everyday; and the impact of death would be mainly on productive population of the country. Millions of productive lives can be saved if the people are properly educated about this killer disease and persuaded to abstain from having multiple sex partners and unsafe methods of sex. The Global Health Council in its survey organized in various metros and other important cities of India revealed startling facts that around 85% of commercial sex workers in the country serves the lower strata of population consisting of illiterate and ignorant mass like Truck and Taxi drivers, Rickshaw pullers, Mill worker, Mine workers, Migrant labourers and a variety of other slum dwellers. They ignorantly abstain from taking precautions and innocently get infected. These sections of the society are called the most potential carriers of this killer virus and unless they are tackled and restrained from enjoying the forbidden fruits or at least dissuaded to have fair and safe sex, there will be no salvage for the issue.

The basic approach of this programme lies in tackling root cause of the problem, the commercial sex workers, who are highly vulnerable and the most potential carriers of this disease. For the last few years, it is pertinent to note that various NGOs, Govt. organizations, health care providers and community leaders are working in complimentary ways in this direction and various National and International Agencies like Ministry of Health and Family Welfare, Department of Social Welfare, Department of Urban Development, World Health Organisation, UNAID, AIDSINDIA, Global Health Council etc. and supplementing their initiatives through funding and other support services.

A variety of programmes ranging from awareness, field publicity campaigns, documentaries, condom dispensing centres, rehabilitation cum vocational training centres for commercial sex workers, day care centres for the children of commercial sex workers, terminal care homes etc. have been initiated with tenacious approach by various NGOs at various parts of the country. There is a scope for undertaking tenacious intervention in a tangible way through institutionalized service to commercial sex workers who are considered the root cause for the menace.

This programme will be targeted at the commercial sex workers operating in urban slums.

### **1.3 Objectives & Goals**

The basic objectives of this programme are:

- To provide an opportunity to the commercial sex workers to join the mainstream of life by reorienting their attitudes.
- To provide them an opportunity to learn productive pursuits for developing an alternative income.
- To provide basic facilities for short stay, improve literacy, pursue vocational training for income generation activities.
- To provide institutionalized support to redeploy the sex workers in honorable trade related entrepreneurial activities.
- To undertake awareness activities on prevention of HIV and AIDS and to inculcate the community responsibilities amongst the development partners.

With all these broad objectives in mind, this project is proposed to set up "Rehabilitation cum Vocational Training Centre" for commercial sex workers.

### **1.4 Social Acceptability**

Over the years, several initiatives have been taken by the development planners to create awareness among the general public about HIV and AIDS consequent to which several literate people are acquainted with the facts of this disease. A number of national and international agencies undertook tenacious campaigns involving slum dwellers, commercial sex workers and the potential carriers. The programmes, backed by massive media campaign and publicity lead to an increased inclination on the part of commercial sex workers to quit the heinous profession and search for alternative means of living. Realising the growing needs for rehabilitation and redeployment of these sex workers, several initiatives have been suggested by various developmental agencies. These initiatives clubbed with welfare of the children of commercial sex workers received well from all quarters.

## **1.5 Project planning & Methodology**

This project is an integrated approach for welfare of commercial sex workers and it comprises of the following activities.

- a) Counseling
- b) Rehabilitation
- c) Redeployment

The rehabilitation encompasses various other activities like vocational training in simple trades with vast potential for self-employment, short stay home, health and recreation. The redeployment includes the activities like post-training counseling, escort services for setting up individual/group income generation activities and institutional linkages.

Apart from the above, this project will also undertake "Sensitization programmes" for advocating the cause of rehabilitation and redeployment of these reformed sex workers amongst all social partners.

A detailed approach and programme methodology is discussed at chapter - 4 of the proposal.

## **1.6 Standards**

There are statutory provisions on minimum standards as contained in "Women and Children's Institutions licensing act - 1956 which was subsequently repeated by "Orphanages and other charitable institutions (supervision and control) act of 1961 (Appendix - iv). The department of social welfare will monitor the center from time to time.

## **1.7 Organisation and man-power**

The overall superintendence of the project will be handled by the Executive Secretary of the Implementing Agency and he/she will be the Project Director. He will derive all necessary technical and advisory support from a Project Advisory Committee constituted with members from implementing agency, funding agency, civil administration, social welfare department, social worker, local leader and journalist. The day-to-day administration of the centre will be carried out by the Project Director with the assistance of ministerial and other supporting staff employed as per the details given at Chapter - 7 of this proposal. The service of certain external personnel like doctors, counselors etc. will be empanelled as contract basis.

## **1.8 Infrastructure**

The project will be requiring adequate land to accommodate the short stay home, vocational training cum production centre, community hall/recreation centre around 4840 sq. yds and the site will be required at some good location with close proximity to health, education, recreation and other basic facilities. Security is prime concern for this sort of projects and hence the project should not be located at far-off and isolated places from the town/city.

Apart from the usual civil structures, the project will be requiring some tools and equipment for imparting vocational training. Other basic infrastructure for comfortable stay of the inmates like cots, furniture, recreational equipment etc are also required.

A detailed note on components of infrastructure and their break-up schedule is given at chapter - 5 of this proposal.

## **1.9 Project cost & means of finance**

The project "Rehabilitation cum vocational training center" for commercial sex workers is conceived with an initial capital investment of Rs.26,00,000/- out of which an amount Rs.21,75,000/- is required to finance over the fixed costs while an amount of Rs. 4,25,000/- is required as a start-up capital to meet the recurring costs for an initial period of six months. Though the recurring grant is available for an initial period of 1 year, the center is expected to generate enough surplus from it's internal resources out of productive activities to meet the overheads from the 2nd and later years there on.

A detailed break-up of cost schedule is given at chapter - 7 of this proposal.

## **1.10 Implementation schedule**

This project is proposed to take off within a period of 12 months from the date of initiating effective steps. The break-up of activities and their schedule of implementation is given at chapter - 9 of this proposal.

## **1.11 Project evaluation**

The programme will be monitored at regular intervals through the Project Advisory Committee consisting of the project leader as member secretary and other resource persons drawn from medical, civil administration, social welfare, women development Financial Corporations, economic and media. This committee would meet periodically once in three months and advise the implementing agency on various issues concerning implementation and review of the project. The committee will also review the accounts and audited statements of the implementing agency.

# 2

## HIV and AIDS In India

### Scope for Interventions

India is in the midst of an epidemiological and health transition wherein diseases of affluence and new environmental and behavioural threats are being added to the already burdened morbidity due to communicable diseases and malnutrition. Multiple factors have been involved in India's health transition including aging of population, urbanization, migration, changing life styles and impact of health interventions. Rapid urbanization is bringing in serious health problems that will require different strategies from these that have been used to implement health care in rural areas. Health among the urban poor has received much less attention from policy planners than rural health despite the fact that the living conditions in some of the slums are among the worst in the world. However, several NGOs have developed models for urban health care that could provide useful lessons for planning programmes. The frontiers of voluntary action are likely to change with emerging health needs and will unfold new dimensions of volunteerism. The emergence of explosive AIDS epidemic and the rising incidence of sexually transmitted disease are posing new challenges in health care. In India Non Governmental Organisation are at forefront trying to address the multiple medical, social, legal, ethical and policy dimensions to AIDS problem. New strategies, innovative approaches and different service delivery packages will have to be evolved to address the needs of various high risk groups including women in prostitution, their clients, drug abusers, migrant workers and youth. There is a growing demand on NGOs to respond to these new challenges.

As the AIDS epidemic spreads, it will have a profound social impact because AIDS affects not only health care delivery system but other fields as diverse as law, ethics and economics and every aspect of society is likely to be affected. The impact of AIDS will intensify in the coming years and the ways in which the society responds will affect it's spread. Community based response will be needed to address a range of sensitive issues such as sexuality, gender roles and family relationships. And since the foreseeable future, changing sexual behaviour is the only available intervention for its prevention and control, organizations that are close to people and can work most efficiently with populations that are specially vulnerable, will have an important role to play.

Realising the importance of the role of NGOs, several National and International Agencies like Ministry of Health and Family Welfare, World Health Organisation, Global Health Council, Global Fund for fighting AIDS, TB and Malaria etc., are extending need based funding support to tenacious and tangible interventions in this direction.

Several interventions like awareness on preventive care, audio-visual publicity, free distribution of condoms, counseling centres, day care centres and terminal care homes etc. have been initiated by several governmental organizations over the years.

But still much has to be done for bringing rapid and desirable change in sexual behaviours of vulnerable groups.

# 3

## **Prevention and Control of AIDS Policy and Approach**

### **3.1 Prevention & Control of AIDS**

As enumerated in earlier chapters, changing sexual behaviour is only the available intervention for prevention of this killer disease and community based response is the need of the hour to address a range of sensitive issues like sexuality, gender role and family relationships.

Setting up information centres to educate the vulnerable population and tenacious approach to accomplish their attitudinal changes and sex behaviour, sensitization of social partners and inculcating community responsibility are a few basic interventions required to prevent the epidemic.

### **3.2 Need for setting up information centres on AIDS**

There is a need for educating the vulnerable population of this country because:

- India has the largest HIV infected persons amongst the South East Asian countries.
- AIDS spread mainly among young and reproductive age groups
- The impact of their death would mainly be on the productive population of the country
- The information on prevention is only the measure existing at present.
- There is neither vaccine nor any known cure for AIDS yet.
- Most of the people do not go to hospitals for taking advises on this matter.
- Most of the people do not know where to seek advise from
- Crores of people do not know anything about AIDS
- Aids is a killer disease
- Aids spread mainly through ignorance
- Aids spread primarily through sex which is the commonest, cheapest and most enjoyable mode of attraction between sexes.
- Millions of productive lives can be saved through awareness.
- New born child and any mother can be victims of HIV infection if the mother does not have life saving information.



- Aids is thickly coated with social stigma and fear most of which do not have any scientific base.

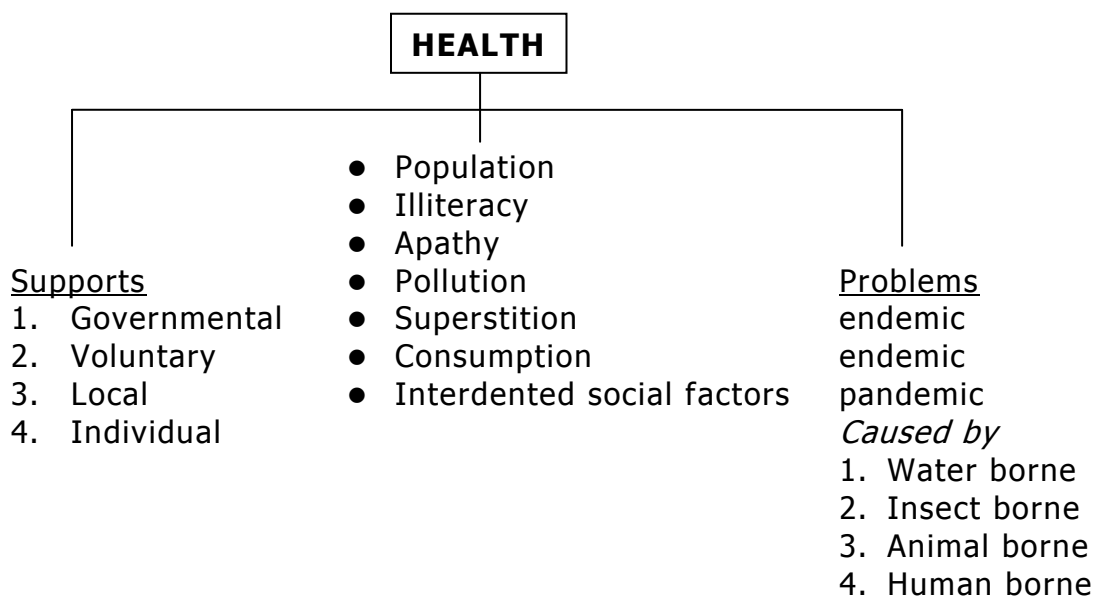
### 3.3 Policy

The thrust is more on prevention through a series of interventions concerning identification, awareness, preventive care, rehabilitation and redeployment of commercial sex workers and appropriate welfare measures for their children.

While the policy thrust is in favour of direct assistance to the targeted group, the implementation posed many problems. The development programmes were mostly administered by bureaucracy which was accustomed to dealing with elite sections of the society. But the vulnerable population to this epidemic are mostly, the lower strata of the society and they are unorganized and plagued with illiteracy and ignorance making it difficult for them to appreciate significance of this programme and embrace it's tenets. It was hence realized that close involvement of people in planning and implementation of these programmes is highly essential for it's success. People's participation was sought to be brought out through the involvement of local self-government, voluntary agencies and non-governmental organizations.

### 3.4 Problems confronting health

The following diagram schematically represent various problems confronting the health sector in India.



We can minimize problems only if we work for health in an organized manner.

### **3.5 Approaches**

The interventions in the context of current ongoing programmes in the country may be classified into Institutional and non-institutionalized services.

#### ***a) Non-Institutionalised services***

1. Survey and Research
2. Awareness Programmes
3. Advocacy & Sensitisation
4. Audio-visual publicity
5. Health care & Free diagnosis camps
6. Free distribution of condoms and multi-location condom dispersing centres.
7. Voluntary counselling cum test centre
8. Counselling
9. Production of documentary film
10. Training and support services

#### ***b) Institutionalised services***

1. Health care centres
2. Day care centres for children of commercial sex workers
3. Printing and production of publicity material
4. Rehabilitation cum vocational training centres for commercial sex workers.
5. Terminal ill care

Several organizations like Ministry of Health and Family Welfare, Government of India through a network of state AIDS control cells extend support to NGOs for initiating various interventions. The central social welfare board supports the institutionalised programmes like "Rehabilitation cum vocational training centres for prostitutes", day care centres, terminal ill care etc. The international funding agency "Global Fund to Fight Aids, TB and Malaria" will extend funding support for several tangible initiatives in this direction. Besides, funding support is available for NGOs, from Global Health Council, WHO etc.

# 4

## Project Planning & Methodology

### 4.1 The Project

This project is proposed to undertake the following activities.

- a) Identification of commercial sex workers
- b) Counselling
- c) Rehabilitation
  - (i) Literacy
  - (ii) Vocational programmes
  - (iii) Health care
  - (iv) Food and clothing
- d) Redeployment
  - (i) Motivational programmes
  - (ii) EDP and Leadership Development Programmes
  - (iii) Income Generation Activities
  - (iv) Support Services/Escort services
  - (v) Placing them back with their families whenever necessary.

### 4.2 Target Group

Commercial Sex Workers

### 4.3 Methodology

A baseline survey will be conducted and the sex workers are identified. They are counselled and motivated to join the mainstream of life. Highly motivated commercial sex workers willing to refrain from the profession will be picked up as inmates to the rehabilitation centre. Their immediate basic needs as to health, food, shelter and clothing will be attended. Literacy improvement programmes followed by occupational training in simple trades like candle making, food processing, dress making, embroidery etc. will be provided to the inmates. The inmates will be trained to produce goods and services in the centre in order to generate enough surpluses to meet the operational costs of the scheme. This gesture will not only boost the morale and self-confidence of the inmates but also make the project self-sustainable. The inmates will be encouraged to raise kitchen garden within the premises to cut down/reduce the boarding costs. Any surplus generated out of the scheme, after meeting all operational costs, will be utilised for improving facilities both at the living and training areas of the centres.

# 5

## Organisational Set Up and Infrastructure Planning

### 5.1 Infrastructure

The following parameters may be adopted while determining the infrastructural requirements of the project. They serve as merely guidelines for formulating the project and may vary from project to project to suit their individual requirements.

#### *a) Location*

This project will be located on the outskirts of the town with abundant security and moderate access to the basic infrastructure like transport, power, water, health, recreation etc.

#### *b) Requirement of land*

The minimum requirement of land for setting up rehabilitation cum vocational training centre for women prostitutes will be around 4840 sqr. Yds. The project functionary will make necessary arrangements for procuring the land free of cost from the revenue/municipal authorisation.

#### *c) Built-up Area*

The following are the requirement of civil structures

1. Administrative building	250 sft.
2. Dormitory accommodation	2500 sft
3. Training cum production centre/ Vocational training centre	1500 sft.
4. Kitchen & Dining hall	500 sft
5. Miscellaneous including lavatory and baths	250 sft
<b>TOTAL</b>	<u>5000 sft</u>

#### *d) Requirement of office equipment*

1. Type writer	-	1
2. Telephone	-	1
3. First Aid Kit	-	1

**e) Requirement of Training equipment**

i) Garment making

1. Sewing machines	-	5
2. Fashion maker	-	1
3. Interlocking machine	-	1
4. Cutting table	-	1
5. Ironing box	-	2
6. Scissors, Tapes & Tools	-	LS

ii) Food Processing

1. Pulveriser	-	1
2. Semi mechanised papad making machinery	-	1 set
3. Polythene bag sealing machine	-	1

iii) Candle making

1. Candle making dies	-	25 sets
2. Moulds	-	25

**f) Recreation**

1. Carom Board
2. Colour Television

**g) Requirement of furniture**

i) Administrative Office

1. Office Tables	-	3
2. Chairs	-	12
3. Almirah	-	2
4. Cash chest	-	1

ii) Dormitory

1. Cots
2. Cup boards with lockers

iii) Dining Hall

1. Long tables	-	4
2. Chairs	-	25

iv) Vocational Training Centre

1. Tables	-	2
2. Black boards	-	2
3. Work benches	-	6
4. Chairs	-	6
5. Cup boards	-	2

***h) Kitchen equipment***

1. Gas stove with spare cylinder	-	1 set
2. Water filter	-	1
3. Hot water geyser	-	1
4. Wet grinder	-	1
5. Cooking utensils	-	LS
6. Plates, spoons, cuttlery	-	LS

***i) Miscellaneous***

1. Gardening tools	-	LS
2. Fire fighting equipment	-	LS
3. Borewell motor	-	1

***J) Requirement of Power*** - 5 HP

***K) Requirement of water*** - 2 kl/day

***l) Requirement of man-power***

Administrative	-	4
Supporting	-	4

All the productive operations of the project will be handled by the inmates with the assistance of external resource persons wherever necessary.

# 6

## Organisation and Man-power

### 6.1 The organisation

The project will be headed by the Executive Secretary of the implementing agency and he will be the project functionary handling all administrative and policy matters concerning the project. He will derive all guidance from the project advisory committee consisting of the following authorities/members.

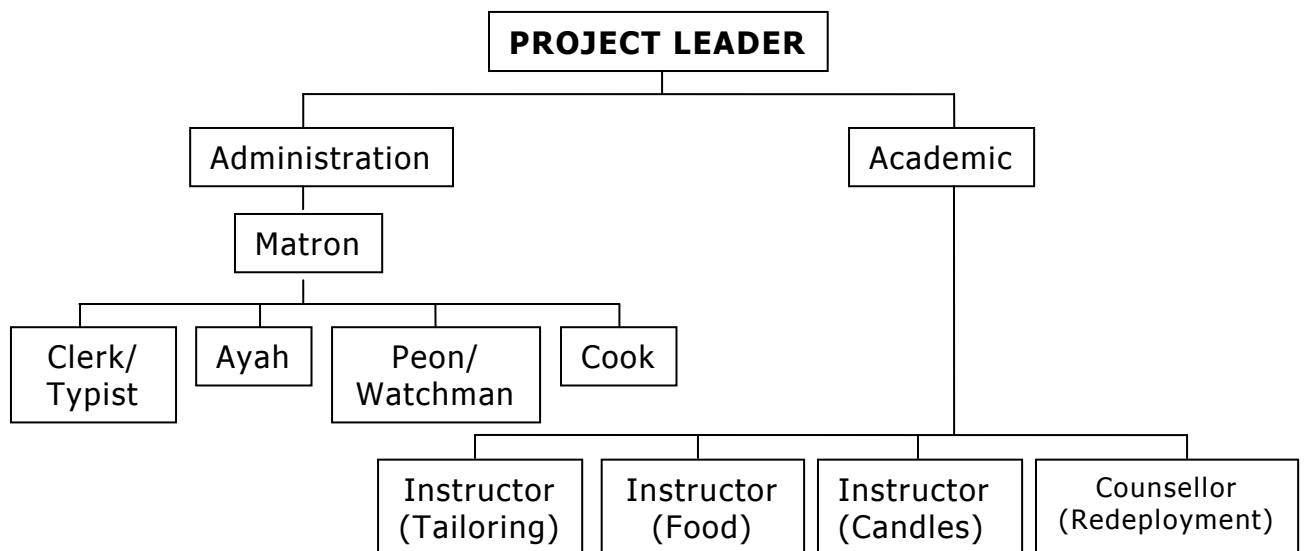
#### **Project Advisory Committee**

1. Executive Secretary of the implementing agency - Member  
Secretary/Convener
2. President of Implementing Agency - Chairman
3. Nominee from the funding agency - Member
4. Nominee from the Women Development Corporation - Member
5. Nominee from Central Social Welfare Board - Member
6. Nominee from DRDA - Member
7. Nominee from the local municipality - Member
8. Nominee from the local media - Member

The project director (Ex. Secretary of the IA) will be assisted by 4 academic staff to handle the vocational training activities, adult literacy, awareness programmes etc. and 4 administrative staff to look after accounts office correspondence, boarding, lodging and security of the inmates.

The services of external doctor as authorised medical attendant on payment of honorarium will be empanelled. Similarly, the service of resource persons wherever necessary will be employed on contract basis.

## 6.2 Organisational Chart



## 6.3 Schedule of salaries & wages

Sl.	Category	Nos.	Sal. per head/month	Total (Rs.)
1.	Matron	1	5,000.00	5,000.00
2.	Clerk/Typist	1	3,500.00	3,500.00
4.	Cook	1	3,000.00	3,000.00
5.	Peon/Watchman	1	2,500.00	2,500.00
6.	Instructors	4	4,000.00	16,000.00
		<b>9</b>		<b>32,000.00</b>



# 7

## Project Cost & Method of Financing

### 7.1 Project Cost

The total cost of the scheme including operational costs (Recurring expenses) for an initial period of six months works out to Rs. 26,00,000/- the outlay of which includes:

#### I. Capital Expenses

##### a) Land & Land Development

The project will be requiring around 4840 sqr. yds of site at some good, secured location either within the town (where adequate land is available) or at outskirts with sound access to marketing, health, entertainment and other basic infrastructure. The project functionary will make all necessary arrangements for procuring the land free of cost from revenue authorities/local municipality.

A provision of Rs. 25,000 is made to meet the developmental costs including documentation charges for alienating the land.

##### b) Civil structures

The project will be requiring around 5000 sq. feet of built-up area for accommodating various activities envisages in the scheme. The total cost of the civil structures will be around Rs. 18,50,000. The cost includes a provision of 5% over the basic construction. Cost taken @ Rs. 350/sft. And an additional provision of Rs. 12,500/- to meet the water and sanitation costs.

##### c) Office Equipment

1. Type writer	Rs.	10,000.00
2. Provision for telephone	Rs.	2,000.00
3. First - Aid kit	Rs.	500.00
Total cost of the office equipment	<b>Rs.</b>	<b>12,500.00</b>
Provision @ 10% to meet escalations	Rs.	1,250.00
	<b>Rs.</b>	<b>13,750.00</b>

**d) Cost of Training Equipment**

i. Garment making

Sl.	Description	Nos.	Cost of unit (in Rs.)	Total amount (in Rs.)
1.	Sewing machines	5	4,000.00	20,000.00
2.	Fashion maker	1	8,000.00	8,000.00
3.	Interlocking machine	1	4,500.00	4,500.00
4.	Cutting table	1	2,000.00	2,000.00
5.	Ironing boxes	2	500.00	1,000.00
6.	Scissors, tapes and misc. tools	LS	1,000.00	1,000.00
				<b>36,500.00</b>
	Rates and taxes extra @ 10%			3,650.00
	Erection and commissioning			2,500.00
				<b>42,650.00</b>

ii. Food processing

1.	Pulverser	1	6,500.00	6,500.00
2.	Semi mechanised papad Making machine	1 set	45,000.00	45,000.00
3.	Polythene bag sealing machine	1	750.00	750.00
				<b>52,250.00</b>
	Rates & Taxes @ 10%			5,225.00
	Erection & Commissioning			2,500.00
	(Rounded off to Rs. 60,000)			<b>59,975.00</b>

iii. Candle making

1.	Moulds	25	2,000.00	50,000.00
2.	Dies	25	500.00	12,500.00
				<b>62,500.00</b>
	Rates & Taxes @ 10%			6,250.00
	Erection & Commissioning			2,500.00
				<b>71,250.00</b>

**e) Recreation equipment**

1.	Carrom board	1	500.00	500.00
2.	Colour television	1	15,000.00	15,000.00
				<b>15,500.00</b>

*(The above indicated price is inclusive of all taxes & charges)*

**f) Furniture**

(v) Administrative office

Sl.	Description	Nos.	Rate per unit	Total (in Rs.)
1.	Office tables	3	1,500.00	4,500.00
2.	Chairs	12	350.00	4,200.00
3.	Almirahs	2	2,000.00	4,000.00
4.	Cash chest	1	2,500.00	2,500.00
				<b>15,200.00</b>

*(The indicated price is inclusive of all taxes)*

(vi) Dormitory

1.	Cots	60	400.00	24,000.00
2.	Cupboards with lockers	10	1,200.00	12,000.00
				<b>36,000.00</b>

*(The price indicated is inclusive of all taxes)*

(vii) Dining hall

1.	Long tables	4	1,500.00	6,000.00
2.	Chairs	25	100.00	2,500.00
				<b>8,500.00</b>

*(The price indicated is inclusive of all taxes)*

(viii) Vocational training centre

1.	Tables	2	1,200.00	2,400.00
2.	Black boards	2	250.00	500.00
3.	Work benches	6	500.00	3,000.00
4.	Chairs	6	150.00	900.00
5.	Cup boards	2	1,500.00	3,000.00
				<b>9,800.00</b>

*(The price indicated is inclusive of all taxes)*

**g) Kitchen equipment**

1.	Gas stove with spare cylinders 1 set		3,000.00	3,000.00
2.	Water filter	1	1,200.00	1,200.00
3.	Hot water geyser	1	4,800.00	4,800.00
4.	Wet grinder	1	5,000.00	5,000.00
5.	Cooking utensils	LS	5,000.00	5,000.00
6.	Plates, spoons & Cutlery	LS	5,000.00	5,000.00
				<b>24,000.00</b>

*(The price indicated is inclusive of all taxes)*

**h) Miscellaneous equipment**

Sl.	Description	Nos.	Rate per unit	Total (in Rs.)
1.	Bore well motor	1	3,000.00	3,000.00
2.	Gardening tools	LS	1,500.00	1,500.00
3.	Fire fighting equipment	LS	2,000.00	2,000.00
				<b>6,500.00</b>

*(All inclusive of taxes)*

**(i) Total cost of furniture & equipment (in Rs.)**

i)	Garment making equipment	42,650.00
ii)	Food processing equipment	60,000.00
iii)	Candle making equipment	71,250.00
iv)	Recreation equipment	15,500.00
v)	Administration office furniture	15,200.00
vi)	Dormitory furniture	36,000.00
vii)	Dining hall furniture	8,500.00
viii)	Vocational training centre	9,800.00
ix)	Kitchen equipment	24,000.00
x)	Miscellaneous equipment	6,500.00
		<b>2,89,400.00</b>
	Contingencies @ 5%	14,470.00
		<b>3,03,870.00</b>

(Rounded off to Rs. 3,00,000)

**j) Total cost of fixed assets**

i)	Site development	Rs.	25,000.00
ii)	Civil structures	Rs.	18,50,000.00
iii)	Equipment & Furniture	Rs.	3,00,000.00
			<b>Rs. 21,75,000.00</b>

**k) Operational costs of the schemes (Variable costs)/Month**

(i)	<u>Salaries &amp; Wages</u>	Rs.	32,000.00
(ii)	<u>Administrative overheads</u>		
	a) Travelling and conveyance	Rs.	500.00
	b) Telephones	Rs.	250.00
	c) Postage and Stationery	Rs.	250.00
	d) Power	Rs.	500.00
	e) Honorarium	Rs.	1,500.00
	f) Entertainment	Rs.	250.00
	g) Welfare & Health	Rs.	500.00
	h) Fuel	Rs.	500.00
	i) Miscellaneous stores material	Rs.	500.00
			<b>Rs. 4,750.00</b>

(iii) Boarding costs

Boarding costs @ Rs. 35 per day per inmate Rs. 52,500.00  
for 50 inmates

(iv) Raw materials

a) Wax for candles ITPM @ Rs. 32,000/tonne	Rs.	32,000.00
b) Moong Dhal 500 kgs/month @ 35/- kg.	Rs.	17,500.00
c) Spices 25 kgs/month @ 40/- kg	Rs.	1,000.00
d) Tailoring material	Rs.	1,000.00
e) Packing material	Rs.	500.00
	<b>Rs.</b>	<b>52,000.00</b>

***l) Total working capital requirements/month***

i) Salaries & Wages	Rs.	32,000.00
ii) Admn. Overheads	Rs.	4,750.00
iii) Boarding costs	Rs.	52,500.00
iv) Raw materials	Rs.	52,000.00
	<b>Rs.</b>	<b>1,41,250.00</b>

***m) Total cost of the scheme***

i) Fixed assets	Rs.	21,75,000.00
ii) Deposits	Rs.	5,000.00
iii) Preliminary & Pre-operative expenses	Rs.	10,000.00
iv) Working capital for an initial period of 3 months	Rs.	4,25,000.00
	<b>Rs.</b>	<b>26,15,000.00</b>

***n) Means of finance***

The project will meet the costs of the scheme as follows:

a) One-time capital grant for acquiring fixed assets	Rs.	21,75,000.00
b) Recurring grant	Rs.	4,40,000.00
	<b>Rs.</b>	<b>26,15,000.00</b>

# 8

## Viability Analysis

### 8.1 Basis & Presumption

a) The project will generate internal surplus out of its training cum production centre attachment to the vocational training centres.

b) The project will contain manufacturing facilities for wax candles, papads. Provision for raw materials has been made in the scheme for the two productive activities while the tailoring/garments making facility will be operated on job contract basis.

#### 1. Product mix

The scheme will provide for manufacturing the following products:

- a) Papads - 500 kgs
- b) Wax candles of assorted sizes - 1 tonne
- c) Garments on Job-contract basis - 1,500 pairs of school uniform

#### 2. Sales realisation

a) By sale of 500 kgs of papads @ Rs. 80/- kg.	Rs.	40,000.00
b) By sale of 1000 kgs of candles of assorted sizes @ 200/- kgs.	Rs.	1,00,000.00
c) Job servicing charges for stitching 1500 pairs of school uniforms @ Rs. 10/- uniform	Rs.	15,000.00
		<hr/>
	<b>Rs.</b>	<b>1,55,000.00</b>

#### 3. Surplus available/month

i) Sales realisation		Rs. 1,55,000.00
ii) Less operational costs	(-)	Rs. 1,41,250.00
		<hr/>
		Rs. 13,750.00

Since the scheme can meet the overall operational costs with internal surplus generated out of training cum production activity. The project will be self-sustainable and economically viable.

# 9

## Project Implementation Schedule

### 9.1 Implementation schedule

#### Year -1

##### Month 1-3

- a) Identification of beneficiaries
- b) Project proposal
- c) Funding dossiers
- d) Formation of Project Advisory Committee (PAC)

##### Month 4 - 6

- a) Land alienation
- b) Preparation of civil drawings, estimates
- c) Statutory approvals
- d) Tenders for construction
- e) Meeting of Project Advisory Committee (PAC)

##### Month 7 - 9

- a) Approval of tenders
- b) Civil constructions
- c) Indenting for equipment and furniture
- d) Meeting of PAC

##### Month 10 - 12

- a) Civil structures
- b) Meeting of PAC
- c) Erection and commissioning of equipment
- d) Commissioning of project

# 10

## Evaluation and Impact Analysis

As enumerated in earlier chapters, the project will be monitored at every stage of implementation through the Project Advisory Committee consisting of the President and secretaries of the implementing agency, eminent social worker, authorisation from funding agency, DRDA, local municipality, DM & H.O, Media, etc. The Project Advisory Committee would meet periodically to review the progress, identify the bottlenecks and suggest appropriate correction measures.

The following check list will form basis for undertaking review of performances.

- Response of commercial sex workers to the Project
- Potential of social action
- Advise of social partners
- Number of sex workers willing to join the mainstream of life.
- The attenuation of rehabilitated sex workers to alternative sources of income.

A comprehensive report on the programme with audited statement of accounts will be submitted to the Funding Agency at the end of the implementation of the project.