
EDUCATING HOMELESS GIRLS AND POOR CHILDREN AT RISK OF SCHOOL DROP-OUT AND HOMELESSNESS

BANDUNG, INDONESIA

PROJECT PROPOSAL

JANUARY 2012

*Everything we do is a drop in the ocean.
But if we don't do it, that drop will be lost forever.*

Mother Teresa

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1. SUMMARY

Indonesia is home to 5.4 million abandoned children. In the last ten years in Bandung alone, between 3,000 and 11,000 children were on the streets. Unprotected, these children are vulnerable to mental trauma, addictions, sexual diseases and HIV infection. They receive no education and have little chance of ever living a better life. Homeless girls are especially at risk of trauma and sexual exploitation, potentially leading to pregnancies producing new generations of street people. The few support services there are in Indonesia face major challenges. Funding largely depends on foreign donors and private initiatives.



Rotary Club Bandung Braga Metropolitan has initiated a project that aims to make a change in the lives of 20 homeless girls and in those of 60 poor children at risk of school drop-out and homelessness. We aim to provide the homeless girls with a loving home, social and health care and an education, and to help the poor children with social support, health care and an education. By strengthening the poor children's educational and self-reliance skills,

we aim to prevent school drop-out and homelessness and decrease the risk of exposure to drug abuse, HIV infection and pregnancies.

Program components are in line with the Millennium Development Goals. The United Nations Child Status Index tool will be applied to the assessment and individual development plan of the children.

During the initial stages of the project, contact was made with existing agencies SEMAK, a children outreach service, and SOS Children's Villages Indonesia. SEMAK is eager to cooperate with the project and is willing to provide support and outreach staff, who will be trained and supported by money raised in the program. SOS Children's Villages Indonesia have also taken up this project with incredible enthusiasm. The children in the program will be housed in SOS Children's Village in Lembang, which means they will automatically be part of a loving community. The children will be treated as any other child in the Village and will therefore be able to make use of all the facilities on offer there, such as a library, playground, social center and sports fields and the services of the Children's Village's support staff. With the money raised in

the program, SOS Children's Villages will provide the children in the program with housing, support, guidance, nutrition and health care. They will also take care of the organization of the children's formal education.

All the children covered by the program will receive formal education. The budget for their formal education for a period of five years is roughly half the total budget required for each child. If they so desire, sponsors may donate funds specifically for the purposes of formal education.

Budget summary

Please note: the costs for Program Management are not included in the budgets outlined below. We hope to source a highly qualified Program Manager and to find appropriate funding for the costs related with program management.

Part 1 (A loving home, care and education for 20 homeless girls for five years)

- Costs for formal education 49.500 euros (495 euros per girl per year.)
- Other costs 45.466 euros (455 euros per girl per year)
- Total costs 94.966 euros (950 euros per girl per year)

Part 2 (Preventing 60 poor children from dropping out of school and becoming homeless for five years)

- Costs for formal education 40.633 euros (135 euros per child per year.)
- Other costs 56.773 euros (190 euros per child per year)
- Total costs 97.436 euros (325 euros per child per year)

An amount of Rp 72 million (about 6,000 euros) has already been raised by private donations, *Rotary Club Boxtel Oirschot & Haaren*, *Rotary Club Amsterdam Nachtwacht* and the *Doctors for Homeless Foundation Amsterdam*, all from the Netherlands. Corporate Social Responsibility financial and vocational support has been agreed for the first three years of the project by *PT Goodrich Pindad Aeronautical Systems* based in Bandung Indonesia.

It is hoped that Rotary Clubs, NGOs, public and private partners around the world will be inspired to support the often overlooked homeless children in low resource and transitional countries. Homeless children need us most and every child deserves a loving home.

Bandung, June 2010 to December 2011

2. HOW A ROTARY CLUB IN BANDUNG, INDONESIA BECAME INSPIRED TO HELP HOMELESS CHILDREN

BACKGROUND

Indonesia is home to 5.4 million abandoned children, including an estimated 230,000 homeless children without any care-givers. In the last ten years in Bandung alone, between 3,000 and 11,000 children were on the streets, sent by their parents to help earn an income.^{1 2} Homeless children lack access to basic living conditions, safety, education and affectionate guidance. Unprotected, these children are vulnerable to mental trauma, addictions, sexual diseases and HIV infection. Within homeless populations, homeless girls are most at risk of trauma and sexual exploitation, potentially leading to pregnancies producing new generations of street people. Therefore, homeless girls deserve our full attention. In Indonesia, the size, nature and capacity of support services to prevent school drop-out, street life and homelessness and the support of street children are major challenges. Funding largely depends on foreign donors and private initiatives.

For more information about government regulations and existing programs, see *An overview of existing policies and programs*.

IRA'S DREAM

In June and July 2010, members of Rotary Club Bandung Braga Metropolitan reached out to the streets and met with former street child Ira. From the age of 9, after the death of his mother and absence of his father, he wandered alone through the streets of Bandung. He slept on a piece of cardboard behind a bus station and learned to survive. For many years, Ira looked for his father. He met with outreach workers who taught him to read and write and told him about the hazards of alcohol, drugs and infectious diseases. Inspired by the outreach workers, he became motivated to choose a better life. Today Ira is 30 years old. He is married, has a son and is now an outreach worker himself. He shares the lessons he learnt with new

¹ Irwanto S. et al. Situation of street children in Indonesia: result of social mapping in 12 cities. Atma Jaya Catholic University, Center of Development Studies, and Ministry of Social Affairs, 1999.

² Indonesia is home to 5.4 million abandoned children under the age of 18, many of them living on the streets, and this number continues to increase. The growth in the number is unhealthy because they don't have homes, protection and access to education and healthcare. Indonesia has at least 230,000 street children, 12,000 in Jakarta, according Social Services Minister Salim Segaf Al Jufri". Jakarta Post, 15 March 2010.

generations of street children. Rotary members were touched by his story and his dream to run a shelter and provide better support for children in Bandung.

For a detailed rendering of Ira's story, please see Looking for my father, or the story of Ira, a former Bandung street child.

INITIAL OBJECTIVE

Ira's dream was shared at the Rotary Club Bandung Braga Metropolitan meetings and all the club members felt the need and were willing to help realize his dream.

The initial objective of the *Rotary Club Bandung Braga Metropolitan* Street Children Project was:

To provide homeless girls of 13 years old and younger who don't have a care giver with boarding facilities, to provide them with a safe and loving home and with social, educational and health care support, and to prevent drug abuse and HIV infection.

ACTION PLAN

During the weekly meetings of Rotary Club Bandung Braga Metropolitan, an action plan was drawn up in order to obtain a comprehensive picture of the characteristics and problems of street children, the existing



government and private support initiatives, and the needs and possibilities to realize a shelter and program for street children in Bandung.

In December 2010, a project committee was formed within Rotary Club Bandung Braga Metropolitan. The committee opened a website, an email address and a bank account. Weekly club meetings were held to plan and execute the following activities:

- To gain insight into the Indonesian government regulations to support street children, meetings were held with government officials on the relevant regulations and any existing programs for street children. Street children support programs were visited and staff were interviewed. For the findings, please see An overview of existing policies and programs.

To map the specific problems and needs of street children, the committee organized an outreach event in the parking lot of the Great Mosque in Bandung. The problems and needs of street children were explored and direct social and medical care were given. For the findings, please see

- Rotary outreach event.
- To investigate the possibilities of recruiting homeless street girls without care givers, a survey was conducted by street workers. They explored hot spots and mapped the characteristics of homeless girls and their potential for admittance to a boarding facility. For the results of the survey, please see SEMAK street children survey.
- The options with regard to setting up a legal body to develop a comprehensive program and sustain the project were explored with notary support. Options to realize a boarding facility and support program were explored by means of site visits. To establish a boarding facility and comprehensive program, an NGO would be the suitable legal body. Potential boarding facility locations were identified in and outside Bandung city. However, it would take major efforts and budgets to realize a suitable facility and comprehensive program. The solution chosen was a collaboration with existing parties. See Potential collaboration with existing organizations for more information.
- Staff issues were addressed by exploring the need to hire and train outreach and boarding facility staff.
- Fundraising and budget development issues were addressed in regular meetings.
- Ideas, project development documents and updates were shared within Rotary and outside it. During a Rotary event in Bandung in April 2011, a project report was handed to the President of Rotary International, Kalyan Banerjee from India, and the District Governor of Indonesia, Ridlo Eisy.
- The needs for management and organizational infrastructure were surveyed.

AN OVERVIEW OF EXISTING POLICIES AND PROGRAMS

The United Nations Convention on the Rights of the Child

The United Nations Convention on the Rights of the Child outlines the basic rights of children and the responsibilities of the governments to protect children. Street children have the same rights as other children and the same laws should apply to them:³

- Every child has a right to education, and the state has the duty to ensure that primary education is made free and compulsory.
- Every child has the right to the highest level of health possible, and to access health and medical services.
- Every child should be protected from narcotic and psychotropic drug use, and from being involved in its production and distribution.
- The state has the obligation to ensure that the child victims of armed conflicts, torture, neglect, maltreatment or exploitation receive appropriate treatment for their recovery and social reintegration.
- All actions concerning children should consider their best interests. The state is to provide adequate care when parents or others fail to do so.



The Indonesian government and street children

The Indonesian report submitted to the Committee on the Rights of the Child, January 2004, stated: “The Government of Indonesia attaches great importance to the rights of the child and has been at pains to implement all possible and necessary measures to respect and ensure that these rights are protected. The goals and targets set out in the Millennium Declaration and in the World Fit for Children and Plan of Action serve as framework references for the Government of Indonesia to promote national development planning

³ http://whqlibdoc.who.int/hq/2000/WHO_MSD_MDP_00.14_Module9.pdf

for children and child rights-based programs. The Convention of the Rights of the Child, which Indonesia ratified in 1990, provides the norms and guiding principles for these programs.”⁴

Indonesian laws and regulations to protect and support street children are available and human child rights are formally acknowledged. State shelters and open house programs for street children have been introduced. In 2007, West Java had 54 houses for street children, of which 10 were located in Bandung, for a total of 3,800 children.

A survey on the perception of guidance in transit open-house programs among 60 children aged 6-18 in Bandung showed that these programs needed a reorientation in accordance with the interests and talents of the children, and should emphasize on skills, and physical, mental and social development.⁵

In August 2010, during a visit by the Rotary Club Bandung Braga Metropolitan committee to the Bandung Social Welfare Department, officials reported: “In West Java an estimated 3.2 million children aged 5-18 would fit one of the 22 government assigned problem categories, among which are street children. West



Java has 26 shelters (*panti*) for homeless people, hosting 20 people per shelter. In 2009, Bandung had 4,800 street children, half of whom were girls. The provincial budget for all social services for children is 0.6%. A comprehensive program, human resources, technical assistance and budgets are lacking to adequately support millions of children in West Java.”

⁴ <http://www.ohchr.org/EN/HRBodies/CRC/Documents/Info/ai-indonesia-2.pdf>.

⁵ Tjahjorini Sr. et al. Perception of street children toward social guidance in open house program at Bandung city. *Jurnal Penyuluhan* 2005; 1(1): 21-32.

NGOs and private programs for street children in Bandung

In response to the growing number of street children in Bandung (over the last decade estimates ranged between 3,000 and 11,000), over 50 NGOs and voluntary agencies have been providing some kind of support for street children. However, an overview of programs and output is lacking, services are fragmented, and coordination, collaboration, capacity building, charity budgets are limited and often temporary. Outreach medical care to the homeless is non-existent in Bandung.

Outreach staff from three NGOs (*Bahtera*, *LAHA* and *SEMAK*) providing support for street children gave the following information: "The typology of street children in Bandung varies per area. The Cibarengko area is dominated by Javanese adults and children who have been begging for a long time. In the Alun Alun area, most children are from broken homes and school drop-outs. In the Pasir Koja area, most are local children sent onto the streets by their parents to make money. Since 2005, the number of street children has been growing rapidly, and more and more young children have been observed in the streets. The younger the child, the more money they can earn. For example, a child above 15 years old can earn up to Rp 20,000 a day (about 1.6 euros), but the younger ones can earn between Rp 20,000 and 50, 000 a day (between 1.6 and 4.15 euros)."

Until February 2010, Bahtera supported 310 street children, 223 child trafficking victims and 48 children infected with HIV. They also focus on those who are addicted to drugs and at risk of being infected with HIV. LAHA (sponsored by Save the Children) supported 40 children with criminal/law cases in the justice system advocating the protection of the children's rights, and 150 domestic child workers. SEMAK targets broken-home children, who are made to leave home by their parents to make money. Helping the children with access to education and health care is part of all programs. However, experience learns that it is difficult to motivate the children and not easy to help them. An important issue in supporting the children is a personal approach to the parents.

Street children and outreach workers reported: "The police hold raids sweeping the children off the streets, and this practice is common. The children are taken to a shelter and told to stay there, but programs and personal assistance are not provided. Specific house programs for homeless girls are lacking. Overall, capacity and program implementation, staffing and budgets remain major challenges to meet the rights of thousands of street children in Bandung.

ROTARY OUTREACH EVENT

In June 2010 two members of Rotary Club Bandung Braga Metropolitan, both medical doctors, conducted an outreach activity with street workers from the Mawar clinic (for sexually transmitted diseases) and met with street children in the Alun Alun area near the Great Mosque in central Bandung. They saw poverty and hopelessness as they met pregnant mothers, babies, young children and adolescents. Their social and medical issues suggested they did not receive any formal support. Many were perceived at risk of attracting and spreading preventable infectious diseases. They felt the need to take action and organize an outreach event.



To estimate the number of homeless people to be served during the event and the costs of health-check packages, outreach street workers were asked to provide information on identified homeless people in the Alun Alun area and around Cikapundun Bridge in Bandung. Their figures were as follows: a total of 146 homeless people, of which 44 children between the ages of 0 and 12 (21 boys and 23 girls), 44 adolescents between the ages of 13 and 20 (27 boys and 17 girls) and 58 adults of 20 years and older (31 men and 27 women).

In August 2010, other Bandung Rotary Clubs were visited to share the initiative, raise funds to cover health-test packages and other items such as clothes, food, toys, and hygienic kits. In response, Rotarians spontaneously donated the money that was required to cover the health-check costs, linked within their networks and instantly obtained items from *Indofood*, *Unilever* and *Abbott* and recruited volunteers to help organize the event.

Once the budget and items were available, the outreach street workers visited homeless children and adults in the areas and handed out around 200 coupons for a free health check and practical gifts. To provide the health checks, laboratory tests and medication, a volunteer medical team of three medical doctors, three counselors, a specialist in sexual disease testing and five experienced outreach workers

were recruited. Permission to hold the event was obtained from the police and the owner of the Alun Alun basement at the Great Mosque.

On Saturday 28 August 2010, between 9 and 12 am, around 80 volunteers gathered in the Alun Alun basement; 35 from Bekasi Catholic Church, 10 from the Catholic Church of Indonesia, 10 from Bandung Rotary Clubs and 16 from Mawar clinic. In addition, 6 medical doctors were present. The event was attended by more than 300 homeless people, ranging from babies and children to adolescents and adults. Gift bags were handed out, food and drinks were shared, hygienic and dental health instructions were given, children played games and sang, and adolescents played the guitar and watched a presentation on the health risks of drug abuse.



The medical team examined 218 homeless people: 115 children between the ages of 0 and 18 and 103 adults of 19 years and older. Children presented skin problems, fever, common cold, coughing and diarrhea. Among the 7- to 15-year-olds many had experience with glue sniffing, whereas the use of alcohol, cannabis or heroin was hardly reported. The children had a tough and aggressive attitude, smoked cigarettes and sported tattoos and piercings. The older children acted as 'role models' for the younger ones, who copied their behavior. Homeless adults reported stress, high blood pressure and lung and skin disorders. Some adults had lived unsheltered in the Alun Alun area for more than twenty years.

Blood and sexual tests were taken from 148 homeless people of 13 years and older. The results showed high percentages of sexually transmitted diseases: syphilis 30%, gonorrhea 9% and HIV 1%. Among the 13-to-18-year-olds, three 14-year-old boys had syphilis, a 15-year-old girl and boy both had gonorrhea, but none of the adolescents were infected with HIV. Among the homeless adults, 42 cases of syphilis were found, 11 of whom co-infected with gonorrhea. One homeless couple of 22 and 25 years old were HIV-infected. Medications were provided and follow-up counseling and treatment was initiated.

Two Bandung newspapers reported the event: *Express Metropolis* (29 August 2010) and *Galamedia Bandung* (30 August 2010).

The following conclusions can be drawn from the results of the outreach event:

- A high number of the homeless population invited personally actually attended the event.
- The health issues and sexual diseases encountered indicated a high need for health screening, treatment and case management.
- In a few weeks' time, Bandung Rotarians were able to mobilize people, funds and utilities, and organize a successful event.
- Rotarians were increasingly inspired to realize a shelter for homeless girls in Bandung.

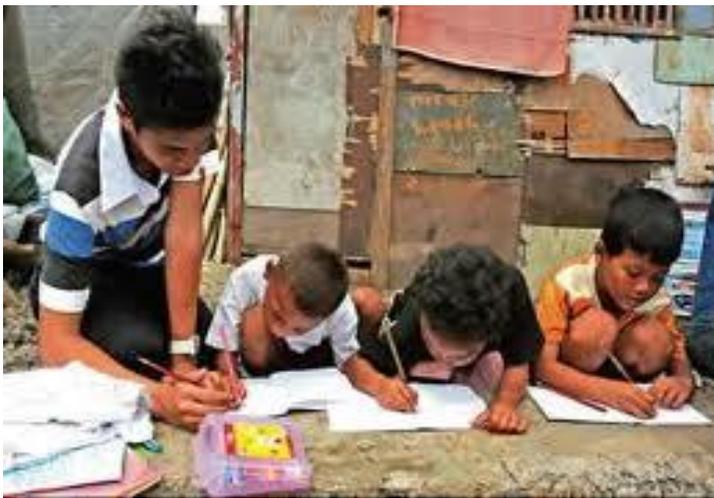
SEMAK STREET CHILDREN SURVEY

Rotary Club Bandung Braga Metropolitan requested *SEMAK (Solidaritas Masyarakat Anak)* street workers to conduct a survey of street children. Between 20 June and 11 July 2011, three teams of two street workers each reached out between 9 am and 6 pm and identified 7 hot spots: Kiaracandong Train Station, Cimahi Train Station, Ujung Berung Market, Gede Bage Central Market, Padalarang Train Station, Ciroyom Train Station and Cimindi Train Station and surrounding areas. Standardized data collection and reporting included the numbers of street children in the area, name, age, sex, appearance, characteristics, problems, mobilization, and the environment the children live or hang out in. Outreach street workers observed many street children and managed to talk to 40 homeless children (24 boys and 16 girls), 8 of whom were under 13 years old, 11 between 13 and 15 years old, and 21 between 15 and 18 years old. The stories of the street children and the observations were reported as follows.

Kiaracandong Train Station and surrounding areas

Mita and Ivan were often found at Kiaracandong Train Station. Mita is originally from Cicalengka. Both were street singers on the train headed to Cicalengka. They also sang for money in people's houses around Binong Jati. Mita often followed and stayed in the street with her 'Dollar Father' rather than going home. The meaning of Dollar-Father is godfather or fake father. Some Dollar Fathers lived around the railroad, or near the railroad crossing doors.

Upit sang for money in the areas not too far from his home and he always went back to his home in Gugunungan (an area near Kiaracandong railroad.) Wanti lived on the side of the railroad. Everyday at around 7 pm she went to Cikudapateuh Train Station. We didn't know Wanti's exact work, but according to people in a small kiosk she was often used by adults. Other children, around 6-8 of them, lived around the area of the railroad crossing. Some others went home every night, and most worked as street singers. Herman, Ivan Hendra and Puloh and other street children under 13 years old were guided by their parents. A seller called Mamih by his neighbours said that some of the street children still went to school and lived at Gugunungan.



In general, the children looked dirty. Many of them had skin problems such as ulcers. A boy called Puloh seemed to suffer from severe skin problems. Some of the children looked cleaner than other children but many of them showed itching skin with multiple scratches. Upit told that she and some older friends often consumed cheap liquor and Aibon glue. Wanti looked rather different from other children. She looked

better dressed and had no skin illness. She came to the Station around 6 pm and didn't join the other dirty children with skin problems. However, she told that she knew almost all the children wandering around in that area.

Cimahi Train Station and surrounding areas

The street children sang for money on public transport vehicles and sometimes at the railroad crossing. They sing when the road is closed due to a passing train, hoping to get some money from the motorists and motorcyclists. Jaka and all his friends lived near the railroad. Jaka had a god-grandfather and grandmother. Aden and his parents lived in Garut. Aden had an uncle who lived in Bandung.

All children wore dirty clothes and some of them wore no shoes. Skin illnesses, such as sores and dry skin, and cracked soles were observed. A boy called Deni seemed to suffer from quite a serious skin disease. All children sniffed Aibon Glue. Most of the children above 15 years also consumed a drug called Dextro. Sometimes the leftovers of the glue could be seen on their faces and clothes. Street children around the

area had no-one to look after them because they said that an adult who used to take care of the children in the area and had a strong influence over them had just passed away. A lady who ran a public toilet had quite a close relationship with the street children and she became a person whom the street children gained information and consultation from.

Ciroyom Train Station and surrounding areas

The children usually wandered around Ciroyom Market. They gathered in the back area of the market, near the public toilets. Most of them sniffed Aibon Glue. They looked dirty, smelled bad and seldom took a bath. Among those children, our facilitator could only communicate with two children called Ahmad and Ruli. Ahmad came from Cicalengka and he said he never returned home to Cicalengka. Ruli came from Cikutra. In order to fulfil their daily needs, they sang for money and begged on public transport.

Street children around Ciroyom Train Station wandered around the market and station. Sometimes they played at Padalarang or Cicalengka Areas. They slept at unused kiosks or empty stalls. Ahmad and Ruli never went home. According to Ahmad he still had both parents. Ruli said that her parents were divorced. Many adults around the market also inhaled and consumed Aibon Glue and joined the street children in the back part of the market near the public toilets.

Cimindi Train Station and surrounding areas

At Cimindi Train Station, there were two groups of street children. The first group wandered around the market. Another group wandered around the railroad crossing. The difference between two groups was apparent from their appearance and clothes. The market group looked dirtier and the group around the railroad crossing looked relatively clean. Both groups sniffed Aibon Glue.

According to Ade, a boy from the market group, his group always slept in market kiosks that were not used by the owners. Ade originally came from Tasikmalaya. The children from the railroad crossing slept around the station area. According to Ivan, a boy originally from Purwakarta, he never went home, but he didn't tell the reason why. Other girls always went home. Ade and Rizki usually begged for money on public transport vehicles passing through Cimindi Market and the economic-class train heading Padalarang. The teenagers didn't beg for money. Their activities mostly included singing for money or helping to direct cars on the roads for money.

Ujung Berung Market and surrounding areas

Ujung Berung Market is an area where street children have been assisted by Yayasan Saudara Sejiwa (SS Foundation). We were informed that there were two homeless girls, both orphans. They always sang for money at Dayeuh Kolot road.

Gede Bage Central Market and surrounding areas

In this location there were some families who lived near the market. They worked as garbage collectors. We also found some girls picking garbage with their mothers, aunts or relatives. According to them, the children usually wandered around the central market in certain seasons or times. During holidays, many children come to the Central Market to work as garbage collectors or beggars. Bigger children usually earned money by helping people carry their heavy shopping. These seasonal young workers came from areas around Gede Bage Central Market and there were also many from Cicalengka, Garut, Jatinangor, Ranca Ekek and surrounding areas, said Ujang and Asep, both working as public toilet guards.

POTENTIAL COLLABORATION WITH EXISTING ORGANIZATIONS

During the course the initiatives described above, positive contact was made with two existing services: SEMAK, who conducted the Street Children Survey (see SEMAK street children survey), and SOS Children's Villages Indonesia. Both showed a keen interest in collaborating with Rotary Club Bandung Braga Metropolitan.

National Director of SOS Children's Village Indonesia Gregor Hadi Nitihardjo and staff of the Lembang Village, Program Director of SEMAK Achok Sarlistyarso and co-workers and the members of Rotary Club Bandung Braga Metropolitan held meetings and visited each other's organizations. Lessons were shared and practical and technical issues discussed. These meetings have created ownership and commitment to help homeless girls.

SEMAK

Children outreach service SEMAK was founded in 2000 to look after children from broken homes who ran from a life with poor and jobless parents. SEMAK has been providing practical support, such as money, clothes, food and informal educational support. They tell the children how to act if they get caught by the

police, what to do if they get lost or ill, how to find the primary care centers and how to obtain a referral letter for the hospital.

SEMAK also tries to help children to express their moods and emotions and encourages them to write down their feelings and experiences.

SEMAK conducted the Street Children Survey (see SEMAK street children survey) and showed a keen interest in improving care for street children and collaborating with Rotary Club Bandung Braga Metropolitan.

SOS Children's Villages Indonesia⁶

Based on a dream to provide poor and abandoned children with a loving family home, and provide care, education and health, SOS Children's Villages Indonesia was founded in 1972. Forty years later, a total of eight Indonesian SOS Children's Villages have been established in Sumatra, Java, Bali and Flores, supporting over 1,000 children. The villages provide alternative families for children who have lost parental care and cannot live with any part of their families of origin, and for whom long-term placement is in their best interest. SOS families are headed by an SOS mother/parent. The program interventions include Care (direct care, protection, food, nutrition and shelter), Education (formal, non-formal and informal education) and Health (preventative and curative health and psycho-social support). The dream of SOS Children's Villages has been reality for thousands of children around the world.

The fundamentals and internalized philosophy in personnel at SOS Children's Villages are reflected in the vision, mission and values to keep the dream alive, and is growing and spreading to communities in need:



VISION: Every child belongs to a family and grows with love, respect and security.

MISSION: To build families for children in need and help them shape their own futures and share in the development of their communities.

VALUES: Courage, responsibility, trust and reliability.

⁶ www.sos-kd.org

PAIN AND COURAGE: AN INSPIRATION

It has been an intense, interesting and rewarding adventure to search and collect information related to the phenomenon of street children, and to collect information from the stakeholders involved. Lessons have been taken from multiple levels: from government officials to the children in the streets of Bandung.

It hurts to witness so many children begging and hanging around in the streets of Bandung. A closer and longer look at these children hurts even more. Their existential pain, anxiety, loneliness and hopelessness, and circumstances including exploitation and sexual abuse are unbearable.

From listening and observing activists and outreach workers in the streets, we can learn courage. These community workers show compassion, endurance and friendship. Undertrained, underpaid and without resources, these heroes make a true difference to the lives of street children. Most of these programs stand alone; they have to beg for attention, and technical and financial support. In these circumstances, it takes courage to not give up, to not abandon the street children and to continue to live the words of Mother Teresa: "Everything we do is a drop in the ocean. But, if we don't do it, that drop will be lost forever".

Reading official documents outlining programs to support street children, and listening to government officials, it becomes clear that it takes vision, mission and values to act upon what is written and implement strategies to protect the rights of street children. Above all, it takes courage to reach out to the community, integrate knowledge and experience, and send resources to cure the pain of street children.

To make a long story short, Rotary Club Bandung Braga Metropolitan became inspired to contribute. The following chapter outlines our concrete plans to help some of the street children here in Bandung.

3. THE PROPOSAL OF ROTARY CLUB BANDUNG BRAGA METROPOLITAN

In collaboration with SOS Children's Villages Indonesia, NGO children outreach service SEMAK, Rotary Club Bandung Braga Metropolitan proposes the following program.

The program is based on initiating, strengthening and sustaining education and preventive and curative care for children in high need in Bandung. It also serves as a pilot to explore the challenges and barriers in program implementation, capacity building, collaboration, process and content monitoring, evaluation and sustainability. Upon program accomplishment, it could and should serve as a template to be duplicated and scaled up in areas where there is an SOS Children's Village, across Indonesia and beyond, to provide more children with a loving home, care and education.

The objectives of the program are two-fold:

- To provide, in Bandung, within a period of five years, a loving home, care and education for 20 **homeless girls** aged 10 years and younger. This part of the program is described in detail in Part 1: A loving home, care and education for homeless girls.
- To provide in Bandung education, social and health care for 60 **poor children** up to 17 years old at risk of school drop-out, homelessness, drug abuse and HIV infection. This part of the program is described in Part 2: Preventing poor children from dropping out of school and becoming homeless.

PART 1: A LOVING HOME, CARE AND EDUCATION FOR HOMELESS GIRLS

From the streets to a loving home

In collaboration with officials, academic faculties and service providers, facilitate the recruitment and assessment of homeless girls in Bandung.

Recruitment. Hire and provide skills training for two SEMAK-based street workers who reach out to the streets four times a week to approach, win confidence, conduct a rapid assessment and prepare 20 homeless girls up till 10 years old (who live in the streets and are disconnected from their families or caregivers), for admittance to the SOS Children's Village in Lembang. Rapid assessment includes in-depth socio-economic and family background, and general education and health background.

Assessment. Provide capacity, facilities and tools to conduct a comprehensive and problem-oriented assessment, including the socio-economic, educational and health background, and current status. Hereto, the United Nations Child Status Index tool will be applied to six domains: 1) food security, nutrition and growth, 2) shelter and care, 3) child protection, abuse, exploitation, and legal protection, 4) wellness and healthcare services 5) emotional health and social behavior, and 6) performance, education and skills.⁷

Rehabilitation, re-socialization and informal education

Following the assessment, and based on the concept of acceptance and unconditional love and an individual development plan, the homeless girls will be given a home in the family houses at the SOS Children's Village. SOS house-mothers and six to eight children will be their new family. The former homeless girls will be introduced to routine family life and common behavior for well-being and harmony. A gradual process from street life to re-socialization and normative behavior will be encouraged and positively reinforced. House tasks and disciplinary rules will not be applied immediately upon admittance, but will only be introduced once the girls feel at home. Issues encountered upon professional assessment will be addressed and the required support provided and monitored. The support system will ensure the sustainability of the development and upbringing of the children.

Non-formal education

In the SOS Children's Village, participation in arts, skills and sports activities will start immediately. A program with traditional dancing, singing, musical instruments, computers, sewing, handicrafts, gardening, writing skills, cooking and sports is on offer. However, additional training of educators and utilities are needed. The SOS library is in need of an upgrade of both the system and the content and quality of the collection (hard and soft copies).

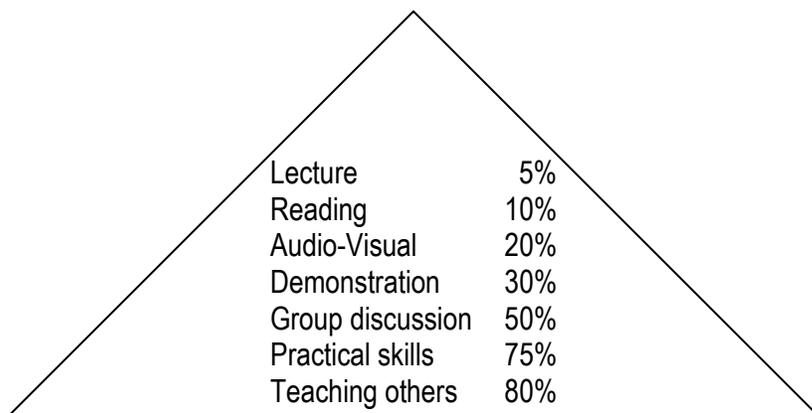
Formal education

The girls will be enrolled at SDN Pancasila public primary school in the close vicinity of the SOS Children's Village in Lembang. The library of the school is supported by Rotary Clubs in Bandung. Upon enrollment and schooling the girls will need shoes, school uniforms, stationary and budget for entrance fees, school fees and school activities. The SOS Children's Village needs are an upgrade to the computers in each house and education support utilities.

⁷ Child Status Index: A tool for assessing the well-being of orphans and vulnerable children — Field users' guide, USAID, July 2009. http://pdf.usaid.gov/pdf_docs/PNADR107.pdf

Encourage primary school teachers in participatory teaching methods. Experience with the Indonesian school system in general shows that pupils and students are not used to nor stimulated to express themselves, their thoughts or opinions. Moreover, teachers are reluctant and are lacking skills to give room to students' self-expression. As a result, self-expression and opinion-sharing skills are lacking in graduates, while Indonesia's economic activities are rapidly developing within an increasingly competitive working environment. Consequently, primary school teachers should be trained for participatory teaching methods. In addition, teaching in reproductive health and prevention of substance abuse and sexual transmittable diseases and HIV should be provided.

The learning pyramid⁸ below represents the relationship between the training format and the percentage of knowledge retrieved after the training:



First results

With financial support of *Rotary Club Boxtel, Oirschot & Haaren, Rotary Club Amsterdam Nachtwacht*, and the *Doctors for Homeless Foundation*, the Netherlands, two outreach workers will be trained in January 2012 to increase their skills in recruitment and assessment of homeless girls in Bandung. In March 2012, the first homeless girls will be housed and educated in SOS Children's Village in Lembang.

⁸ Learning Pyramid (after a compilation from the American National Training Laboratories, Bethel Maine USA by Van Vleuten, 2001), the choice of the type of training format determines the effect, and the amount of knowledge that can be retrieved some time after the training. Especially lectures and reading have a very low affectivity.

PART 2: PREVENTING POOR CHILDREN FROM DROPPING OUT OF SCHOOL AND BECOMING HOMELESS

Identification, assessment and support

In collaboration with officials, academic faculties and service providers facilitate the recruitment, assessment and hands-on support of 60 children with homes, but at risk of school drop-out and homelessness, in Bandung's poor area of Cikapundung.

Identification. Hire and provide skills training for four community workers who reach out in Cikapundung to identify families in distress, including children up to 17 years old.

Assessment. Provide capacity, facilities and instruments to conduct a comprehensive and problem-oriented assessment, including the socio-economic, educational and health background, and current psychological, emotional and physical health status in the 60 children. The Child Status Index will be leading in individual development plans.

Hands-on support. Based on an individual development plan, provide and monitor direct support for problems or domains of attention encountered upon professional assessment, and build and strengthen a social, educational and health support system. Strengthen the children and family reliance, and prevent school drop-out, drug use, HIV infection, homelessness and street exploitation. Ensure the sustainability of the community-based support system.

Non-formal education

Educational activities. Map non-formal activities on offer in the community area. Encourage participation in arts, skills and sports activities and environmental health. Activities can include traditional dancing, singing, musical instruments, computers, sewing, handicrafts, gardening (verti-culture), writing skills and cooking. In collaboration with officials and service providers, explore the availability of educators, family community support and utilities needed.

Encourage the development of community-based children, youth centers and libraries. Of note, with regard to libraries for children, Rotary Club Bandung Braga Metropolitan has developed the *Library in a Box program*, with each box containing 1,000 books, rotating between 50 sites in and around Bandung.

Formal education

The children are or will be enrolled in primary and secondary public schools in the area. For enrollment and schooling the children need shoes, school uniforms, stationary and budget for entrance fees, school fees, school activities and exams.



4. PERFORMANCE INDICATORS

The expected program outcome will be based on measurable performance indicators in line with the Millennium Development Goals (MDG) for education (goal 2) and health (goal 6), and to develop a global partnership for development (goal 8).⁹

MDG 2 Achieve Universal Primary Education

Target 2.A: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling; 2.1 Net enrolment ratio in primary education; 2.2 Proportion of pupils starting grade 1 who reach last grade of primary; 2.3 Literacy rate of 15-24 year-olds, women and men.

MDG 6 Combat HIV/AIDS, Malaria and Other Diseases

Target 6.A: Have halted by 2015 and begun to reverse the spread of HIV/AIDS: 6.1 HIV prevalence among population aged 15-24 years; 6.2 Condom use at last high-risk sex; 6.3 Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS; 6.4 Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years.)

Performance indicators will also be in line with the UNAIDS Core Indicators for the Implementation of the Declaration of Commitment on HIV/AIDS¹⁰. The UNAIDS National Programs on Knowledge and Behavior focus on blood safety, antiretroviral therapy coverage, prevention of mother-to-child transmission, co-management of B and HIV treatment, HIV testing, prevention programs, services for orphans and vulnerable children, and education. Important indicators are the percentage of most-at-risk populations reached with HIV prevention programs, the percentage of orphans and vulnerable children whose households received free basic external support in caring for the child, the percentage of schools that provided life skills-based HIV education within the last academic year, the current school attendance among orphans and among non-orphans aged 10–14.

⁹ <http://www.mdgmonitor.org/index.cfm>.

¹⁰ Source: http://data.unaids.org/pub/manual/2009/jc1676_core_indicators_2009_en.pdf (Monitoring the Declaration of Commitment on HIV/AIDS: guidelines on construction of core indicators: 2010 reporting. UNAIDS, 2009).

In addition, the performance indicators will include:

- A template to implement, and monitor, evaluate and finance a program for homeless and poor children.
- A report on program staffing and capacity building to support homeless and poor children.
- The number of staff, non-formal educators and volunteers recruited and trained.
- Any tools and teaching materials introduced.
- The number of homeless and poor children approached, recruited and supported.
- The children's baseline and quarterly follow-up assessment (Child Status Index).
- Detection of the children's needs introduction of support.
- The introduction of a map of policy-enabling and need-based care and support agencies.
- The number of children who received formal education and the percentage of school days attended.
- The number of children who received a diploma.
- The number of children with health problems who accessed healthcare services.
- The number of children who have understood sexual reproductive health, HIV and drug abuse issues.

5. PROGRAM MANAGEMENT AND ORGANIZATION

Staffing is based on fulltime employment, except for the program board and non-formal educators. Staff are passionate and dedicated to share their talents and skills in line with the program philosophy and objectives. Staff are pro-active, non-judgmental, open, willing to learn, teach, reach out, reach in, give and receive feedback, monitor and evaluate the children's problems and introduce and follow-up the required care.

Program Board

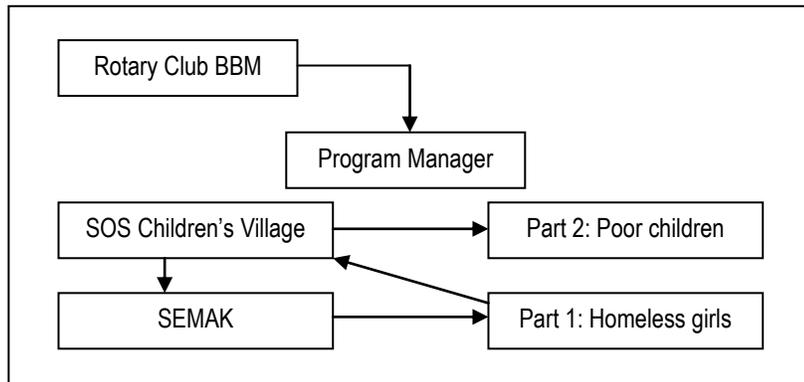
The board consists of six representatives, two per organization, from SOS Children's Village, SEMAK and Rotary Club Bandung Braga Metropolitan, on a non-paid basis. The board and program manager will meet four times a year to evaluate program implementation progress and barriers and challenges in capacity building, coordination and finance. Minutes of meetings will be made and shared with stakeholders. It is aimed to include government officials and academic and corporate partners in the board.

Program Manager

The program manager will be pivotal in linking organizations and professionals in line with the children's individual and problem-oriented support needs. The program manager is highly qualified and has knowledge and experience to support and advice homeless populations and relevant agencies, and staff recruitment, capacity building, program implementation and coordination, linking and building networks with stakeholders, and monitoring, evaluation and budget accountability.

The program manager will be responsible for designing, implementing and evaluating a detailed program using a logical framework including the general and specific objectives, intervention logic, and indicators of achievement, sources and means of verification, assumptions, and persons in charge, time frame, and budgets.

Organizational Structure



Staffing and capacity building

Program manager

Administration and finance staff

Part 1: Homeless girls

- 2 outreach workers SEMAK (outsourced by SOS)
- 5 care givers in SOS children's village
- 4 non-formal educators / volunteers in SOS children's village

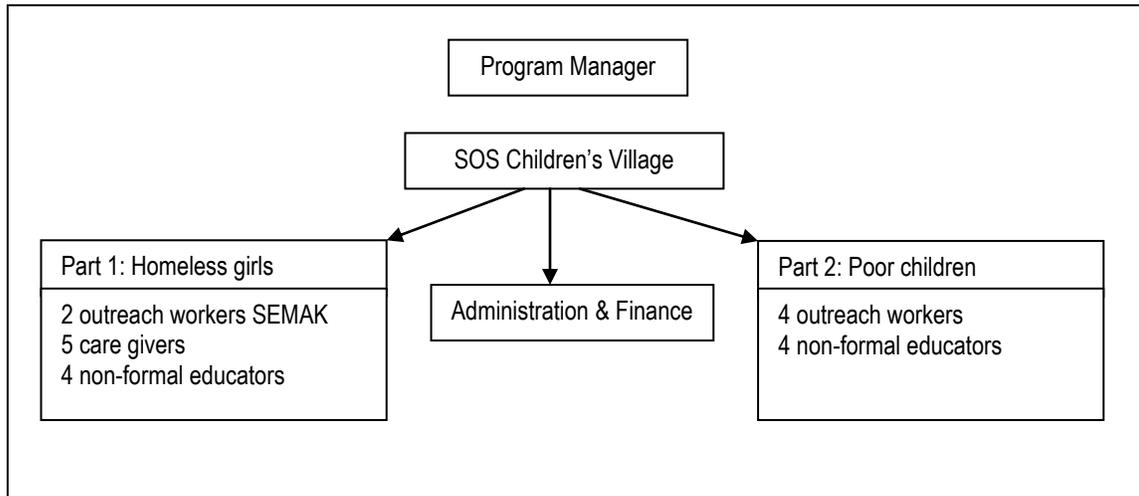
Part 2: Poor children

- 4 community workers
- 8 non-formal educators / community volunteers

Capacity building staff and care givers:

- Children recruitment and assessment (Child Status Index)
- Hands-on care and support
- Support system networking
- Data reporting
- Performance indicators
- Publication

Program staffing



6. FINANCE AND BUDGET

FINANCE SYSTEM

- SOS Children's Village will be budgetholder and accountable for expenditure, including the outsourcing of SEMAK outreach workers and community workers, and will be audited by an internationally recognized public accountant.
- The bank account of SOS Children's Village will be used and quarterly income, expenditures and balances will be reported to the program board and stakeholders.
- Bank withdrawal will need two out of three signatures.
- Payments will be done in cash or by bank transfer.
- Each mutation will accurately documented and approved by the supervisor.
- All expenditures should be in line with the approved budget by the program manager and board.
- The program manager has the right to reject expenditure which is not approved.

PROGRAM MANAGEMENT

The costs presented below are based on the experience and existing infrastructure in SOS Children's Villages and outreach service SEMAK. Due to the involvement of SOS Children's Village, operational costs can be kept to a minimum.

Please note: the costs for Program Management are not included in the budgets outlined below. We hope to source a highly qualified Program Manager and to find appropriate funding for the costs related with program management. These include the following:

- Salary of Program Manager
- Technical and financial administration
- Telecommunication costs
- Transport for Program Manager and support staff

- Capacity building of support staff
- Publication costs
- Calamity reservation
- Stationary for assessment (CSI) and follow up
- Introduction problem-oriented care and support
- Data management and reporting

During the course of the project, new and specific needs may appear to support non-formal and informal education and skills-training in both programs, which could include:

- Materials
- Training educators
- Upgrading SOS library
- Upgrading computer facilities in each SOS house and education support utilities
- Lessons and materials in prevention of substance abuse, sexual diseases and HIV

BUDGET NEEDS PART 1: HOMELESS GIRLS

For a complete overview of this part of the program, see Part 1: A loving home, care and education for homeless girls.

The support program for homeless girls will be an integral part of the SOS Children's Village in Lembang.

Recruitment

- 2 outreach workers Semak
- Training outreach workers
- Transport and allowances outreach workers
- Communication telephone and internet / email
- Exploring background and family visits
- Introduction visits of the children to SOS village

Child Package (in cooperation with SOS Children's Village Lembang)

1) Housing and care

- Housing and maintenance
- Caregiver support and guidance
- Food security and nutrition

2) Formal education

- Shoes, school uniforms and stationary
- School entrance fees
- Periodic school fees and exams
- Reimbursement school activities

3) Health

- Physical and psycho-social health and medication
- Periodic dentist's visit

Budget summary

This budget is for gradually recruiting and taking care of 20 homeless girls aged 10 years and under during the first two years. Years 3-5 include the total package for these 20 girls. The total budget is just under 100,000 euros or 1,000 euros per child per year, 500 euros of which is for formal education.

Please note: the costs listed under Program Manager above are not included.

	Year 1		Year 2		Year 3-5 per year		Total	
	IDR x 1.000	EUR	IDR x 1.000	EUR	IDR x 1.000	EUR	IDR x 1.000	EUR
Recruitment staff salaries	60.000	5.000	60.000	5.000	-	-	120.000	10.000
Transport and allowances for recruitment staff	3.600	300	3.600	500	-	-	7.200	800
Recruitment staff training	10.000	833	10.000	833	-	-	20.000	1.666
Child Package excluding formal education	30.000	2.500	78.000	6.500	96.000	8.000	396.000	33.000
Formal education	45.000	3.750	117.000	9.750	144.000	12.000	594.000	49.500
Budget Needed	148.600	12.383	268.600	22.583	240.000	20.000	1.137.200	94.966

BUDGET NEEDS PART 2: POOR CHILDREN

For a complete overview of this part of the program, see Part 2: Preventing poor children from dropping out of school and becoming homeless.

Recruitment and hands-on support

- 4 community outreach workers SOS Children's Villages
- Training outreach workers
- Transport and allowances outreach workers
- Communication telephone and internet / email
- Exploring background and family visits
- Exploring community support network

Child Package (in cooperation with SOS Children's Village Lembang)

1) Education

- Exploring and listing availability non-formal education activities
- Exploring and building care network
- Linking with schools
- Exploring needs to access and maintain education
- Formal education

2) Health

- Physical and psycho-social health and medication
- Periodic dentist's visits

Budget summary

This budget includes staffing and gradually recruiting 60 children aged 17 years and under and a package per child in year 1. Years 2-5 include the total support package for these 60 children. The total budget is about 100,000 euros or 335 euros per child per year, 200 euros of which is for five years of formal education.

Please note: the costs listed under Program Manager above are not included.

	Year 1		Year 2-5 per year		Total	
	IDR x 1.000	EUR	IDR x 1.000	EUR	IDR x 1.000	EUR
Recruitment staff salaries	60.000	5.000	60.000	5.000	300.000	25.000
Transport and allowances for recruitment staff	6.000	500	6.000	500	30.000	2.500
Recruitment staff training	10.000	833	4.000	333	26.000	2.165
Child Package excluding formal education	37.300	3.108	72.000	6.000	325.300	27.108
Formal education	55.950	4.663	108.000	9.000	487.950	40.663
Budget Needed	169.250	14.104	250.000	20.833	1.169.250	97.436

FUNDS RAISED

Until September 2011, fundraising activities resulted in an amount of Rp 72 million (about 6,000 euros). Besides private donations, *Rotary Club Boxtel Oirschot & Haaren*, *Rotary Club Amsterdam Nachtwacht* and the *Doctors for Homeless Foundation Amsterdam*, all from the Netherlands, were the major contributors.



Corporate Social Responsibility financial and vocational support has been agreed for the first three years of the project by **PT Goodrich Pindad Aeronautical Systems** based in Bandung Indonesia.



Bank account Bandung Street Children Project Indonesia

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GENERAL PROJECT INFORMATION

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8. LOOKING FOR MY FATHER, OR THE STORY OF IRA, A FORMER BANDUNG STREET CHILD

Indonesia is home to many thousands of street children. According to the Social Services Minister there will be no more street children in Indonesia after 2014. This is the story of Ira, a former street child in Bandung.

When I was five years old, my mother died of a heart problem. She left my father with nine children to take care of. We were from a poor kampong in Garut, West Java, but transmigration in the Soeharto days had taken us to Jambi, East Sumatra. My parents farmed rice and palm oil. After my mother passed away, we returned to Garut. We had no land, no house and no money. My father left us and me and my siblings were divided among our relatives. I stayed with my grandmother. She could not afford to send me to school. Grandmother taught me religion and I learned Al Quran citations at the mosque. I missed my father. They told me he had gone to Bandung.

When I was eight years old, I jumped on a bus by myself to find my father. I arrived at the Kebon Kelapa bus station in Bandung. I had no clue where to go. I met other children without parents. They seemed to hang out around the bus station day and night. From them, I learned to make money and to sleep outdoors. The other children taught me how to beg, polish shoes, collect cardboard and paper to sell, find food in rubbish, and also how to obtain items from people without their permission. At night I felt lonely and desperate. I cried many tears. I longed for my parents. I knew my mother was dead. My father should be in Bandung. Where? I did not know.

In those days, Pak Nugroho and his friends from Anak Merdeka, a non-governmental organization that supports abandoned children, reached out to the kids around the bus station, Alun Alun Park and along the railway tracks. They brought pencils and paper and taught us how to draw and use our imagination. On many occasions we met with them, and most of us learned to read and write our first words in the streets. They were friendly and understood what our lives were about. They gently followed our moves. I had told Pak Nugroho that I was looking for my father, a poor man from Garut named Pak Udin.

When I was eleven, a friend of Pak Nugroho was walking in Jalan Banceuy, near Alun Alun Park. He met a man named Pak Udin who said he was from Garut. The man was told a child was looking for a man like him. He was taken to Kebon Kelapa. I did not recognize the man, but the man recognized me. I had found my father.

When my father had arrived in Bundung, he had managed to find a job in a canvas store but up to the time I found him he had no place to stay. My father was homeless. Our lives continued the way they were. My father could not support me with shelter, education and parental attention. He worked at the store, saved a bit of money to send to Garut and rarely visited the family. I stayed with the other Kebon Kelapa children in our cardboard boxes and lived by the moment.

When I was fifteen years old, we turned to smoking cigarettes and sniffing a glue called Aibon in order to cope with daily life, boredom, insecurity and threats. At first, the glue would clog and hurt my nose. Later, I felt less hungry and more *senang*. There was more available. Drugs were given for free in the beginning, but once we got hooked we had to pay for them. We smoked ganja, swallowed red pills and I even drank lots of cheap vodka.

I turned eighteen. The Anak Merdeka people, who were kindly sponsored by the Save the Children Foundation, were fortunately persistent in visiting and educating us. They gave us information about drugs and health risks. I witnessed teenagers sniffing heroin, and saw how they felt awkward and in pain. I never took nor injected heroin. In those last days under Soeharto, there was no access to needles and syringes. I became aware of my bad habits and managed to give them up. Outreach workers Pak Agus, a kampung child himself, and Sheila Fish, an Anak Merdeka volunteer from Britain, played a significant role at this turning point in my life.

In the meantime, another outreach organization called SEMAK, devotedly run by Pak Acok, joined the activities. The outreach workers brought trust and education. They made me think and gave me the motivation to change to a better life. The Anak Merdeka and SEMAK people taught me how to draw and screen-print, how to work with wood and make ceramic figures, and I even had a license to drive a car. Destined to improve my life, I tried hard to cope and learn. I became a peer educator for street children. I learned how to support them and soaked up knowledge about children's rights.

When I was twenty-five years old, after seventeen years of living in the streets of Bandung, I was given the opportunity to live in a room. SEMAK had rented a place for me in the area I reached out in to meet the street children. SEMAK even gave me some money to cover transport. I was destined to help children in need by the way I myself was given support. Sadly, Anak Merdeka is no longer operational.

In the meantime, my father has grown old and fragile. He still works at the canvas store and has not managed to find a room yet. None of my eight brothers and sisters are in touch with him. He wants to stay in Bandung. A few years ago, I met with Ani. She was in training to become a kindergarten teacher, and volunteered at SEMAK. We fell in love and got married. The SEMAK program budget got cut and so did the payments for my room. Happily, due to another Save the Children supported program we found a new place to live and reach out to the street children, via a community program that works with families.

Today I am thirty years old. Most of my life I was a street child because I was destined to look for my father. Eight months ago I became a father myself. My wife and I are happy to have a room and a job to raise our boy.

It is my dream to help solve the problems of street children. I wish to run a *sanggar*, a shelter near the railway station. I would like to give room to about twenty to thirty street children and develop a program based on my experience. I wish to teach them about art, reading, writing, drugs and health risks. I deeply believe that the street children of today are in desperate need of our help. As for me, I want to be a responsible father to my son.

Bandung, 12 August 2010

Semangat Memberi terhadap Sesama

Bakti Sosial Rotary Bandung

ASIA/AFRIKA - Ratusan anak jalanan memenuhi ruang basement Masjid Raya Bandung. Mereka mengikuti acara Bakti Sosial dari Youth Grand Wisata dan Rotary se-Bandung yang bekerjasama dengan Klinik Mawar, Sabtu (28/8).

Pada occasion, panitia mengadakan aksi bakti sosial berupa pemeriksaan kesehatan, HIV/AIDS, pengobatan gratis, serta pembagian pakaian layak pakai bagi anak jalanan. "Acara ini bertujuan memberikan kepedulian bagi orang-orang telantar yang selama ini diabaikan, apalagi ini bulan Ramadan," ujar Lucia Ratna, mantan presiden IPP Rotary.

Selain aksi sosial dan pemeriksaan kesehatan, panitia pun menggelar sosialisasi bahaya narkoba bagi para remaja. Agar para peserta tetap semangat, tak ketinggalan panitia menggelar berbagai hiburan.

Dalam aksi tersebut, penyelenggara menuntun sekitar 60 relawan yang berlatar belakang dokter, konselor, dan pekerja sosial. Para relawan tersebut berasal dari Rotary, Wanita Katolik Santa Maritinus, dan Gereja Bethel Indonesia (GBI) Grand Wisata Bekasi.

Sementara itu, menurut penanggung jawab kegiatan, dr Barbrahas Lestari, acara tersebut digelar sebagai bentuk kepedulian terhadap masyarakat yang kurang beruntung. "Apalagi selama ini mereka seringkali terabaikan," dokter yang biasa dipanggil Barry itu menjelaskan.

Kegiatan ini mendapat antusiasme yang baik dari masyarakat. Hal itu terbukti dari jumlah peserta yang hadir yang mencapai target panitia, yaitu 200 warga kurang mampu.

Menurut dia, mayoritas yang datang merupakan penghuni lantai dasar Masjid Raya, sementara sisanya merupakan sunawitama yang biasa mangkal di daerah Alun-alun Bandung. **(rahan_suresh/job)**



ANTUSIAS Seorang peserta sedang memeriksakan kesehatannya pada acara yang digelar Rotary, kemarin.