Bal Umang Drishya Sanstha (BUDS) is a registered, nonprofit organization formed with the objective of advancing the well being, education, health and welfare of children in India without distinction of caste, class, gender, ethnicity, religion, rural/urban, physical or mental disability. BUDS was established in 2000, and was registered, as an Indian Not for Profit Trust 2003 (Registration No 11686/4 of 2003), with the country office located in New Delhi.

BUDS aims is to serve the underserved children by preventing diseases, promoting health and providing access to education to every child.

BUDS VISION: envisions a society where every child is in school, free from abuse, neglect, child labour and poverty.

BUDS MISSION
a) Promote every child in school
b) Prevent disease and promote early child health and development, and
c) Create lasting change by building healthy community and promote sustainable development.

BUDS CORE VALUES
- Respects that every child has basic rights to education, health, nutrition, development and protection
- Promote equitable access
- Partners with Government, other NGO’s and allied International organization
- Ensure program and fiscal accountability, respect diversity, support community self-determination.
- Ensure minimal overhead costs.
- Encourage voluntary participation of professionals such as doctors, teachers, lawyers, scientists child rights and social activists.

REGISTRATION
BUDS is registered as an Indian Not for Profit Trust since 2003 (Registration No. 11686/4 of 2003)

TAX EXEMPTION
All Donation to BUDS are exempted U/s 80G (income tax Act 1961): 50 % tax exemption

Contact Details
BAL UMANG DRISHYA SANSTHA (BUDS)
E 10 Green Park Main, New Delhi 110016, India
Tel: +91-11-4166 1237, 2652 7647
Email: info@buds.in | Website: www.buds.in

Bankers
AXIS BANK LTD
K 12 Green Park Main,
New Delhi 110016
A/C No. 015010100133685
IFS Code: UTIB0000015

Auditors
ALOK MISRA & CO.
Chartered Accountants
1-B, Vikrant Enclave, Mayapuri, New Delhi- 110064
Tel: 91-11-4563 1889 | Telefax: 91-11-2549 8124
Website: www.caalokmisra.org
Message from Managing Trustee

On behalf of Bal Umang Drishya Sanstha (BUDS), it is indeed my privilege to present the BUDS annual report ending March 31, 2017. BUDS has recorded several important milestones in the field of public health care & education, while working for underprivileged children and youth in the Red Fort – Mori Gate & Nizamuddin Railway station urban slums sites in national capital region of Delhi & an under- served Village Ghasera, Mewat, Haryana. BUDS is implementing a project “Enhancing Health Care Access with Cellular Technology” at Village Ghasera. This project is jointly supported by National Institute of Health (NIH) USA and Department of Biotechnology (DBT), Government of India. A novel software platform has been successfully launched to improve uptake and coverage of primary childhood vaccinations by mobile cellular technology, in order to prevent diseases and improve child survival.

Healthcare access is low in urban slums and poor rural population, where BUDS operates. BUDS health professionals encounter large burdens of disease with in extreme poverty and cultural challenges. Many are residents are migrants and daily wage labourers. They can’t afford to take their children to even local government hospitals or afford medications. Under these circumstances, there was a need for Mobile Health Van to reach out to provide medical services. BUDS is proud to announce that PricewaterhouseCoopers (PwC) has recently provided a grant donation to BUDS to start a new project “Improving Access to Healthcare Services through Mobile Van for vulnerable children, youth and community Delhi NCR”.

BUDS multidisciplinary professional staff has strengthened our community outreach program & Drop in Center (DIC) services. BUDS is providing an innovative Non Formal education (NFE) program, which is flexible, learner-centered & play-based participatory education approach. Several children from vulnerable families have been enrolled in formal schools. More children are coming to attend our “remedial classes” and classes for improving “English speaking skills”. An Entrepreneurship Training Program with Learning Links Foundation (LLF) has just taken off. Moreover, BUDS has started a program for children under six years at our DIC, Nizamuddin Railway station. It shall benefit the critical period for the young child’s social, emotional, cognitive and physical needs.

BUDS invites your attention and support. Please do visit and volunteer your time at our project sites. With your insight, expertise, and constructive feedback, we look forward to enrich the lives of our vulnerable children and youth.

Sincerely yours

Dr Rajeev Seth
Managing Trustee

CASE SUMMARY

Sapna comes from an underprivileged family. Besides financial problems; what Sapna lacked was the ability to express herself in front of others confidence. She joined the CODE Programme on the recommendation of her cousin Garima, an ex-trainee at BUDS. “I wanted to learn English and Computers but more importantly, I needed to be able to show what I know in front of others” she said. For Sapna, the Social Confidence classes are what stood out. “I was very scared of speaking to unknown people. Even to fill a form at the University, I had to take one of my friends with me” she said. However, activities in these sessions have helped Sapna become more independent and her English communication has improved tremendously. “I never spoke in English before, but when I speak now, my students think that I know a lot, and they respect me because they feel that my English is good” she said. After every Social Confidence visit, the trainees were expected to make presentations where they summarized their observations. Out of the four presentations that she made during the course, Sapna enjoyed preparing for the fourth one the most because it involved research on the internet and presenting with a Power Point. She has improved her presentation skills.
**Program for Underprivileged Vulnerable Children and Youth 2016-17**

Bal Umang Drishya Sanstha (BUDS) aim is to serve the underprivileged children by preventing diseases, promoting health and providing access to education and vocational training to every child. Its goal is to reduce the vulnerability of children and youth living and working on the urban slums through a continuum of services that address their education, health, physical, psychological, life skills and vocational development. Since inception (2003), a total of more than 25000 vulnerable children between ages 6 to 18 years have been reached with different services offered through outreach activities, drop-in centre’s (DIC) and vocational training centers at Sarai Kale Khan, near Nizamudin railway station and Red Fort-Mori gate, New Delhi.

BUDS also provides education and health care services to an under-served Village Ghasera, also known as Gandhi Gram Ghasera, located near Nuh, Mewat, Haryana with a population of 25000. One of the major challenges in this village is inadequate vaccination coverage, which leads to outbreak of vaccine-preventable diseases, poor child health and survival. BUDS has launched a project “Enhancing Health Care Access with Mobile Cellular Technology” with the support of an Indo-US Grant, jointly sponsored by National Institute of Health (NIH) USA and Department of Biotechnology (DBT), Government of India. BUDS is evaluating a novel software platform in mother-infant units to improve uptake and coverage of primary childhood vaccinations by mobile cellular technology, in order to prevent diseases and improve child survival.

**Community Outreach activities**

The main objectives of BUDS community outreach activities are to achieve early identification, interventions and repatriation of street and working children with their families. BUDS social worker’s and peer educators are responsible for making contact with the children and youth and bringing them to the Drop in centre (DIC). Every day our staff visits the Old Delhi & Nizamuddin railway station, Interstate bus terminus, and major commercial market places and identify vulnerable children. Our outreach system capacity was strengthened and a total of 364 children and youth contacted during the last year 2016-17.

**CASE SUMMARY**

Nancy belongs to the poor vulnerable community Kucha Mohattar khan, community. She is the youngest of three sisters and one brother. Her father earns approx Rs 5000/month, by selling vegetables sells. He mother is home maker. Both parents are illiterate. BUDS found Nancy was not interested in studies and was very nervous and shy – like silent girl. She enrolled herself in BUD’s remedial class at Mori Gate DIC. In a short period of one year, she has improved with remedial education, and is doing well in class 8. She has also benefited from BUDS Life skills education, health camp facilities, and recreational activities, to develop into a holistic development of her personality. She has now built up her confidence through these various activities. She is studying hard, with full interest and concentration.

BUDS looks forward to her have a bright future!

**Achievements 2016-2017**

- No. of Beneficiaries in Health Camps: 2159
- Computer Education, 375
- Early Childhood, 131
- Non Formal Education, 19
- Weekly Health Camps, 45
- Life Skills Education, 364
- Recreational Activities, 364
- New Course, 364
- Remedial Education, 131
Non Formal & Formal Education

Non Formal Education (NFE) is any organized educational activity that takes place outside the formal educational system. Usually it is flexible, learner-centered, contextualized and uses a participatory approach. BUDS has found NFE to be one of the effective approaches to impact lives of our street and working children. These children are usually runaway migrants, who get excluded from mainstream schools or they just dropout from school systems due to socio-economic and family circumstances. BUDS NFE therapy comprises a method of education by play therapy, watching, demonstration & audio visual medium by a trained special educator. In Red Fort DIC, this is the most important services provided by BUDS to street children, vulnerable children who live in high risk slum communities near the railway track & under temporary tarpaulin shelters. The children are mostly found roaming in the neighborhood, picking up rags, plastic bottles, and other trash items. Many children misuse substance such as glue sniffer (uses whitener), other drugs & alcohol.

BUDS teachers have developed several fun and educational game for our NFE students. For example, through a play and game, we have tried to teach the children the importance of using toilets and to learn best practices to use toilets effectively. The knowledge of water and sanitation is very poor amongst the street and working children. Therefore, we conducted a musical toilet game for the children. It’s like musical chair games, where we lay out mats/printed toilet sheets (one less than the number of children). Music is played, and as soon as the music stops, the children have to sit down in each sheet. Those children who get left out have to answer some question like “what should we do when they are in queue for going to toilet? Do you ever go to outside for toilet or do toilet as open defecation? Besides these, the facilitator asks lots of related question and benefits of using toilet for defecation during these games.

BUDS, provided help to families to enrol children in government schools. In addition, children from the community, also attend “remedial classes” and classes for improving “English speaking skills” regularly. BUDS initiated and promoted quality educational services & learning modules, above and beyond the requirement of providing secondary education, in order to enhance future job opportunities for these children/youth.

- 175 children and youth enrolled in remedial class at the DIC’s.
- 40 children and youth enrolled into formal schooling.
- 22 street children enrolled in formal school nearby govt. school.
- 175 children from the community attended English and Life skills education at the DIC’s

Early Childhood Care & Education (ECCE)

Early childhood has been recognized as the critical period for child’s social, emotional, cognitive and physical needs, so as to establish a solid foundation for lifelong learning and wellbeing. If the child is not given adequate support and stimulation to aid this early development, he or she is at risk of being prejudiced in reaching their full potential. Recently, BUDS has started a program for early childhood for underprivileged children at Nizamuddin Railway station. The program provides a stimulating environment to enhance pre-school learning. A total of 19 children are enrolled during the reporting period.
Medical Camp’s are conducted every week at BUDS DIC & Village Ghasera Communities by senior pediatricians. Dr Rajeev Seth, Dr Indra Taneja, Dr RN Srivastava, Dr Uma Agrawal & Dr Shanti Raman volunteer their time at these health camps. Averages of 50-60 children are assessed in each weekly camp.

Health assessment includes basic weight/Height assessment, check for anemia/nutritional deficiency, acute care/first aid, treatment of common infections such as viral fever, upper respiratory infection, skin infections (pyoderma), diarrhea, pneumonia, Tuberculosis, Sexually transmitted diseases/HIV/AIDS. Besides the children, people from the community also attend the clinic. Medicines are given free of cost. Since past year, children have shown better health. Dr Seth is available round the clock to handle emergency calls if any.

Forty five (45) community health camps were conducted in the BUDS DIC & village Ghasera Mewat in the past one year. Besides curative health care, the aim of the health camps was to increase community Health Awareness, Health Education & to provide home visitation and Counseling to address social determinants of health. 2159 patients covered and 1486 patients referred to nearby govt. hospital such as Lallan Hospital, Nuh and community health center, Sohna.

Immunization: Every child at Red fort & Nizamuddin DIC is fully vaccinated free of cost against Diptheria-Pertusis-Tetanus (DPT), DT, Hepatitis B, MMR, Typhoid vaccinations. Not even a single case of severe adverse reactions have been seen following vaccinations. Minor fever, aches are treated with paracetamol. At village Ghasera, all immunizations are done by Government health professionals such as ANM. In this community, BUDS is evaluating a novel software platform in mother-infant units to improve uptake and coverage of primary childhood vaccinations by mobile cellular technology, in order to prevent diseases and improve child survival.

Participation in Pulse Polio Immunization Program in Ghasera, Mewat

BUDS team was invited to participate in the Pulse Polio Program in Ghasera village by Health department, Govt. of Haryana on September 25, 2016. Volunteers from BUDS spent the entire day with local Polio team and mobilized the children from the community, and brought them at the polio booth.

BUDS staff also supervised around 12 booths with the community health workers, Govt. of Haryana.
New Project: Improving Access to Healthcare Services through Mobile Van for Vulnerable Children, Youth and Community Delhi NCR

Why Mobile Healthcare Project? Healthcare access to all reaches of society is low in India, more so in urban slums and poor rural population, where BUDS operates. There is a severe lack of human resources and also poor infrastructure. BUDS health professionals encounter large burdens of disease with extreme poverty and cultural challenges. Most of the residents in the community belong to very vulnerable and marginalized population. Most of them are either illiterate or have very little education or vocational skills. Many are migrants and daily wage labourers. They can’t afford to take their children to even local government hospitals or afford medications. Under these circumstances, the need for state of the art Mobile Health Van to reach out in order provide medical services to this vulnerable population is urgently needed.

PricewaterhouseCoopers (PwC) has recently provided a grant donation to BUDS to start a new project “Improving Access to Healthcare Services through Mobile Van for Vulnerable, Youth and Community Delhi NCR. PwC is a multinational professional services network headquartered in London, United Kingdom. It is the second largest professional services firm in the world. The project will start in the month of April 2017.

The project will work intensively on Preventive, Promotive and Curative Levels and Enhance support services for underprivileged children & youth. A total number of 25,000 patients will be reached out in a year in the project area of Mori Gate, Sarai Kale Khan- Nizamuddin and Ghasera, Mewat. The mobile van shall deliver health and psychosocial services to 5000 children and youth and 20,000 community members. Behavior Change Communication (BCC) strategies shall be used to bring about improvement in various aspects of health and hygiene. Community members will also be provided information to prevent non-communicable diseases.

Nutrition

Mid Day Meal Program was started at Red Fort-Mori Gate DIC in July 2012. Street children, mainly rag pickers, child labourers; children engaged in menial tasks, works in eateries etc are the main beneficiary. Every day 35-45 children in this BUDS DIC are served hot cooked food. BUDS also provided fruits to the children attending non-formal education classes. Raw material are bought from local sabzi mandi, local grocery store, all bills/receipts are kept every month. Cooking gas cylinders are also provided. Yawer Qaiyam, BUDS Director, Community Operations & Ms Sandhya Mandal, DIC In charge directly supervise the program. Dr Shalini Bansal contributes the salary support of a part time cook. Major donors of this program include Dr Meera Prakash, & Mr. RC Mody.

Health Education

Dr. Indra Taneja is a senior consultant pediatrician & trustee of BUDS. She is a graduate of Lady Harding Medical College & recently retired Professor from University of New Jersey USA. Dr Taneja takes classes for underprivileged children on health education in schools and social determinants of health. She has become famous in the vulnerable communities with her excellent counseling skills.
Vitamin A Prophylaxis Program

Vitamin A deficiency as it is the leading cause of preventable childhood blindness; malnutrition is responsible for 45% of all childhood deaths.

With the help of Mr. Rick Carlton, President Seva Child India, BUDS is distributing Vitamin A prophylaxis in our intervention areas such as Mori Gate, Sarai Kale Khan and village Ghasera community areas. Along with our health camps, a total of 600 children provided vitamin A & essential nutrients to protect children from disease and to save children’s lives.

There were 50 direct beneficiaries from the rally, including 6 associates of the NGO staff. BUDS estimates about 10,000 people in the region were indirect beneficiaries of the awareness rally. Awareness pamphlets were distributed to the beneficiaries. For the illiterates, the direct beneficiaries were singing and shouting the slogans made by our associates. Few slogans were “Hazaro log Nashachortehai par marnekebaad” Merabharat, Nashamuktbratah” “jokare drugs kasevan, wokhoyejawani me apnajivan”.

Entrepreneurship Training Program with Learning Links Foundation (LLF)

Entrepreneurship Training Program, supported by LLF started in the month February 2017. BUDS will mobilize two batches, each comprising of 30 youth. One batch has already started in which 22 young entrepreneurs enrolled in the morning time at Mori Gate center. There will be a boot camp for business plan development of aspiring entrepreneurs and conduct placement drives for a certain limited number of youth who are seeking full time job opportunity. After completion the course, each entrepreneur will submit the business plan in different government organizations/ MFIs/angel investors/banks etc. for financial support to micro entrepreneurs.

Vocational and Skill Development

BUDS strongly believes in building vocational and skill development for these groups of vulnerable children. At the present time, this program is conducted at Red Fort & Mori Gate are, but efforts are underway to implement it in Nizamuddin & Village Ghasera Communities. BUDS Trustee Mr. RC Mody takes special interest and supervision of children for their higher education and vocational development. Case of Pintu Jha is a shining example of what we can together achieve! Pintu is about to complete Master of Computer Application (MCA) program, IGNOU, New Delhi. The present report has few shining examples of children and youth excelling from BUDS vocational training and skill building program.

Prevention of substance abuse among adolescents

On the eve on International day against drug abuse on June 25, 2016, BUDS and partner NGO’s Antakshari and Nada India foundation jointly organized an awareness rally against drug usage among Tiz Hazari, Mori gate & Old Delhi railway station communities. Most people in these regions are more vulnerable drug misuse. The rally covered the overall area of 2kms through Rajindra market, Mori gate, Khanna market, Novelty Bridge, Fatehpuri and Old Delhi railway station.

Entrepreneurship Training Program with Learning Links Foundation (LLF)
Conferences and Advocacy

Child Trafficking and Commercial Sexual Exploitation of Children: Medical & Psychosocial Services for the Victims, India International Centre, New Delhi, October 13, 2016

Child Trafficking and Commercial Sexual Exploitation of Children (CSEC) are violations of the fundamental rights of children to be safe and are in contravention to the United Nations Convention on the Rights of the Child (UNCRC). The exact numbers of victims of child trafficking and commercial sexual exploitation are unknown, although estimates range into millions. The interaction of poverty and gender-based violence in developing countries heightens the risk of sex trafficking and CSEC. Along with Indian Child Abuse Neglect & Child Labour (ICANCL) group, IAP Delhi, India Alliance for Child Rights and World Vision, BUDS co-organised a National Consultation on this very important public health problem.

The consultation aimed to help professionals, coming in contact with survivors/victims of child sexual abuse, get a better understanding of the issue of Child Sexual Abuse and equip them with information to prevent and respond to victims of sexual abuse. Presentations at the consultation provided global and national perspectives on the status of Child Trafficking and Commercial Sexual Exploitation of Children that included legislative and policy initiatives. The term trauma informed approach and trauma informed care, while responding to children who have been sexually exploited, were introduced as was the importance of including mental health and emotional evaluations and interventions along with the medical treatment. Representatives from international agencies, government, advocates and representatives from civil society discussed the pros and cons of the draft Anti Child Trafficking Bill, community based child protection systems, child helpline and the importance of documentation for providing medical evidence in court.

Participants agreed on the need for a multi-disciplinary approach to interventions and for focused initiatives to prevent trafficking and child sexual abuse by strengthening child protection mechanisms in the community. Attitudinal change was identified as a key factor for bringing about real changes in the lives of children at risk of sexual exploitation. Given the general lack of awareness while examining child victims of sexual abuse, it was agreed that medical curriculum must include modules to train doctors on key medico legal aspects that include comprehensive history taking, identifying psychosocial and mental health symptoms with a non-judgmental and open attitude. Knowledge of risk factors, recruitment practices, and common medical and mental health problems experienced by victims will help the pediatricians recognize potential victims and respond appropriately. In addition, all medical and multidisciplinary professionals must comply with child abuse mandatory reporting laws and existing legislations.
Every child has the right to optimal cognitive, social and emotional development. Notably, early childhood is more than a preparatory stage assisting the child’s transition to formal schooling; it has been recognized as the critical period for comprehensive development taking into account the child’s social, emotional, cognitive and physical needs, so as to establish a solid and broad foundation for lifelong learning and wellbeing. If the child is not given adequate support and stimulation to aid this development, he or she is at risk of being prejudiced in reaching their full potential. It is therefore crucial for a society, and a nation, to invest in this period of a person’s life – particularly for a country like India, where over 40% of the population is below the age of six (Census of India 2011, available at http://www.censusindia.gov.in), and over 13% below the age of six (ibid). Thus, Early Childhood Care and Education (ECCE) refers to an integrated approach combining nutrition, health and education for the holistic development of a child below the age of six/eight years.

The Indian Child Abuse Neglect & Child Labour (ICANCL) group, Institute of Home Economics, Delhi University and BUDS as partner organization organized a one-day expert group consultation to bring together a convergence of stakeholders working on the issue of ECCE. The participants included doctors, including representatives of governmental ministries and Non-Government Organisations (NGOs) as well as academics and students.

**Recommendations**

To the Government:

- Comprehensive ECCE is possible if it includes the medical, health, developmental needs, education and early stimulation of the young child during infancy and preschool years. The approach has to be holistic.
- As for health, the facts are well known and it is distressing that those who cannot afford treatment, shy away from spending money on primary
health care. This has to be addressed on an urgent basis.

- The government is trying to reduce out-of-pocket expense on health care, and while this is necessary, it is necessary to make a push for the right to health for all children to be made a part of the government’s obligations.

- Budget for children is also being reduced. This is very worrisome as studies are indicating that for every Rs.1 spent on ECCE, there is a return of Rs. 25. Investing in early years is the foundation of any strong nation.

- Much information is available and this must be translated into practice. The Anganwadi centres must be transformed into genuine one-stop centres providing comprehensive health care and learning for children. Also, the centres have to be made inclusive across socio-economic strata as well as with respect to disabilities and other disadvantages.

- Strengthen the ECCE profession by working on the curriculum, training of early educators, access to quality preschools, and childhood free from violence and abuse.

- The government must come out with a policy to regulate play schools centres that provide ECCE.

- There is an opportunity at the Delhi level to look at a Delhi-centric mapping, assessment and outreach and this is practically feasible. We can look at gap areas and concerns that need to be addressed.

- There is a felt need for training across the board – from Anganwadi and ASHA workers to government doctors as well as those in policy-making positions, so as to ensure that they understand the parameters of good ECCE.

To the medical community:

- Paediatricians tend to worry more about physical health rather than overall early stimulation and this is missing from the paediatrics curriculum, and this needs to be addressed. To start, the IAP can form an advisory group to encourage paediatricians to provide anticipatory guidance to parents.

- IAP can also have an advocacy document on right to health and learning for early childhood.

- The IAP must also take the initiative to identify some innovators from other sectors and make ÀUVWFRQQHFWLRQVVRDV to foster convergence.

To civil society:

- More components of ECCE must be included in academic discourse.

- There is a case to be made for the need to look for convergence across issues, or instance to find connections between government policy which may even inadvertently lead to the exclusion of certain categories of persons, and tie these in with broad-based advocacy on ECCE.
Internship/Volunteers Program

Students from Ambedkar College and Aditi College work under a volunteers program with BUDS. This year a total of 7 volunteers/interns worked on the project. They were mainly involved in outreach activities, documentation, Networking, and outdoor activities. As interns they engage with children through games, drawing, and storytelling. Some of them improvised a play script on Health & Hygiene during the reporting period programming; Dr Sangeeta Saksena, Enfold foundation took a specific workshop for working with issues related to Gender base violence and Child abuse; and encouraged staff members to reflect on their own attitudes and beliefs related to gender and child abuse. Mr. Rick Carlton, Seva Child provided Training for Trainers (TOT) workshop to Yawar Qaiyum on Malnutrition and Vitamin Prophylaxis program. Trainings also provided a forum for reviewing staff members' responsibilities vis-à-vis the Code of Conduct.

BUDS Staff Capacity development

Building the capacity of BUDS staff is an essential part of our programme implementation. Several initiatives were carried out by Dr Rajeev Seth such as Basic training for all staff on BUDS guiding principles, goals and activities of BUDS.

Swach Bharat Abhiyan

BUDS children participated in SwachhMela with the help of Nine is Mine on April3, 2016. Children enjoyed activities and games. A group discussion was held on Sanitation and importance of toilets. A total of 100 children participated in this program.
Children Day Celebration 2016

BUDS organized a very successful Children’s day celebrations on November, 2016, at Delhi Medical Association Hall, Daryaganj, New Delhi from 11 to 4pm, along with IAP Delhi, Indian Child Abuse Neglect & Child Labor (ICANCL) group, Delhi Medical Association (DMA) and our allied NGO’s. 250 under-served children, who participated from two different slum sites. The vulnerable children and youth program got an opportunity to express themselves through painting competition and a grand cultural program, full of fun, songs, dances and a play. All children were given warm winter cloths and awards. The children were served hot cooked luncheon arrival and refreshment sat the end of the event. The following senior doctors of IAP Delhi ICANCL group addressed, motivated and blessed the children: Dr Rajeev Seth, Dr Rajesh Gupta, Dr. Uma Agrawal, Dr RN Srivastava and Dr Piyush Jain, Dr DN Virmani. Mr. Aseem Pal, Yawar Qaiyum, Shobha, Id Mohammad and Sandhya Mandalmotivated the children.

BUDS office bearers have no words to thank DMA office bearers for providing the auditorium and basement hall free of charge. BUDS appreciates support from our donors Tony & Bonnie Uppal, for the children day celebration: a day of joy, freedom and to engage in fun!
Exposure Visit

BUDS organized a visit to the Firoz Shah Kotla Stadium on 4th June-2016. The main purpose was to provide an exposure, outing and social confidence building to vulnerable children and youth of Mori Gate. Twenty children saw the final cricket match between two famous clubs of Delhi.

That was a great experience for the children and youth, because this was their first visit to any stadium. One of the youth Manisha said “I am 16 years old and born in Delhi, but I have never seen any stadium before this visit; it is very special experience for me”

Networking

BUDS Staff networked with senior railway and police officials in our Red Fort & Nizamuddin Railway station regions. One of the major achievements of the BUDS team was to develop a strong network with the local RPF (Railway Police Force), GRPF (Govt. Railway Police Force) and Delhi Police. The team is also established linkages with Missing Person Squad, New Delhi for their support to provide information to parents about their missing children. Delhi police has been very encouraging and supportive; some of the senior officials have extended their support to make the program strong and effective.

Continuous linkages have also been established with NGOs working for street children on substance use such as NADA India Foundation, Prayas, Salam Balak Trust, Sathi, Subhiksha, Chetnalaya, Railway Children India, Don Bosco, Sard and Save the Children.

BUDS Donors

- Department of Biotechnology, Govt. of Science & Technology, Govt. of India
- PricewaterhouseCoopers (PwC)
- Universal Business & Marketing Associates
- Participation Finance & Holding (India) Pvt.Ltd.
- Pee Empro Exports Pvt.Ltd.
- Emppel Fortitus Pvt. Ltd.
- Orient Fashion Exports (I) Pvt. Ltd.
- Vasundhara International
- Learning Link Foundation (LLF)
- Rimple Lohia
- Sharadha Wasu
- Mr. Prabjot Singh Bhullar
Governing Board of Trustees

Dr Rajeev Seth
MD, FIAP, FAAP(USA)
President Senior Consultant
Pediatrician, E 10 Green Park
Main, New Delhi 110016

Dr Navin Khanna
PhD General Secretary,
International Institute of Genetic
& Molecular Biology, Aruna Asaf
Ali Marg, New Delhi 110067

Dr. R. N. Srivastava
Past President Indian Academy of
Pediatrics and Advisor IAP
Child Abuse Neglect and Labour
group & Senior Consultant,
Apollo Hospital, 487, Madakini
Enclave, New Delhi – 110019

Mr Ramesh C Mody
Chief General Manager Reserve,
Bank of India (RBI)(Retd), H -5
D Saket, New Delhi 110017

Ms. Bonnie Uppal
22, Feroz Gandhi Road, Lajpat
Nagar III, New Delhi 110024

Ms. Priti Suri
Advocate & Legal Advisor,
S-88, PanchShila Park,
New Delhi 110 017

Dr. (Mrs.) Tulka Seth
Additional Professor,
Department of Hematology,
All India Institute of Medical
Sciences, New Delhi 110 049

Ms. Reena Abbassi
Administrator ORKIDS,
F-30, Green Park Main,
New Delhi 110016

Dr.(Prof.) Indra Taneja
Senior Consultant Pediatrician,
D-55, G.K.Enclave,
New Delhi 110 048

BUDS Staff

Yawar Qaiyum
Director Operations

Aarti Kapoor
Administrator

Jyoti Sharki
Office Coordinator

Shobha
Counselor

Sandhya Mandal
Counselor

Id Mohammad
Vocational skills and
computer coordinator

Shakil Ahmad
Field multipurpose worker

Sunita
Field multipurpose worker

Durgesh Kumar Gupta
IT Specialist

Bindu Chamoli
Remedial education
specialist

Begum
Community Mobilizer

Ganga Devi
Cook

Mary Tirkey
Care taker

Raj Kumar
Driver

Volunteers

Dr Shalini Bansil
Dr Meera Prakash
Dr Uma Agrawal
Ankur Chabbra
Tabrez Qaiyum
Jyoti and Nisha

BUDS Advisory Board

Mr. V.S.Gurumani
Mr. Rajesh Ranjan Singh
Dr. Deepak Chowdhary
Mr. Om Taneja

Institutional Review Board

CHAIRMAN
Prof. (Dr) A.K. Susheela, Ashoka
Fellow, Ph.D., F.A.Sc., F.A.M.S,
Executive Director, Fluorosis
Foundation of India, New Delhi
& Former Professor of AIIMS,
New Delhi, Saransh Apartments,
Block, B-1, 34 Indraprastha
Extension, Delhi– 110 092

MEMBER SECRETARY
Mr. Rajesh R Singh, Social
Scientist, Chief Operating
Officer, MAMTA, Health
Institute for Mother and Child,
B5 Greater Kailash Enclave
2, New Delhi 110048

MEMBERS
Dr Sheetal Aggarwal, MBBS,
DNB, MNAMS, Head & Director,
Department of Obstetrics &
Gynecology, Rockland Hospital, B33-
34 Qutab Institutional Area, Tara
Crescent Road, New Delhi 110016

Dr Uma Agrawal, MBBS, DCH
Senior Consultant Pediatrician, G15
PaschimVihar, New Delhi 110063

Dr Navin Khanna PhD, Senior
Scientist, ICGEB, ArunaAsaf Ali
Marg, New Delhi - 110 067

Mrs. Meeta Choudhury,
Sociologist, Community Social
Worker, F 12 Green Park
Main, New Delhi 110016

Ms Punita Bhargava, Advocate
Partner Inventure IP Advocate
and Consultants & Member, IPR
Think Tank, Govt. of India, 417,
M.C. Setalvad Block, Bhagwan Das
Road, New Delhi - 110001, India