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The Hans Foundation
endeavours to make
a quality impact
through its
passion and work

”

Ms. Shweta Rawat

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AVSM, SM, VSM**

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ACKNOWLEDGMENT



वतन के हर विकास से कदम मिला रहे हैं हम
तेज़ आँधियों में कुछ दिए जला रहे हैं हम

Gulzar

The year 2018 has been a very significant one for The Hans Foundation. Four monumental landmark programs have been launched at the states and national level, marking a major shift in the

strategic thinking of our organisation. To scale up our nationwide approach, we forged major alliances and entered into partnerships with state governments as well as with some of the biggest Trusts and Foundations in the country.

The first of these is in the field of mental health. A nationwide study has been initiated with nominees from Central Government Ministries, government mental institutes and NGOs. The aim is to develop a National Strategy for Inclusive and Community Based Living for the long stay patients in 44 public mental health institutes. There could not be a more opportune time for the study which coincided with the Supreme Court directive to the Central Government to frame guidelines for long stay patients in mental institutes.

We also signed a historic MoU with the Government of Nagaland, the first since independence by any Foundation. It envisages implementation of a livelihood program with an outlay of INR 100 crores. This will also constitute interventions in the fields of health care, education and disability to promote all round development. The third, and one of the largest is the mid-day meal scheme with nine central kitchens in Uttarakhand, with a capital outlay of INR 70 crores. Once ready, these kitchens will provide nutritious meals to an estimated 3,90,000 children in schools and

anganwadis.

Capitalising on the success of our Integrated Village Development Programme in Bageshwar, Uttarakhand, we signed an agreement with the Government of Maharashtra to participate in their 1000 Village Social Transformation Program. It is the biggest initiative of its kind which aims to bring the cities' development at the doorsteps of villages without disturbing the basic village fabric which binds them to their roots.

THF's latest drive to eradicate corneal blindness stems from its remarkable beginning with its first state-of-the-art eye bank in King George Medical University, Lucknow. THF has forged a partnership with LV Prasad to set up a chain of such eye banks across India in collaboration with state governments. Thus, three more eye banks are being set up in Guwahati, Varanasi and Rishikesh.

It was a proud moment for us when our revered leader and guiding spirit, Mata Shri Mangla Ji was conferred with the International Women Empowerment Award at a ceremony organised by the Indian consulate in Dubai. In the same spirit, our chairperson Mrs Shweta Rawat in collaboration with the Humans Rights Watch, released a report on 'Access to Justice for Women and Girls with Disabilities in India.' It outlines far reaching recommendations submitted to Mrs Maneka Gandhi, Minister of Women and Child Development in April 2018.

Billions in Change 2 launched Hans Powerpack, an engineering marvel, Shivansh Khaad and Rain Maker which made a splash all over the world in October 2017. These innovations will usher in transformation for millions. State-of-the-art hospitals in Satpuli and Haridwar continue to cater to thousands of BPL families to provide quality health and eye care every year.

THF narrative is incomplete without a mention of Uttarakhand 2020. There is a tsunami of progress impacting lives of millions in this Dev Bhoomi – the abode of gods: lighting of thousands of houses with Hans Powerpacks; Construction of 5,000 toilets and the IVDP, the list is unending.

As we enter our 10th year, we reaffirm our resolve for all-encompassing dimensions of our vision "Enhancing quality of life for all through empowerment of marginalised and underprivileged communities in India". We genuinely acknowledge the unstinted support of our partners and seek their continued support to fulfil our dream. Thanks to the entire team at THF for their hardwork and dedication.

Wishing you a Happy New Year.

Lt. Gen. S.M. Mehta (Retd.),
AVSM, SM, VSM**
Chief Executive Officer

In August of 2018, the southern Indian state of Kerala experienced intensive monsoon rains resulting in the worst floods in over a century. More than nine million hectares of arable land was destroyed. There were approximately 200 fatalities and over a million people lost their homes. As soon as this crisis could be attended to, The Hans Foundation began working on an action plan, which included reaching out to partner organizations specializing in Emergency Response. Two of THF's local Kerala partners, Sree Sankara Vidya Niketan (SSVN) and Americares were quick to mobilize and respond to the catastrophe. With THF's assistance these organizations distributed essential health and hygiene supplies to over 1000 families. THF also pledged to rebuild 250 homes in the worst hit villages.

THF will continue to provide long-term assistance to the people of Kerala and we are optimistic that this state of serene people and majestic landscapes will soon be restored to its natural vitality and beauty.

Private philanthropic foundations can also champion issues that have personal meaning to those who provide the support. THF's Founders, Board Members and Staff all have a vested interest in the programs the organization funds. THF's core beliefs are seen in the programs that receive its attention. *Empowering men and women to achieve economic freedom will bring progress and development to their families, and also to the communities in which they live. Quality education and healthcare are necessary steps to poverty alleviation.*

With this in mind, THF has engaged in some ambitious educational initiatives. A MoU has been signed with the Government of Rajasthan and Organization for Early Literacy Promotion (OELP) which focuses on strengthening the foundational teachings of reading, writing and learning for early grade school students. 14,000 primary schools will have this program implemented at their school.

In Nagaland, with partner Tata Institute of Social Sciences, THF has funded the Mahatma Gandhi Academy for Human Development, the first in the region to offer diploma courses in livelihood innovation and social entrepreneurship.

In Vijayawada, we support the HEAL Academy - a residential school offering excellent all-around education to orphans and abandoned children. Currently, the Academy has a student body of 452, with many alumni graduating to become doctors, engineers and entrepreneurs.

Another achievement that THF is proud of is The Hans Foundation General Hospital in Satpuli, Pauri. The hospital sees patients from as far as western Uttar Pradesh and Nepal.



Two positive effects of establishing a hospital in Satpuli were accessible healthcare for the communities in the region, and revitalized local economies. Economic vitality and employment opportunities have increased per capita income, improved quality of health and reduced income disparity.

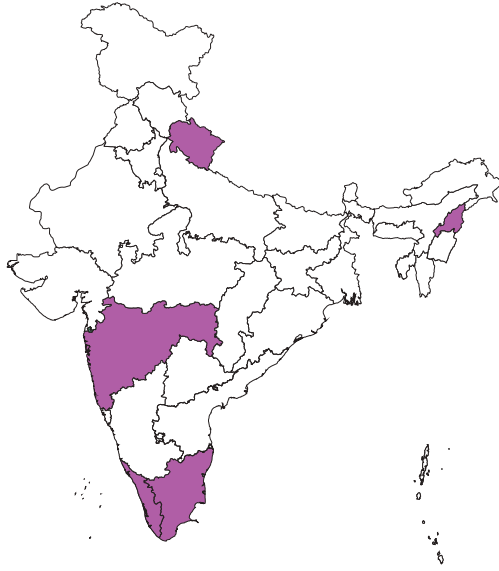
This year THF and Rural India Support Trust also committed to a great strategic partnership between Center for Strategic and International Studies and Duke University. The Indian States Health Innovation Project plans to study the gaps in healthcare services in 15 states. It will then facilitate engagement opportunities between American and Indian entities (NGOs, foundations, private sector) to come up with solutions on how to fill the gaps and ensure that quality healthcare becomes accessible and affordable. This is an exciting venture that I hope will yield great partnerships.

One of the best qualities of our work is the ability to take risks. While successes are always appreciated, we learn more from failures. Every setback allows us to revisit our views and initiatives, and attempt to make them more accessible and sustainable.

The Hans Foundation will complete a decade of work in 2019. I am hopeful that our work will positively impact the quality of life for our target communities and we will continue to be an impactful and relevant foundation for years to come.

Wishing you happy holidays and a joyous new year ahead.

Ms. Shweta Rawat
Chairperson



POWER OF COLLABORATION

BY SIGNING MoUs
WITH VARIOUS STATE
GOVERNMENTS FOR
MULTIPLE INITIATIVES,
THE UPSCALES HOLISTIC
DEVELOPMENT FURTHER



There is a movement building up gradually across the nation bringing hope and light in the lives of those who have been left behind in the march of our great nation. The name of this movement is 'The Hans Foundation'. This movement is for those thousands of inmates of the 44 mental health Institutes forgotten and caught in a time-war; it is for the backward tribes of our North-Eastern States neglected for decades and for those villages where people continue to live in the nineteenth century.

The efforts and thinking of the Foundation are to tread carefully, address



these peripheral dimensions of our societal structure and beget some virtue and hope in their lives. It is a humongous task which cannot be accomplished by any single organization. Hence, The Hans Foundation has collaborated with the Centre and several state governments, NGOs and Corporates to fulfill this enormous responsibility. The first of these is the mother of all initiatives to evolve a 'National Strategy for the Inclusive and Community Based Living for Long Stay Patients of Mental Institutes'.

On another platform, we have launched a very large-scale livelihood and social development program in Nagaland. The Foundation has also joined hands with the Maharashtra Government in a multi-partner mega project for 1000 Villages Social

Transformation program.

But first, about Inclusive and Community Based Living: There are an estimated 150 million Indians living with mental disorders - of whom only 10 per cent with common mental disorders (CMDs); and 40 per cent with severe mental disorders (SMDs) access some form of care. The National Human Rights Commission Technical Report (2016) states that 3500 persons (approx) have been residing in mental health facilities for over one year and 3100 persons for over five years. These individuals are unable to re-engage with or participate in society.

THF in consonance with the SC ruling initiated programs in collaboration with The Banyan and Tata Institute of Social Sciences

Lt. Gen. S. M. Mehta signing the historic MoU with the Government of Nagaland, the first of its kind since Independence

(TISS) to promote Inclusive Community Living for persons with moderate to severe mental disorders in Tamil Nadu, Kerala (since October 2017) and Maharashtra. Over the next three years it will enable recovery outcomes for over 670 individuals and positively influence the government to bring in policy changes for more robust community-based care programs.

These initiatives are a prelude to a nationwide study to determine the status of long stay patients across mental hospitals in India which could lead to scaling up of inclusive community living options and reunification across India. It could be the beginning of a new dawn, a new chapter that has the potential to rewrite history of how mental disorders can be treated. It will bring hope to those suffering in mental institutions and redefine lives.

KERALA: TRANSFORMING MENTAL HEALTH CARE

The Hans Foundation has signed a MoU with the Government of Kerala, Tata Institute of Social Sciences and The Banyan to work on re-orienting institutional care using reduction in bed strength and facilitation of exit pathways for long stay individuals in mental health centres. This engagement will strengthen mental health systems, ensure user-centric services, promote social mixing and catalyse inclusion.

The direct program engagement with the three Mental Health Centres in Kozhikode, Thrissur and Thiruvananthapuram had begun in January itself and focused on:

- **Identifying individuals who are ready to go home but are unable to do so due to resource deficits or absence of home or families to return to**

- **Identifying individuals who have accessed all the care they can but have not recovered completely. They are offered a range of long-terms services of inclusive living options**

By May 2018, 222 individuals from all the centres had been screened and assessments of their readiness for exit were conducted across multiple domains viz clinical, expressed intent and ethical considerations, safety, social capital and organisational capability. Then, discharge and exit pathways were prioritised based on level of support required at the time.

Of the 60 individuals discharged from



hospitals, a majority returned to their families; 11 were referred to another not-for-profit organisation and some moved into an inclusive living option. These individuals (and their families) are being supported through home visits, phone follow-ups, postal medication, and facilitation of outpatient care. They are now leading a valued social life. The range of aftercare services include identification documents; livelihood facilitation and access to government entitlements and schemes; access to problem-solving support and continued clinical care. Local aftercare support within Kerala is provided by the Government District Mental Health Program (DMHP).

This program has the potential to revolutionise the social architecture of mental hospitals in India from being monolithic total institutions to being therapeutic, welcoming, safe spaces that offer acute care and wellbeing oriented services.

TAMIL NADU: DEVELOPING COMPREHENSIVE MENTAL HEALTH SYSTEMS

In Tamil Nadu, THF has signed a MoU with Banyan, an organisation which is already working on rehabilitating beneficiaries who have been treated but are still stuck in hospitals as they have been abandoned by families or they don't want to return to them. Under the Home Again Program, Banyan already has early recovery and treatment centres for abandoned and destitute women or women with mild to severe mental disorders. Depending on the severity of their disorder, support is provided to these

A formal interaction of the dignitaries just before signing of the MoU with the government of Kerala

women. THF is supporting all 17 homes in rural and urban locales across urban Chennai and rural Thiruporur Taluk. Each home has about four-five women staying in rented flats with supportive services.

This approach provides pathways for rehabilitation of people in institutional spaces. The larger vision is to increase participation of those who were once rejected by society because of their illness. Home Again is a cost-effective and resource efficient program for long term service provision, indicating that transition into the community is beneficial both from recovery and resource optimisation perspectives.

More importantly, efforts are made towards engaging and securing State Entitlements towards long-term sustainability. This includes access to the TN Government allocated disability allowance; access to public distribution schemes; housing schemes and other welfare pensions. Access to these may reduce cost of care per client by at least 40-50 per cent.

Recovery oriented reintegration is aimed at ensuring that persons who have been treated can return home. Here, the implementation team works in conjunction with the institutional facility to identify individuals who are ready to be reintegrated with their families so they may lead a meaningful life. THF's larger vision is to strengthen the overall system and replicate its learnings to implement them directly in other mental institutions.

UTTARAKHAND WELCOMES INCLUSIVE COMMUNITY LIVING MODEL

The government facility of 'Nari Niketan' in Dehradun accommodates 100 women and girls. About 80 women here have intellectual or developmental disabilities and of these 30 are from Uttarakhand. Social taboos and old myths surrounding mental health make the task of those trying to change mindsets very difficult. Most women in Nari Niketan have been institutionalized for years while others are long-stay inmates with little hope of family reunification.

THF along with its strategic partner Keystone Institute India (KII) is aiming to reintegrate women with intellectual disability from Nari Niketan into Inclusive Living Homes in the community along with strengthening and upgrading infrastructural facilities at Nari Niketan. The Government of

THF HAS COLLABORATED WITH CENTRAL AND STATE GOVERNMENTS, NGOS AND CORPORATES TO EVOLVE A NATIONAL STRATEGY FOR INCLUSIVE AND COMMUNITY BASED LIVING

Uttarakhand has expressed its willingness to collaborate and demonstrate alternatives to Nari Niketan.

Together THF, KII and GoUK are working on a pilot project which will develop residential and livelihood options. This project will focus on 8-10 women with intellectual or developmental disabilities for a period of five years. Under this goal, it will fulfil following objectives:

- ▶ **Create two Community Homes in which adult women in groups of four-five from Nari Niketan will reside and receive supportive services.**
- ▶ **Design a roadmap and implement vocational training and development enhancement program for individuals**
- ▶ **Gainful employment in the community - financial gain and contribution in the management of day-to-day operations**
- ▶ **Create similar models across India that can help release people from institutional care to a 'Community Home'**

The Government of India has launched an Inclusive and Accessible India Campaign along with enacting The Mental Healthcare Act 2017 which has laid the foundation for a

dignified life for all people with disability.

A NEW BEGINNING FOR NAGALAND

On May 30th 2018 THF signed a MoU with the Government of Nagaland for multi-faceted development initiatives in the state. This was a historic moment for the state since it has signed such a MOU for the first time with a non-government organization since Independence.

The Foundation began its foray into the state in 2010 by supporting a school for slum children in Dimapur. Today, the school has transformed into a well-equipped institution with good classrooms, labs, libraries, playing area and other facilities. The education intervention was extended to Tuli where THF alongwith a local NGO – CECS, brought up a state-of-the-art residential school.

THF also funded CECS to run a Mobile Medical Unit in villages in and around Tuli. Alongside, a water conservation project was also implemented in one of the villages in Tuli. THF's work in Nagaland (especially in

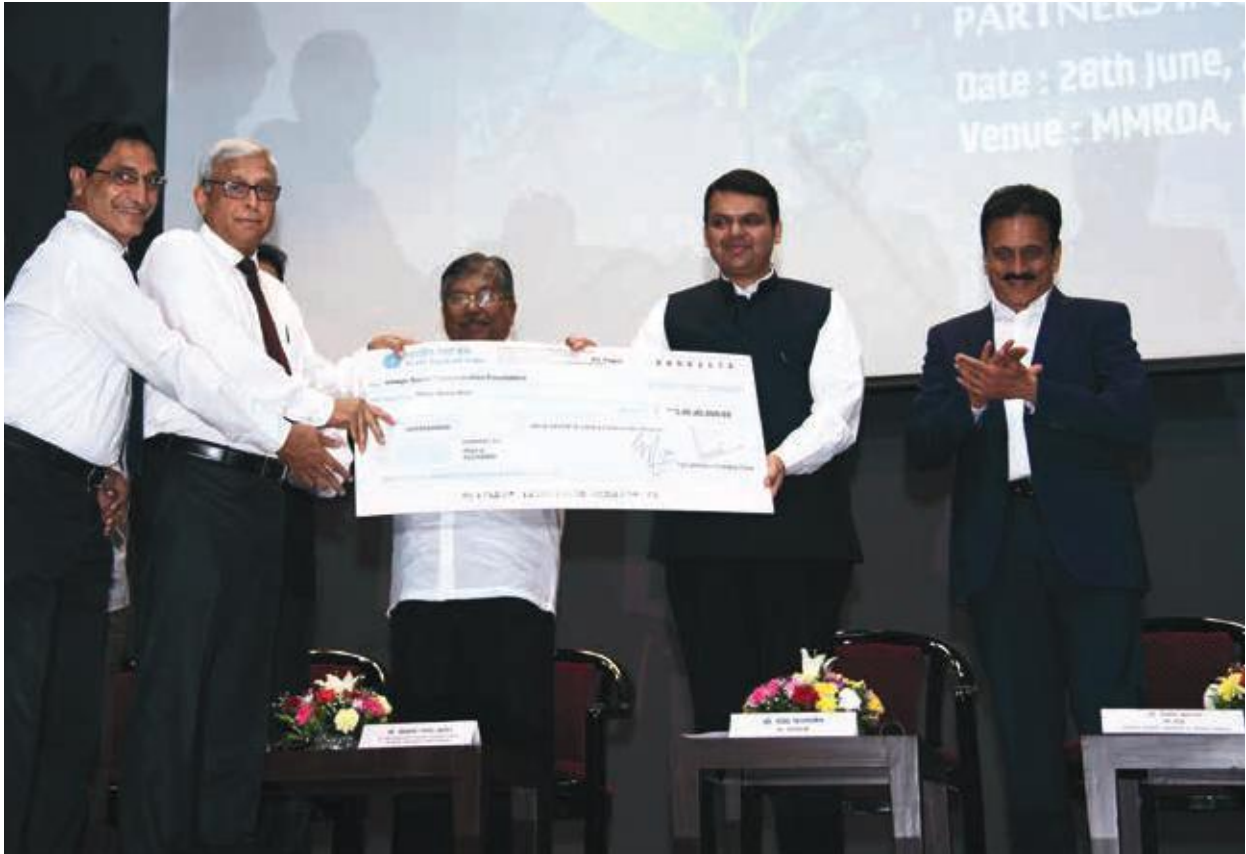
Tuli) led the Kangtang Village Council to lease 320 hectares of land for a period of 50 years, to THF at a very nominal rent.

Seeing the potential of the area to produce tea and bamboo, THF commissioned a feasibility study for establishing a tea garden along with a tea-processing unit and also bamboo products manufacturing unit. The vision has been to enhance the economic status of villagers by making their land work for them. The project will also be promoting 480 households who possess mat weaving skills to produce high quality handmade products.

It will generate livelihoods for 4000 families who will own this venture from the beginning. It is a community driven project. Each family will be given One hectare of land to own and the produce from it will be bought from them and sold by THF. The earnings from the produce will be ploughed back into the community for further development. The idea is to empower the whole community.

It is expected that 1.2 million tonnes of tea will be produced in the next three years.





After five years the expected income from tea is about INR 50,000/month per family and about INR 12,000-14,000 / month from bamboo products. This life-changing intervention will build an entirely self-sustaining ecosystem and will be a game changer in the region, heralding a new dawn of hope.

MoU WITH GOVERNMENT OF MAHARASHTRA FOR VILLAGE SOCIAL TRANSFORMATION

The Government of Maharashtra has launched Maharashtra Village Social Transformation Foundation (MVSTF) to create 1000 model Gram Panchayats through the efforts of Government, leading corporates and philanthropic organizations. It wants to establish a replicable model in these selected Gram Panchayats across 19 districts.

The project will be implemented with government resources (allocated through various schemes and budgetary provisions) and funds contributed by Corporates. The Hans Foundation has signed a MoU with MVSTF to support 'Social and Economic Development and Transformation for 1000 Gram Panchayats in Maharashtra'. The project implementation will be done with

engagement of government functionaries.

The corporate partners who have joined hands with the Maha Government include Tata Trust, Mahindra, Reliance Foundation, Hindustan Lever, Deutsche Bank and Axis Bank Foundation. THF has already committed INR 10,00,00,000 (INR 10 Crore) for this 3-year project starting this year.

The entire contribution would be used by MVSTF towards meeting broad objectives which include:

- **Water security for agriculture, drinking and sanitation**
- **Ensuring higher yield per hectare for farmers and hence higher productivity & higher income per household**
- **Working on other Human Development Indicators (HDI) and outcomes like Infant Mortality Rate (IMR), Maternal Mortality Rate (MMR), education for children, livelihood for youth and adults and digitization of villages**

By the end of 3 years, this noble initiative will change the landscape of rural Maharashtra.

Exchange of MoU with Village Social Transformation Foundation in the august presence of the Hon'ble CM of Maharashtra Shri Devendra Fadnavis

FACING PAGE

Lt. Gen Mehta, CEO, THF and Shri Temjen Toy, Chief Secretary, Nagaland exchanging MoUs

IDEAS TO IMPACT HEALING THROUGH REINTEGRATION



DE-INSTITUTIONALIZATION PROVES THAT COMMUNITY-BASED SERVICES AND INCLUSIVE LIVING OPTIONS ARE THE BEST WAY FORWARD TO MAINSTREAM LONG STAY INMATES AT MENTAL HEALTH INSTITUTIONS

In civilizations across the world, people with intellectual disabilities have been the most misunderstood and mistreated. As societies started evolving and medical science started understanding this condition, one saw the emergence of large provincial and state run mental hospitals. Over a period, these ill-equipped and ill-run State institutions turned into a form of custodial care with large amounts of abuse and neglect. With time, advanced societies started treating mental health as a special condition and came up with innovative solutions such as community treatment and rehabilitation away from institutions and homes. While de-institutionalization was gaining momentum in North America and parts of Europe, institutions remained the mainstay for mentally ill in third world countries including India.



In the last decade, India has seen some movement towards de-institutionalization. But these are small measures, made by a few non-government organizations. At the national and state levels, some of the schemes have been started but these are far from the holistic approach it deserves, such as community treatment, psychological rehabilitation and case treatment. It is thus felt, that for all those individuals who have recovered or can be repatriated and still subjected to the harsh & inhumane living conditions of institutions, it is time to initiate effective community-based support services in true spirit and form.

In 2014, a THF team comprising its CEO Lt. Gen. Mehta and Mr. Paul from Rural India Supporting Trust (RIST), visited Pavlov Hospital, Kolkata along with representatives of an Anjali organization whom THF had been funding for setting up a Dhobhi Ghar (laundry service) inside the hospital

premises. The team met a group of inmates. Interaction revealed that they were cured but continued to live in the hospital. Their families refused to accept them due to the stigma attached. These 17 men and an equal number of women were caught in a time warp with little hope of leading a normal life. These inmates, both men and women are currently working in Dhobhi Ghar, which was jointly setup by the Government and THF. Now they are earning members of the community which has given them not only a life of dignity but also brought back their pride.

This incident set in motion a chain of events. While this was happening in India, talks were on for a possible strategic partnership with Keystone Human Services International (KHSI), a US-based organization with more than three decades of experience in the field of intellectual disability at home and internationally.

National task force
in a brainstorming
session at THF office

IDEAS TO IMPACT HEALING THROUGH REINTEGRATION

Subsequent to KHSI forging an alliance with The Hans Foundation to work in India, a series of interactions and exchange visits happened. The second visit to Dhobhi Ghar, followed by a visit to Banyan in 2016, had sown the seed of a unique initiative, which was to later emerge as a national effort towards de-institutionalization.

Simultaneously, Supreme Court took suo moto cognizance of the condition of inmates stuck in the mental institutions. A directive was issued to the Centre to frame guidelines for long stay patients in





FOR ALL THOSE WHO CAN BE REPATRIATED, IT IS TIME TO INITIATE INCLUSIVE COMMUNITY- BASED SUPPORT

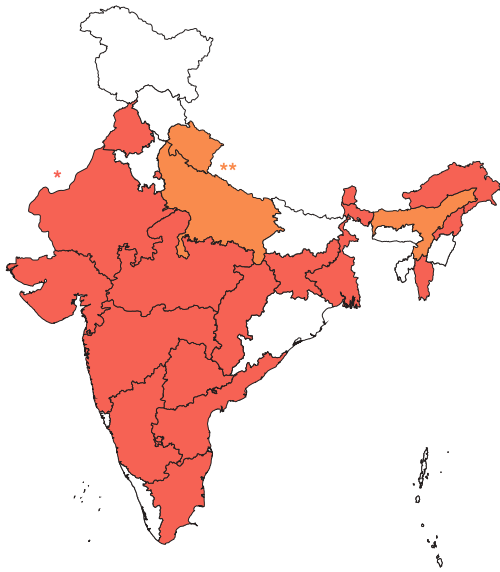
the mental institutions. A meeting with the Minister of State for Health and Family Welfare ushered in a dialogue to commence a national level initiative which was later joined by Ministry of Social Justice and Empowerment, and National Trust and other leading organizations working in the field of mental health.

The Hans Foundation convened a study to evolve a **National strategy for inclusive and community based living for persons with mental health issues**. The scope of the study was to cover all 43 mental institutions in the country. The central theme is to develop a position paper on approaches for long stay institutionalized persons to be reintegrated with their families or into appropriate inclusive living options.

A study of this proportion has never been undertaken either by the Government or any other organization in the mental health care field. Once complete, it will usher in a new paradigm in the field of mental health care. It is a unique effort, in consonance with the Supreme Court directive, towards reintegration, after care, rehabilitation and setting up inclusive community homes for the inmates of mental institutions in India.

TOP
National task force comes together for De-institutionalization Study at THF office

FACING PAGE, COLLAGE
Inclusive Community Living models for women who have recovered from mental health issues



IDEAS TO IMPACT CORNEAL BLINDNESS

THF IS ADOPTING
GLOBAL BEST
PRACTICES TO
ERADICATE CORNEAL
BLINDNESS FROM
THE COUNTRY AND
PARTNERING WITH
STATE GOVERNMENTS
TO REALIZE ITS
AMBITIOUS DREAM

*Map highlights states where all health interventions have been undertaken by THF

**States where only Corneal Blindness interventions have been undertaken



In India four million people live with corneal blindness.

Corneal diseases are the second leading cause of blindness in most developing countries. In the developed world, healthy donor tissue and surgical services are readily available and for many patients, reasonably accessible.

In a developing nation like India, with widening income gap and growing pressures on the healthcare delivery system, the context for corneal transplantation remains complicated and inadequate. This is coupled with

- ▶ an array of differing religious practices
- ▶ cultural expectations and,
- ▶ ethical frameworks



Cornea transplant is among the most successful and transformative of all health interventions, yet only 24,000 transplants are conducted annually in India. Though high-quality training for surgeons remains one of the main issues, there are many trained corneal surgeons who are recording lesser numbers of transplants owing to a variety of factors, including lack of access to tissue, high cost of tissue, poor institutional support for Keratoplasty program, inadequate surgical resources, lack of awareness in people for eye donation.

Many eye banks are not accredited in the country and are run by uncertified staff. Further, there are wide variations in the availability of eye banking facilities across the country. Therefore, there is a need to strengthen eye banking system in India which will ensure the availability of enough

corneas which fulfil all quality parameters. THF has undertaken the ambitious task of strengthening the existing eye banking system in the country.

Eye banks were selected based on the corneal burden and readiness of the existing eye banks in the states. The pilot project conducted successfully in Lucknow based on public-private partnership, provided the foundation for the mammoth task ahead.

THE KGMU EYE BANK (UTTAR PRADESH)

The Hans Foundation is now working with partners to lead the fight to eliminate corneal blindness in India. The solution requires development across the cornea ecosystem and The Hans Foundation's efforts in Uttar Pradesh have served as a

Ms. Shweta Rawat,
Chairperson, showing
keen interest in the
eye bank set up
by THF

CORNEAL RECOVERY TAKES ONLY 15-20 MINUTES AND LEAVES NO SCAR OR DISFIGUREMENT

proof of successful implementation of the same.

The KGMU Uttar Pradesh Community Eye Bank, a partnership with King George's Medical University, SIGHTLIFE and Sitapur Eye Hospital Trust, set its sights on meeting the need for high-quality corneas in the state of Uttar Pradesh which has 190,000 people suffering from corneal blindness. With no other high-quality provider of corneal tissue in the state, the eye bank was developed as a centre of excellence in a short span of less than two years.

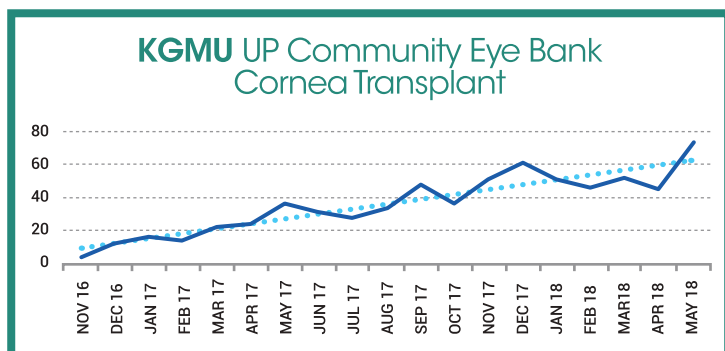
Not only is the KGMU-THF eye bank serving the needs of corneal surgeries in the state, but it has also started a state-of-the-art training centre. With every quarter, the eye bank is increasing the supply of corneas for transplant and has demonstrated how an influential eye bank can act as a catalyst for development across the cornea ecosystem.

SCALING FOR IMPACT

The Hans Foundation post establishing a high functioning world-class eye bank in Lucknow, envisaged implementation of a nationwide plan in strategic partnership with L V Prasad Eye Institute to address/minimize corneal blindness in states with the highest burden of patients. After conducting a detailed feasibility study, three locations were identified for strengthening the existing eye banks fulfilling set criteria namely: Guwahati (Assam); Rishikesh (Uttarakhand) and Varanasi (Uttar Pradesh).

In **Uttar Pradesh**, four districts were covered in the feasibility study: Moradabad, Bareilly, Allahabad and Varanasi. There are six eye banks in these four districts and as per NPCB, 541 tissues were collected in 2017. These eye banks adopt voluntary eye donation method and none follows Hospital Cornea Retrieval Program (HCRP) owing to which the number of corneas collected is very less. The specular microscope which is crucial for evaluating tissue quality was available only at Varanasi Eye Bank Society. In Eastern UP comprising Allahabad and Varanasi, there is one corneal surgeon for a population of 12,03,904.

In the **North East**, the collections number of all the eye banks together have moved from 263 to 623 in the last 10 years with inconsistencies in performance. The number of reported transplants are much lower, ranging between 57 and 197, again inconsistently. Almost all eye banks in medical colleges were empty rooms. For a cluster of eight states (in the North-east





region) in a country that boasts of over 800 eye banks, these are dismal numbers.

Uttarakhand has a population of 10 million with an estimated corneal blind population between 4,036 - 9,886 with an estimated 250 new cases added every year. The feasibility study pointed out that there was only one eye bank in Uttarakhand which is functioning at Himalayan Institute of Medical Science. That too is not fully equipped and corneal collection is fully dependent on voluntary donations. In all 265 corneas were collected in 2017. Considering the statistics, the state must perform 1500-2000 transplants annually to clear the backlog. Less number of corneal surgeons and poor eye banking infrastructure are the major reasons for additional backlog every year.

Considering the situation in these three cities, one eye bank in each city was identified which had the potential for expansion and upgradation. All these facilities will be developed with a holistic approach to ensure that every aspect of the cornea recovery, evaluation and distribution process operates effectively and efficiently. The facilities will be rebuilt on the ideal size and design parameters; would be equipped with all the necessary equipment and resources required for a high functioning eye bank.

The aim is to operate the Eye Banks in accordance with Global Best Practices in Quality Assurance and Quality Control. At the end of five years, we hope that these eye banks deliver significant value to their respective regions in the form of priority access to optical quality corneas and tangible results will be visible in the form of thousands of people having their sight restored.

FACTS ABOUT EYE DONATION

- ▶ Anyone, irrespective of age and sex, can pledge to donate their eyes after death. This can be done even if the donor wears glasses, has cataract or has undergone eye surgery successfully. All that is needed is a clear, healthy cornea.
- ▶ The eyes of the deceased can be donated irrespective of whether he/she has pledged the eye during their lifetime or not. However, the eyes cannot be removed without the consent of next of kin, even if the deceased has already pledged his eyes
- ▶ The eyes must be removed within 6 hours of death. So the nearest eye bank or eye collection centre must be informed immediately irrespective of the initial pledging centre/eye bank.
- ▶ Eyelids of the dead should be closed immediately after death. The head end should be elevated, fans should be switched off and a wet piece of cloth should be placed over the covered eyes. Antibiotic drops, if available may be applied to keep the eye moist.
- ▶ In case of death being reported from other than the hospital, the eye bank team with a doctor/technician will reach the donor site including home. No fee is charged from the family for eye donation.
- ▶ Corneal recovery takes only 15-20 minutes and leaves no scar or disfigurement.
- ▶ Eye donation gives sight to two blind persons. One blind person is given one eye.
- ▶ On reaching eye bank, eyes are examined, processed and used for corneal transplant operation as early as possible.
- ▶ The recipient of the cornea will always remain anonymous but the family should be satisfied knowing that the eyes have been used to restore the vision of the blind person[s].
- ▶ The donated eyes are never bought or sold. Eye donation is never refused.

TOP
An Eye Surgeon examining a patient with corneal blindness

FACING PAGE
Shri Atul Kapoor
VP Asia, SightLife
explains functioning
of the eye bank to Ms.
Shweta Rawat



SECOND INNINGS PINDAR VALLEY



THE INTEGRATED VILLAGE DEVELOPMENT PROGRAM THAT SAW THF ADOPT LAST MILE VILLAGES IN PINDAR VALLEY TO DEVELOP THEM HOLISTICALLY HAS BORNE FRUIT. BUT CHALLENGES REMAIN

The Integrated Village Development Program was the Foundation's attempt to address the endemic issues that prohibit development in remote areas of Uttarakhand State.

Through programs across areas of livelihoods, education, health, water and sanitation to name a few, we are trying to see if a cross-sectoral, holistic approach will improve the economic well being of the region.

SMART FARMING PRACTICES

THF connected with 3000 farmers and created a Cooperative under which 45



Farmer Producer Groups were formed. The farmers' introduction to climate smart agriculture practices helped them to earn higher incomes. In 2018, farmers sold potatoes worth INR Five lakhs and pulses worth INR Two lakhs. This income is expected to rise at least 5-10 times, as more and more farmers get connected. The valley which had never seen an apple grow in the region, today boasts of 12,000 plants which are a success. In the coming years, this will boost the economy of the whole valley. The region could actually be the first of its kind fruit belt in Kumaon.

THF also introduced advanced farming techniques in agriculture. Today, 80 families across villages have started growing

vegetables and developing nurseries in poly houses. About 150 families are working on local honey production and a total of One Quintal of honey production is expected towards the end of 2018, which will be branded and sold.

WOMEN: THE DECISION MAKERS TODAY

Women, are undoubtedly, the most efficient and hardest working group in the mountains. But in spite of their hard work they are hardly part of any community or group where their voices can be heard or opinions are sought, or where they are allowed control over household budgets. Today, women are prime and active members of

A farmer in Pindar Valley proudly displaying his poly house produce

PHASE II OF IVDP WILL SEE MORE FOCUSED INTERVENTIONS IN THE FIELDS OF HEALTH, COMMUNITY FARMING AND EDUCATION



the 'farmer producer groups' where they take decisions and are an integral part of the process. There are around 18 Self Help Groups (SHGs) which are active and being managed efficiently by women with THF's guidance. Being a part of SHGs gives them confidence and power to take monetary decisions at home as well.

Money is not the only factor where women have little or no control. Taboos around menstruation for instance, are



so deep-rooted that during their period, women and girls are made to live in cow sheds where they are not supposed to touch anyone or enter the house. Regardless of weather conditions they bathe in bone-chilling cold water streams and are least taken care of when it comes to food and nutrition. THF decided to take up the challenge of changing mindsets on the matter.

Thirty young girls and boys from the Valley were trained on Menstrual Health and Hygiene (MHM). They were then made master trainers and divided into groups. Today, they are creating awareness on MHM, and its impacting the mindsets in the valley slowly but surely.

YOUTH AND CHILDREN : HARBINGERS OF CHANGE

As torchbearers and future leaders the youth plays a critical role when it comes to change in society. To ensure sustainability for IVDP, 50 youngsters from the Valley have been identified as potential leaders and they have been imparted knowledge, skills and information either directly by THF

or partner NGOs.

The Foundation's work in schools is also paving the path for the future generations through interventions such as the Gandhi Fellowship Program; Digital Classes or, Supporting schools with additional teachers. So far, 1700 students from 30 schools of the valley have benefitted directly. Of these, the Digital Learning platform has not only positively impacted learning levels of 200 children across five primary schools, it has also made them tech-friendly.

Sport is also a key component for overall growth. A sports coach has been hired to train children in different sports disciplines and will help identify talent which can be nurtured and trained to perform in the national and international arenas. To begin with, five children have been admitted in sports schools.

Other interventions include building 520 quality toilets in households; drinking water for each home and quality household solar systems to at least 500 families.



PHASE 2 : WHAT LIES AHEAD

IVDP has been up and running for the last year-and-a-half and an appraisal of the situation shows that more focused interventions are needed. The following three areas will now be on THF's radar:

► **EDUCATION** : So far the focus has been on primary schools. Now it is time to engage with Junior and High schools. THF has taken up the mammoth task of identifying local youth as teaching staff.



This list has been shared with the State Education Department. An NGO will be engaged to work as an implementation partner. Improving physical infrastructure in schools is also a priority. This includes setting up of computer labs in eight schools, and Science labs in two high schools.

► **HEALTH** : Since Independence, this remote area of Bageshwar district has not seen any medical facilities and the nearest facility is 40 kms away in Kapkot with very poor communication infrastructure. The Government has constructed a State Allopathic Dispensary (SAD) in village Khati some three-four years ago, but it is yet to become operational. The state government has requested THF to take over the SAD on 'as is where is basis'.

► **COMMUNITY FARMING** : THF is developing at three-four pilot projects of community farming. These projects will focus on cash crops, medicinal and aromatic plants and other local herbs. This initiative will ensure community level engagement and the bulk produce will fetch the right price in the market.

FACING PAGE;
ABOVE & LEFT
Glimpses of
development under
the Integrated Village
Development Program



SECOND INNINGS UTTARAKHAND

THE RANGE OF INTERVENTIONS, UNDERTAKEN BY THF UNDER 'UK 2020', IS HUMONGOUS. WHILE HEALTH CARE IS STILL TOP PRIORITY, LIVELIHOOD PROJECTS, CENTRALIZED KITCHENS FOR MID-DAY MEALS AND DRINKING WATER SCHEMES FOLLOW A CLOSE SECOND



GANDHI SHATABDI CENTER FOR OPHTHALMIC SCIENCES, DEHRADUN

Strengthening health infrastructure is a major commitment of THF. As the capital of Uttarakhand, Dehradun is the main hub for opthalmic services not only for the residents of hill districts, but also those from surrounding areas of western UP.

Thus, as requested by the State Government, THF will provide 11 high value, critical machines to Mahatma Gandhi Shatabdi Center for Ophthalmic Sciences in Dehradun costing INR 2.5 Crores. It is a 200-bed eye specialty government institute but requires considerable strengthening to be able to provide tertiary care. The availability of this equipment will ensure diagnostic services, major surgeries and other facilities.

ICUs AT DISTRICT HOSPITALS

In continuation of its efforts THF has



undertaken the task of constructing three ICUs in three district hospitals at a cost of INR 7.5 crores viz Pithoragarh, Pauri and Uttarkashi. A state-of-the-art ICU has been built and commissioned at Pithoragarh District Hospital with world class facilities in a record time of three months. This will benefit patients not only from Pithoragarh, a border town and surrounding areas, but also patients coming from as far as Nepal. Work on the second ICU at Pauri Garhwal Hospital will be commencing shortly.

RENOVATION OF SRINAGAR MEDICAL COLLEGE

THF is also supporting the state government in upgrading infrastructural facilities at Veer Chandra Singh Garhwali Government Institute of Medical Science and Research in Srinagar. Though the college has advanced equipment and cutting-edge medical technology, the hospital lacks critical infrastructure. A joint team of THF, ARKA and medical college representatives

completed a pre-assessment survey in May 2018.

MEDICAL MOBILE UNITS AND MAMMOGRAPHY VANS

A major challenge in Uttarakhand is to provide basic health care services to those living in remote areas. To meet this challenge The Hans Foundation is operating 21 Mobile Medical Units (MMUs) in partnership with the Government. While Wockhardt Foundation, Mumbai is operating 16 of these vans, HelpAge is in charge of five.

These MMUs supplement the existing public health facilities by following “fixed day, fixed time and fixed place” approach. Each MMU comprises a team of five – a doctor, pharmacist, Lab Technician, an ANM and a driver. Each MMU is equipped with an Accuster Lab (a Compact Portable Clinical Laboratory with an open system in a suitcase having Power Back-up of 4 hours extendable to 24 hours) that can be used

FACING PAGE AND ABOVE

Multi-pronged developmental initiatives by THF: Mammography vans and clean drinking water schemes



for conducting 26 different types of tests. These MMUs are covering all 13 districts of the state and also assist government efforts during Char Dham Yatra and special camps. In the last two years these MMUs have been able to provide basic treatment and referral services to about 3.5 lakh patients.

Similarly, THF has provided two hi-tech mobile mammography vans to the government. The vans are attached to Haldwani Medical College and Doon Medical College respectively and are used for screening of breast cancer patients in far flung areas.

CENTRALIZED KITCHENS FOR MID-DAY MEAL PROGRAM

A Tripartite MoU was signed in Feb 2018 between Govt. of Uttarakhand, The Hans Foundation and Akshaya Patra Foundation to set up nine centralized kitchens in Uttarakhand to serve meals to 3,00,000 children. THF will be funding the construction of these kitchens at a cost of INR 68 crores. Once built, these will be operated on a PPP model.

These kitchens will be located at Roorkee, Kashipur, Rudrapur, Sitarganj, Nainital, Haridwar, and Dehradun. Honorable CM of Uttarakhand Shri T S Rawat performed Bhoomi Poojan at Sudhowala, Dehradun on 23 January 2018.

DRINKING WATER SCHEME - HANS JAL DHARA

Since 2016, the THF Hans Jal Dhara scheme, has been providing potable drinking water to 100 remote villages in Uttarakhand. The project is need-based and community

participation was ensured right from the planning stage itself and villagers have been involved in all stages of implementation. They are also contributing 10 per cent as cash and labor, which has ensured their interest and participation while building capacity for operations and maintenance later.

The project focuses on gravity-based drinking water schemes, but other technologies like pumping, infiltration wells and RainWater Harvesting Tanks (RWHTs) have also been used. Activities like spring recharge and source protection are also included. Work on 72 gravity-based water supply schemes, six pumping water supply schemes and 270 RWHTs is under progress. The distribution system covers each household of the entire village. A total of 19,447 people will directly benefit from this program.

HANS HANDLOOMS NURTURE HANDMADE WOOLENS

The Kumaon region of Uttarakhand has traditionally been rich when it comes to handmade products. Hand-spinning, knitting and weaving of wool are strengths of the women artisans here and the State government set up the Nanda Devi Society (NDS) as a centre of excellence to nurture this local craft.

About 180 women are employed at this centre along with 54 trainees. The centre produces world-class handlooms and hand-knitted products of genuine Pashmina, Merino, Lambs Wool and Alpaca. At the government's behest THF took over operations of the NDS under the umbrella of Himadri Hans Handlooms, for better management and to bring in financial and business sustainability. Thus, the women will continue to generate livelihoods in a dignified manner leading to socio-economic development. A detailed plan for expansion is in place along with streamlining of the complete process from procurement of raw material to the domestic/export sales of the finished products.

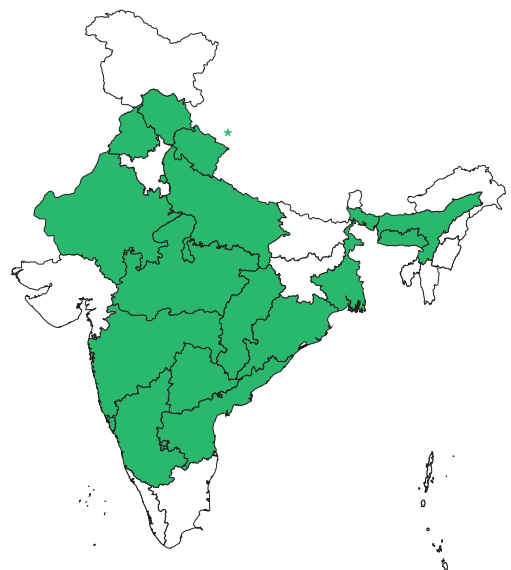
By 2019, the plan is to double the turnover to approx. INR 3 Crore annually so that the economies of scale (a must in handloom industry) tips the balance towards organic sustainability in terms of operations and finances. A detailed analysis points to the feasibility of achieving this and in-house R & D is being undertaken to identify products for diversification so that the basket of goods is bigger and more attractive.

ABOVE
Women earning their livelihoods at the Nanda Devi Society – a centre of excellence for handmade products



WITH AN EYE ON INCLUSIVE COMMUNITY LIVING

SOCIAL ROLE VALORIZATION
ASSISTS PEOPLE WITH
DEVELOPMENTAL DISABILITIES
TO MOVE INTO VALUED SOCIAL
ROLES, EVENTUALLY SECURING
A PLACE OF RESPECT FOR
THEMSELVES IN SOCIETY



*highlighting states where all disability interventions
have been undertaken by THF

An important change is happening across the country as people with disabilities, their families and community organizations seek meaningful ways to create an inclusive India where all people are fully included, fully welcomed, and fully belong. The Hans Foundation, through the collaborative work of Keystone Institute India, has fired up both passion and promise as we introduce ideas that are enlivening discussion, creating commitment and sparking change.

The ideas of Social Role Valorization (SRV) have been an essential foundation for successful community movements across the globe and KHSI team had the pleasure and honor of bringing these ideas to India to fuel the movement towards full, rich, meaningful lives for all disabled people. When based on a solid SRV foundation, services which promote genuine belonging, freely given relationships, contribution, and





full realization of potential come within reach of many people in society, including people with intellectual and developmental disability.

SRV theory outlines the phenomenon of social devaluation. In other words, certain groups of people lose their value in the eyes of society. These ‘wounds of devaluation’ include such devastating life experiences as systematic rejection, being thrust into negative stereotypical roles such as eternal child or burden of charity, and an array of others that spell bad news for marginalized people. Study of social theory shows that SRV offers effective and valuable ways to work towards the valuation of people with disabilities by assisting people to move into valued social roles, effectively taking a place of respect, value and contribution within the family, neighborhood, community and nation.

SRV, adapted to the Indian context is galvanizing leaders in developmental disability as we begin to form a collective national vision of an inclusive India. However practical changes must occur to move inclusion from slogan to practice. In December 2017 Keystone Institute India offered the “Valued Lives 2.0”, the second leadership-level intensive SRV course to 44 engaged and fully prepared emerging



leaders, bringing the total of intensive course graduates to over 80, from 18 states across India. In 2018, it witnessed the growth of SRV leadership in India, impacting the disability community in major ways. The year saw the growth of people introduced to Social Role Valorization from 360 at the beginning of the year to 905 by the close of it. That’s a good beginning but training is simply not enough. In 2018, focus is on leadership development and implementation consultation. Of the 84 Indian SRV experts, 41 per cent have provided presentations and training to others, using a mentored model and 47 per cent of these important change agents will have conducted SRV training before the close of 2018. This Indian SRV Leadership Group has conducted one-day events through Keystone Institute India and the Institute added two Indian SRV faculty to our teaching staff, both grounded in SRV and talented educators. In the spring of 2018 Ms. Geeta Mondol and Dr. Nidhi Singhal added their expertise to International expert Elizabeth Neuville, beginning to fulfill our goal towards strong in-country leadership.

2018 also saw the growth and spread of powerful ideas in India, including developing new intensive learning events around Creating Home: Best Practices for Residential Services, which was piloted and offered in Delhi and Kolkata, and which will be further spread to Mumbai and other locations before the end of the year. In addition, Customized Employment, the notion of creating well-matched jobs with people with developmental disabilities was brought to India for the first time through a three-city tour, resulting in excitement and

ABOVE & LEFT
Keystone experts with Emerging Leaders in Social Role Valorization training workshops

FACING PAGE, BOTTOM
Distribution of certificates to participants on successful completion of SRV Workshop



SRV HAS CREATED FERTILE GROUND FOR EMPOWERMENT AND IMPROVED LIVES FOR PEOPLE WITH DISABILITIES

potential for a number of implementation projects across the country. The introduction of Social Role Valorization to change leaders across the country has created fertile ground for the empowerment and improved lives for people with disabilities,

SUPPORTING DEVELOPMENT OF RESPONSIVE SOLUTIONS TO COMMUNITY LIVING

In 2015, The Hans Foundation, in partnership with Keystone Human Services International, created a strong national disability

training and consultative organization, the Keystone Institute India. Through intensive collaboration, we have continued to work with a sharpening focus towards developing community alternatives to institutionalization and large congregate facilities. We have set our sights on promoting and testing the creation of small-scale options for adults with developmental disabilities for whom long-term living with their own families is not desirable or feasible in several places in India, including program expansions in Hyderabad. The aim is to promote and study suitability of long-term living options to provide reasonable choice and autonomy for the people served, individualized developmental planning, effective safeguards for the well-being of each person, and commitment to the development of unique lives that are embedded in community.

This year, the efforts focused on women with intellectual disabilities currently institutionalized in a large congregate care facility in Uttarakhand. We partner with local authorities and with existing community organizations to design and test such models, using the expertise, knowledge and foundational training base that Keystone Human Service International is sharing widely across India. Our work will shape the future of people with developmental and intellectual disability as we explore ways to create sustainable designs that will meet the needs of all people, and develop uniquely Indian answers to questions being asked around the world about how to help all people, including those with developmental disability, find a respected place in society.

ABOVE

Change leaders from across the country post SRV intensive learning workshop



THE YEAR THAT WAS

AS THF ENTERS ITS 10TH YEAR, THERE IS MUCH CAUSE FOR CHEER. ACCOLADES AND ADMIRATION POUR IN FOR ITS MULTI-FACETED INITIATIVES ACROSS INDIA



1-2

Hon'ble Chief Minister of Uttarakhand Shri T.S. Rawat, Mata Shri Mangla Ji and Bhole Ji Maharaj inaugurated the first Intensive Care Unit at the District Hospital in Pithoragarh, which was completed in a record time of three months

3

Ms. Shweta Rawat, Chairperson at the launch of HRW report on Access to Justice for Women and Girls with Disabilities in India



4

Hon'ble Chief Minister of Uttarakhand Shri T.S. Rawat, Mata Shri Mangla Ji and Bhole Ji Maharaj flagged off two Mammography Vans and nine mobile medical units in Pithoragarh in April this year. These vans are operational in Kumaon and Garhwal and provide cancer screening, primary healthcare and necessary referral services



5

Ms Omita Paul, Managing Director Pranab Mukherjee Foundation and Lt. Gen. S. M. Mehta of THF exchanging MoUs in Delhi. Presiding over the ceremony is former President Shri Pranab Mukherjee while Dr. G. V. Rao, Executive Director, THF looks on



6

Dr. G.V. Rao, Executive Director THF, Gen. Ian Cardozo, (left) Trustee and Executive Director, NCPEDP and Shri Som Mittal, (right) Chairman National Centre for Promotion of Employment for Disabled People (NCPEDP) unveil copies of *The Handbook on the Rights of Persons with Disabilities Act 2016*



7

THF collaborated with poet-filmmaker Gulzar Ji for The Hans Foundation's documentary film, which will be released soon

8

Dr. Rita Bahuguna Joshi, Minister for Women and Child Development, UP gives away an award to Mata Shri Mangla Ji, at the International Women Empowerment Program 2018 in Dubai. The award was received by Lt. Gen. S.M. Mehta on Mataji's behalf

9-10

Wise Wall project jointly implemented by FUEL and THF in Khati (Uttarakhand) village, to promote local tourism



11



12



13

11-12

Mata Shri Mangla Ji and Bhole Ji Maharaj with other dignitaries at the 'Bhoomi Poojan' of Centralized Kitchens System for mid-day meal scheme at Suddhowala, Dehradun

13

Former Australian international cricketer Brett Lee interacts with THF team and meets a Cochlear Implant beneficiary for creating awareness about the cause

14

Lt. Gen. Rajender Singh gives away the Thought Leader 2018 Award to Lt. Gen. S. M. Mehta in the 'Responsibility and Sustainability Domain' at the Coffee for Cause felicitation ceremony





INTEGRATING HEALTH SERVICES

THE GENERAL HOSPITAL AND
THE EYE CARE HAVE MADE
HEALTHCARE ACCESSIBLE TO
LOCAL COMMUNITIES AND
REVITALIZED LOCAL ECONOMIES
BY PROVIDING LIVELIHOODS –
ARRESTING MIGRATION TO CITIES



THF General Hospital, Satpuli and THF Eye Care, Bahadrabad near Haridwar in Uttarakhand remain focused on their vision: To provide quality and affordable health care to the

underprivileged under the mission 'Health for All'. Providing these services is a priority because THF understands that good health is a key fact in improving quality of life. It is currently expanding on two initiatives launched late last year: 'The Hans Foundation General Hospital' provides affordable multi-specialty health care in the rural Pauri-Garhwal region and 'The Hans Foundation Eye Care' is an effort towards preventing and eliminating needless blindness.

THE HANS FOUNDATION GENERAL HOSPITAL

Constructing a specialized hospital of this size in a remote location on steep and uneven terrain was a mammoth multi-year challenge. The hospital campus is built over 10 acres and was hitherto considered inaccessible because of lack of connectivity. Yet THFGH installed incredible infrastructure including eight specialized operation theatres, an Emergency Ward, an Intensive Care Unit, Diagnostics and Pathology laboratories, as well as residential facilities

for the staff. The planning, development and operationalization of the 150-bed hospital was extensive and the commencement of the hospital services generated a lot of interest. It offers an array of services which are delivered by experienced, caring and service-oriented doctors, nurses and medical and non-medical staff. The services include:

► **GENERAL SURGERY:** The Department of Surgery possesses the ability and facilities to carry out a full spectrum of surgical procedures and is equipped to provide critical care

► **ACCIDENT & EMERGENCY SERVICES:** 24-Hour surgical cover for accident and acute cases. All varieties of accident/poly trauma cases are handled by a team comprising a general surgeon, orthopaedic surgeon, anaesthesiologist and internal medicine specialist

► **INTERNAL MEDICINE:** The Internal Medicine Department provides comprehensive primary-care services in an outpatient setting along with providing care to hospitalised patients.

► **OPHTHALMOLOGY:** The Department of Ophthalmology provides services for effective diagnosis and treatment. It is fully equipped with state-of-the-art equipment for treating glaucoma, cataract, corneal diseases, aesthetics and paediatric ophthalmic diseases.





1



2



3



4

► OBSTETRICS AND GYNAECOLOGY:

This department offers full spectrum of women's health care services

► **ORTHOPAEDICS:** The Department of Orthopaedics provides state-of-the-art services for comprehensive management of patients

► **RADIOLOGY:** The Department of Radiology is equipped with state-of-the-art medical equipment and endeavours to provide the best diagnostic output

► **ANAESTHESIA:** As an integral part of the hospital, the Department of Anaesthesiology possesses the latest technology devices for patient care

► **PATHOLOGY:** The hospital has the capability to conduct Biochemistry, Haematology and Clinical Pathology related tests using the most sophisticated instruments.

► DEPARTMENT OF DENTISTRY AND DEPARTMENT OF PHYSIOTHERAPY & REHABILITATION

are also available for specialized services. Patients from as far as Pauri, Kotdwar, Dugadda, Kaljikhil and Pabua come to avail the services. The average daily footfall in the OPD is around 200. Since inception last November, OPD services have been provided to well over 1,00,000 patients. Its OPD has registered 25,000+ patients; over a 100 surgeries have been performed with the desired clinical outcome; over 300 admissions and discharges have been done; over 200 emergency cases have been managed, and over 160 outreach camps have been conducted resulting in screening of 35,000+ patients.

ANCILLARY BENEFITS OF THFGH

CONNECTING PEOPLE - ENRICHING LIVES: The hilly area surrounding

1 & 3. Shri T. S. Rawat, Hon'ble Chief Minister, Uttarakhand with Mata Shri Mangla Ji and Bhole Ji Maharaj inaugurating the hospital in Satpuli;

2. Local residents mark their presence at the function;

4. Mr Manoj Bhargava felicitates, Shri Harish Rawat, former CM, Uttarakhand and Shri Dharampal Rawat at the inaugural ceremony of Satpuli hospital.



**ACCESS TO
QUALITY
EYE CARE
COULD HELP
80 PER CENT
OF 63 MILLION
INDIANS WHO
ARE VISUALLY
IMPAIRED**

THFGH and Satpuli town has seen a rise in mobile phone ownership but network connectivity was a major issue. THFGH made arrangements with two separate mobile phone service providers to install towers to improve the signal strength. Mobile phone usage is helping alleviate constraints like low income and poor infrastructure by providing need-based and user-centric information and services which were hitherto inaccessible. The awareness, information and knowledge gap between rural youth of this region and their urban counterparts is significant, but the newly added internet connectivity should definitely help to narrow the gap.

ENRICHING QUALITY OF LIFE AND FACILITATING HOME COMING:

Pauri's ghost villages were once home to only the elderly and those without options of leaving. Based on government statistics it is the worst affected by 'Palayan' i.e. mass migration of people to metros to earn livelihoods. To help check this problem, THFGH made a conscious decision to hire locals. Today, over 80 per cent of the staff at the hospital is from Pauri. Within a year of its inauguration, stories of people having returned to their villages and homes and finding jobs at the hospital have begun coming in. The hospital is committed to providing employment and arrest Palayan.

ACCELERATING LOCAL ECONOMICS:

Satpuli has gradually started to flourish as its profile is changing from being a quiet Pauri town. Now it houses Uttarakhand's first-of-its-kind hi-tech 150-bed hospital. Not only is the hospital generating employment opportunities locally, it is



spurring other businesses in the community as well. Previously deserted local markets are now vibrant with life. Additional taxis have started services on the Kotdwar-Satpuli-Devprayag route. Residents are constructing/renovating their houses to rent out to the hospital staff. Schools are seeing more admissions. The jobs and local businesses are representative of additional economic benefits. The hospital has not only enabled rise of per capita income and health standards of people but has also contributed to the reduction of income disparities.

THE HANS FOUNDATION EYE CARE

Access to quality eye care could help as many as 80 percent of the 63 million in India that are blind or visually impaired since most vision-impairing conditions are preventable or treatable. The Hans Foundation Eye Care,

a 30-bed hospital based in Bahadradab brings sight to the underprivileged in and around Haridwar. It has world class facilities and a team that lives up to the principles of compassion and care.

In addition, the THFEC team of doctors and paramedics reach out to remote hilly areas, screen local populations, commute patients to hospital, perform necessary surgical procedures and post-surgery transport them back to their doorstep. During an overnight admission at THFEC's in-patient wards, they are under the guidance of a physician and caring staff. The patients' travel, stay, clinical and non-clinical care are all free. The highly skilled doctors perform the most complex retina, glaucoma and cornea related surgeries. Since inception on 30th June 2014, THFEC OPD & IPD teams have treated over 35,000 patients, done over 15,000 surgeries and conducted 700+ outreach camps.

ABOVE
Patient at THFEC being examined by a medic

FACING PAGE
Community outreach services by THF Eye Care Hospital



BUILDING TOMORROW'S LEADERS

THF'S HOLISTIC
APPROACH TO
EDUCATION
ENCOMPASSES
SERVICES SUCH AS
EXTRA-CURRICULAR
ACTIVITIES,
SCHOLARSHIP
PROGRAMS AND
INNOVATIONS IN
PEDAGOGY AND
PRACTICE



Since its inception in 2009, THF has been committed to promotion and strengthening of quality education in remote and underdeveloped areas of the country, by supporting formal and informal educational programs. This work is central to THF's commitment of providing social justice and tackling disadvantage, ensuring equal opportunities for everyone. Quality education is imparted through innovative pedagogical methods and latest technology. Educational services have been made available to children from remote areas through residential facilities. The



educational footprint of THF spreads from Nagaland in the North-East to Rajasthan and from Punjab to Tamil Nadu.

RAJASTHAN

To develop education innovations on pedagogy and practice which will build foundations for reading, writing and learning in early grade school goers, The Hans Foundation has entered into a tripartite MoU with the Government of Rajasthan and Organization for Early Literacy Promotion (OELP) for 'Capacity building to enhance the quality of learning' in the state's government schools. This project will provide on-site support for expansion to 14,000 primary schools in Seven Special Focus Districts (SFDs) of Rajasthan.

The state government has distributed project resource kits in implementation areas. In one of the SFDs, on-site mentoring and intensive field support to 50 schools has begun, reaching 1,500 children and 50 teachers. In addition, the project has also established five Demonstration Resource schools whereby it will directly reach 200 children and five teachers - the idea being to prepare a model to showcase OELP innovations to a wider target group.

ANDHRA PRADESH

The Hans Foundation has been providing support to children at HEAL Paradise Village, in Thotaphalli, Guntur, Andhra Pradesh since 2014. The school enrolls children who are orphans and from marginalised

Tribal children of Rajeshwari Karuna School, in Nagaland, take a break from studies



backgrounds. Without parental care these children are at a high risk of abuse and exploitation, and in danger of losing opportunities for education, health care, growth, development, nutrition and shelter. The school has created an environment for the holistic development of orphans or children being nurtured by single parents.

Recognized by the State Government, the medium of learning at HEAL is English. The student strength of the school has grown from 367 in May 2017 to 452 in 2017-2018. The hostel can accommodate up to 1000 children and has separate



dormitories for boys and girls; it has a dining hall for 600 students and staff and a common living space. The school is also equipped with a library, a computer lab and laboratories for Science subjects and smart classrooms. The children are encouraged to participate in sports and nurture creativity through music and other extra-curricular activities.

THF is currently supporting 200 children or about 50 per cent of the total strength. It is funding the entire expenditure on each child – be it health, books, uniforms or hostel fees. Some of these children were homeless and have now risen to great heights. When the school celebrated its silver anniversary this year, a few of its alumni - who are now doctors, engineers, professors and some who are even working in NASA, were invited. It is this institution that has enabled them to aim for the stars with THF's support.

THF and HEAL's shared mission is to provide these children equal opportunities in life at par with children from privileged

**THF ALSO
PRIORITIZES
HIGHER
EDUCATION
IN THE NORTH-
EASTERN STATE
THROUGH
FELLOWSHIP
PROGRAMS**

backgrounds.

NAGALAND

In the North East, THF has been supporting Community Educational Centre Society (CECS) since 2012 in two places - Dimapur and Tuli, Nagaland. Of these Rajeshwari Karuna School in Kangstang Village, Tuli, Mokokchung district has undergone a dramatic transformation. Its dilapidated building has now turned into a multi-acre, State-of-the-art facility. It also has Basketball and Volleyball courts. THF has also funded and supported a Primary Health Centre in Kangstang; built roads and strengthened infrastructural facilities, costing INR 1.75 Crores. Started in 2015, the Rajeshwari Karuna School is offering services to 161 students from tribal areas of which 76 avail hostel stay. The school which is open up to Class VII follows the XSEED Curriculum. The faculty has been trained to engage children through two-way communication rather than applying the traditional rote learning or lecture style. With more admissions coming its way, the school is moving towards its capacity of accommodating 300 children.

CEC High School in Dimapur started out as a thatched roof structure. The school's enrolment has risen from 291 (2010) to 567 (2018). It has upgraded its library, has an IT classroom and rooms for extra-curricular activities. The high school students sit for exams conducted by Nagaland Board of Secondary Education and their results have attracted more students to sign up for admission. THF maintains a holistic view of the educational spectrum. Therefore, it also undertakes regular training of teachers – focusing on 'classroom management'; 'psychology', 'Spoken English', 'Self-discipline' and Communication Skills'.

THF also prioritizes higher education in the North-eastern state through Fellowship Programs. It partnered with the Tata Institute of Social Sciences (TISS) in 2015 to help establish the Mahatma Gandhi Academy for Human Development (MGAHD) in Chuchuyimlang Village, Mokokchung. The Academy offers Diploma Courses in Livelihood Innovation and Social Entrepreneurship. Twenty students have been selected for the Fellowship Program. This program focuses on fostering creativity and self-dependence. Through experiential learning the fellows will move from being job seekers to job creators. They will be trained and mentored by professionals to become entrepreneurs.



THF also offers scholarships and fellowship opportunities to impoverished students pursuing higher studies in medicine and engineering. These programs cover tuition fees, laptops, short-term trainings and enhancement of soft skills. These grants are being offered through partner organizations such as Katalyst and Foundation for Excellence (FFE). More than 450 children have been supported through these programs.

THF has been partnering with Foundation for Excellence (FFE) – a NGO since 2014. With an initial intake of 100 students, its numbers have increased to 282. Students have to meet stringent criteria to be selected. A student should have a qualifying rank in National/ State Entrance Test and his/her family income should be less than INR 1,80,000 per annum. The students who clear the interview are granted a scholarship to a maximum of INR 40,000 per annum from THF for their respective Medical or Engineering program for the entire course term. THF also provides a laptop to selected scholars. During the entire term of his/her respective course, FFE remains in touch with every scholar and keeps track of their progress. Not only is the scholar required to clear all examinations conducted by his/her respective universities, they are also required to complete various training and internship programs, to enhance employability skills.

ABOVE

Young girls from HEAL, Vijaywada strike a pose for the camera

FACING PAGE (TOP)

Children of HEAL, Vijaywada focus on their class test

FACING PAGE (BOTTOM)

Children of Rajeshwari Karuna School enjoying their meal during recess

BILLIONS IN CHANGE ENGINEERING REVOLUTION

BILLIONS IN CHANGE
FOUNDATION
IS FOCUSED ON
EXPANSION THROUGH
DEVELOPMENT AND
PROMOTION OF
INNOVATIVE
CONCEPTS, WHILE
ENRICHING LIVES
OF BILLIONS



Billions in Change is a global movement, focused on solutions for the 'unlucky half' of humanity - those who lack access to basic necessities and struggle to earn a living and provide for their families. It highlights inventions aimed at improving water quality, energy access, farming and healthcare. Those fundamentals often underlie major issues like poverty, malnutrition, poor health, environmental degradation and economic underdevelopment. Billions in Change was founded in 2015 by Indian-born, self-made billionaire and philanthropist Manoj Bhargava.

The Billions in Change movement involves thousands of individuals around the



world as well as a number of organizations, including:

► **STAGE 2 ENGINEERING**, the invention shop in Farmington Hills, Michigan, USA charged with finding, creating, developing, and refining useful products that improve humanity in the areas of clean water, clean energy, and healthcare;

► **THE BILLIONS IN CHANGE FOUNDATION**, a US non-profit 501(c)(3) organization formed in 2017 to raise money, form partnerships, and make grants to charitable organizations whose activities directly address problems related to energy, water and health; and

► **THE HANS FOUNDATION**, which has been instrumental in helping to promote and deploy inventions created by Stage 2 Engineering and others that meet

fundamental needs of the rural poor in India

PHASE I LAUNCH & EARLY STAGES

The Billions in Change movement was launched in September 2015 with the release of the documentary Billions in Change. This film introduced the world to Mr. Bhargava, the invention shop at Stage 2 Engineering, and four never-before-seen innovations:

► **HANS™ Free Electric** – a hybrid stationary bicycle that produced 24 hours of electricity after one hour of pedaling;

► **Rainmaker** – a distillation machine that converted ocean water into fresh water;

► **Renew ECP** – an apparatus to improve circulation; and

► **Limitless Energy** – a method of

BACK TO THE BASICS

Women preparing a pile of Shivansh Khaad for organic farming



using graphene to convert geothermal energy into electricity.

Within weeks of the film's release, millions of people had viewed Billions in Change online, tens of thousands (in 170 countries) had signed up as volunteers of the Movement, hundreds of thousands began following Billions in Change on social media, and hundreds of millions were reached via print, online and television news.

PHASE II 2017 NEW INVENTIONS

October 2017 marked the release of Billions in Change 2, a sequel to the original and a



THE
SHIVANSH
FARMING
TEAM HAS
TRAINED
50,000
FARMERS
THROUGH
16 NGOS IN
10 INDIAN
STATES

continuation of Mr. Bhargava's quest. The second documentary featured five new inventions:

HANS™ PowerPack - a lightweight, portable device that generates and stores electricity for basic uses. It comes equipped with a spotlight, ambient lighting, outlets for powering small electronics, and a built-in solar panel for recharging.

HANS™ Solar Briefcase - a lightweight, portable, and simple-to-use set of solar panels that recharges the HANS™ PowerPack six times faster than the built in solar panel alone. When combined, the HANS™ Solar Briefcase and HANS™ PowerPack serve as a miniature power station for a rural household, school, or small business that lacks reliable electricity. These devices can also be extremely useful in emergency situations, natural disasters, or during long outages.

RainMaker Units - These are small, self-contained filtration units that use

minimal energy to remove contaminants from village water sources

► **RainMaker for Brackish Water** enables brackish wells to be used for drinking and agriculture and uses just 2 kilowatts of electricity.

► **RainMaker for Grey Water** uses even less energy and can be used to purify any type of water (including bacteria-filled) from rivers, streams and storm drains. By converting water that currently has no use or value into water that can be used for drinking and agriculture, these RainMaker units may help delay by a few years or decades the water crisis in some regions

Shivansh Farming returns life to dead soil by creating fertilizer from agricultural waste. The method is zero cost, takes just 18 days, and was developed, refined, and field-tested for over a year before being unveiled in *Billions in Change 2*. By the film's release the original pilot study of 50 farms in India had grown to over 40,000 farms across the country. That number continues to grow as more farmers witness stunning results of the Shivansh technique, including higher yields; higher quality, and more nutritious crops; reduced need for pesticides; lower irrigation requirements; healthy seeds that can be replanted in subsequent seasons; less air pollution because farm waste is no longer burned; visibly healthier children with lower rates of illness; and, most importantly, sufficient incomes that allow farmers to take care of their families and experience better quality of life. Illustrated Shivansh Farming instruction manuals are available for free download in several languages from the *Billions in Change* website www.billionsinchange.in, and a facility in Delhi offers free training to people wishing to learn the method and take it to farms in unreached areas of India and beyond.

PHASE III 2018 ONGOING EXPANSION AND NEW ENGAGEMENT

The Billions in Change Foundation, a non-profit organization, raises money, forms partnerships and distributes funding to Billions in Change initiatives on ground. The Foundation works with partners to build custom collaborations in order to serve maximum people as efficiently as possible, and also accepts contributions from individual donors.

Expansion of Shivansh Farming

Shivansh Farming continues to be promoted as a high-impact, zero-cost

solution for the hundreds of millions of small-plot farmers around the world facing serious livelihood issues. Shivansh is also addressing the widespread problem of chronic malnutrition among rural poor by increasing their access to vegetables, fruits, and other crops high in essential vitamins and minerals.

Given that Shivansh Farming is inspired by ancient farming practices, the Shivansh team teaches techniques relevant to the farmers they work with. To date, the Shivansh Farming team has trained roughly 50,000 farmers through



16 NGOs in 10 Indian states. It aims to further expand via efforts by THF to identify partner organizations with connections to agriculture-based villages. The trainers would teach the Shivansh Farming techniques in nearby villages while receiving constant technical support from THF.

LOOKING AHEAD

With respect to the current HANS™ electricity inventions, efforts are focused on developing distribution systems so that the products can be supplied to areas of greatest need. Stage 2 is also in the final stages of testing an add-on inverter, which will enable electronics running on low-voltage AC power to plug into the PowerPack. The inverters will be available in late 2018 in both India and the US.

Finally, the Billions in Change Foundation will continue to raise funds and seek like-minded partners in order to support the expansion of Billions in Change initiatives in India and beyond.

FACING PAGE AND ABOVE

Stage 2 Engineering's inventions are aimed at improving water quality, energy access, farming and healthcare

LIVES WE TOUCH



THF REGULARLY FUNDS LIFESAVING INTERVENTIONS FOR CHILDREN SUFFERING FROM DEBILITATING DISEASES - BE THEY SURGERIES, IMPLANTS, ORTHOPAEDIC PROCEDURES OR TREATMENT FOR DIFFERENT TYPES OF CANCERS

At barely two years, little Aditi has suffered more than her fair share. Diagnosed with CHD or Congenital Heart Disease in mid-2017, when she was just a month old, Aditi Sharma's case was considered hopeless by best medics in some of the top hospitals of the country. That is, until her parents were referred to THF, who shared her case with Wockhardt Foundation, Mumbai.

Aditi who belongs to Punjab, was suffering from Truncus arteriosus, a rare type of heart disease where she had one blood vessel instead of two; she had not one but two holes in her heart and only three heart valves instead of four. Explains her operating surgeon, Dr Suresh Joshi of



Wockhardt, "Not only did her heart have all these issues, her lungs were also damaged by the time she reached us and her case was considered more or less inoperable. Her case was at least 10 times more complicated. But we went ahead with the surgery and today she is fine, although she will need surgical intervention when she becomes a teenager." For now, Aditi's and her parents' smiles have returned and her mother Anu is very happy: "She is a very quick learner and now more active than my older girl."

According to the National Health Survey not only is Infant Mortality Rate a major concern in India, it is alone responsible for 10 per cent of infant deaths. Aditi is only one among 600 CHD cases which THF has funded under their signature campaign, the Little Hearts Program. Begun in 2013 in Mumbai, the program is now implemented pan-India. Any BPL cases which reach THF

are referred to partnering hospitals – the National Heart Institute, New Delhi and Wockhardt Foundation, Mumbai. Says Lt. Gen. Mehta, CEO, THF: "Whenever we get cases like Aditi's, they are sent to hospitals which have required facilities. Thus, we have been able to save hundreds of children."

But it isn't only CHD cases that THF funds. There are other interventions such as Cochlear Implant Surgery (CIP) – the largest program of its kind funded by any single organisation in the world. Available at a steep cost of INR 8 lakhs per implant, the Cochlear Implant is the only therapeutic intervention for those with severe sensorineural hearing loss. This intervention aids speech and communication skills. Implantation is only the first part of a process towards restoring hearing and subsequently involves speech therapy and frequent visits to the audiologist for device

Aditi's parents post her critical Congenital Heart Surgery expressing their gratitude and happiness

programming. The success of CIP depends on patient selection, surgical skills and post-surgical rehabilitation.

Take the case of Vikhyat Chauhan aka "Messi", a very active and cheerful 5-year old today. His Cochlear Implants have given him the power to hear - thanks to his parents' support, THF and his therapy centre. Shares his mother Alka Chauhan: "My son never uttered any meaningful word that we could understand and, he was six months by the time we realised that he could not hear or speak!" But Vikhyat, unaware of his own challenges remained a content child,

so much so that his parents often forgot that he couldn't hear or speak! Though they understood him through gestures and some vocalisation, they continued their search to get him treated.

Their persistence paid off when they found there was hope for cure but that the treatment would be long drawn, time-consuming and expensive. Vikhyat's parents heard about THF's Cochlear Implant Program (CIP). This intervention was started in December 2013 to help children of marginalised sections from 0-3 years (going up to maximum five years if the child was



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CANCERS

using a hearing aid). Vikhyat was treated when he was three. "It took almost two-three months but Vikhyat has recovered completely. He can hear now," shares his audiologist Neevita Narayan, who heads SpHear Clinic.

CIP bridges the gap between children born with profound hearing loss and their affordability of assistive devices. THF has collaborated with Columbia Asia Hospital, Gurgaon; Apollo Hospital, New Delhi and Max Hospital, New Delhi to provide CI surgeries. Not just that, the program provides comprehensive care with collaborative work between the child, paediatric cochlear surgeons, rehabilitation team and parents. Dedicated Rehabilitation Teams from SpHear Clinic and Swar Clinic in New Delhi take care of individual needs of every patient. Once speech development is satisfactory, the team ensures that the child is sent to a mainstream school.

THF has now taken its responsibility of helping children with severe diseases, to the next level. A corpus of INR Six Crores



has been created in Uttarakhand to cover illnesses not covered under the Central Government's Rashtriya Bal Swasthya Karyakram (RBSK). Says Lt Gen Mehta, "The government covers only about 27-29 ailments which are given free treatment in government hospitals. But this corpus has been created for diseases not covered under RBSK - such as Cancers, heart-related problems and more. Any poor child can avail benefit under our program called the Hans Bal Arogya Karyakram (HBAK)."

One such child is 10-year old Gaurav Rana from Rishikesh. His father Suraj Pal Singh is a salesman and provides for a family of five. At a salary of INR 10,000/month, life is tough. His eldest son Gaurav fell down one day while playing and fractured his left leg. At the hospital the leg was put in a plaster. About 25 days later, the child began complaining of severe pain in the same leg. When the plaster was removed, doctors found that the fractured bone had decayed completely. Gaurav was referred to the Himalayan Institute for Hospital Trust

(HIHT) at Jolly Grant, where investigations confirmed bone cancer and amputation was recommended.

But the father decided to try all options available. He began his visits to hospitals in Dehradun, Delhi and even went to Mumbai. Finally he came in contact with Dr. Vivek Verma in Max Hospital, Dehradun who assured him that amputation was avoidable. But the cost would be exorbitant. THF decided to support the child's treatment entirely. Gaurav underwent surgery in December 2017 and has fully recovered.

The HBAK was started at the request of Health and Family Welfare Society in March 2017. From its inception to June 2018, the District Early Intervention Centres (under RBSK) had referred 656 children who were screened as part of the RBSK process and treated under HBAK. Till date more than 700 children have received treatment under HBAK. Of the total expenses (INR 2,98,07,219 – nearly 3 Crs) 83 per cent has been utilized for the treatment of children suffering from various types of cancers – including primarily Acute Lymphoblastic Leukaemia. Children have also been treated for other major diseases like imperforated anus/kidney ailments and NICU for neo-natal care.

Take the case of Shivani, an 11-year old girl who had been abandoned by her parents in Doon Hospital in February 2017. Shivani had been at the hospice for at least two months, where she was suffering from grave malnutrition and weighed less than 20 kg. She had a suppurating, pus filled wound on the right ankle while suffering from polio myelitis in the left one. The diagnosis for her wound on the right leg was amputation but she was too weak for an operation. When informed about the child's condition, THF decided to fund the entire treatment expenses including salaries of three caretakers. Not only that, THF also got in touch with NGO Aasraa and asked them to adopt Shivani.

The child underwent three major surgeries to clear the infection and all three were successful. Thereafter she underwent regular physiotherapy and now walks with support. Shivani attended her first class at Aasraa's Street Smart Centre in February 2018 and dreams of becoming a doctor. Says she, "I want to fly high. In future, I want to serve sick people, especially children. I am very grateful to THF for helping me." And so are several others who have benefited from these life-saving interventions provided by THF.

ABOVE

Abandoned by her parents in a hospital, Shivani underwent three surgeries funded by THF to clear a severe infection in her leg. Today she has recovered completely;

FACING PAGE

Vikhyat Chauhan is a beneficiary of THF's Cochlear Implant Program

ANNUAL FINANCIAL REVIEW

The Hans Foundation received a total funding of INR 150.07 crore in the financial year 2017-2018 from its principal donor, Rural India Supporting Trust (RIST). THF received a total of INR 1.65 crore in 2017-2018 as local donations/grants.

The funds received have been utilized to support NGOs working in the sectors of Disability, Health, Women Empowerment & Livelihoods and Education.

FIVE YEAR SECTOR WISE FUNDING TO NGOS

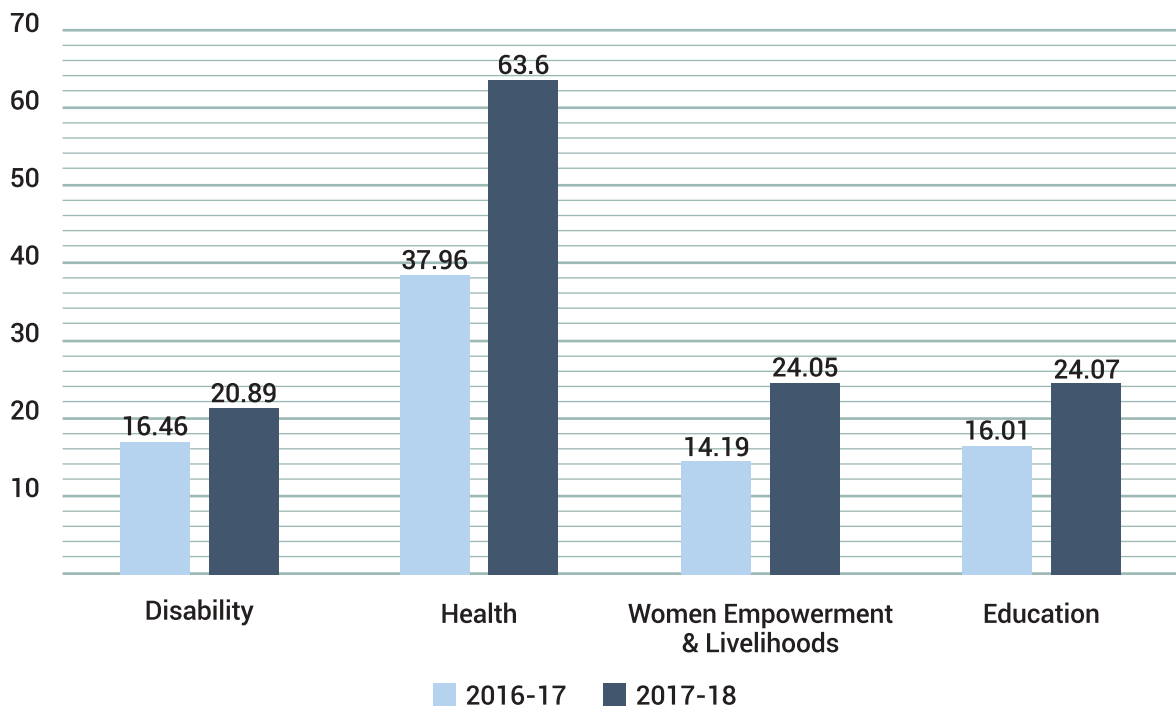
The Hans Foundation and Rural India Supporting Trust

Sector	2013-14	2014-15	2015-16	2016-17	2017-18*	Total
Disability	8.55	29.28	13.47	16.46	20.89	88.65
Health	50.14	51.94	40.97	37.96	63.61	244.62
Women Empowerment & Livelihoods	36.60	16.32	6.52	14.19	24.05	97.67
Education	9.61	10.54	13.75	16.01	24.07	73.97
Total	104.89	108.08	74.71	84.62	132.62	504.92

*Un-audited numbers

(Figures are in INR Crore)

Funding to NGOs has increased overall by 56.7 per cent from 2016-17 to 2017-18. All sectors have seen an increase in funding since last year. However, the Health sector has seen the maximum increase of 68 per cent.



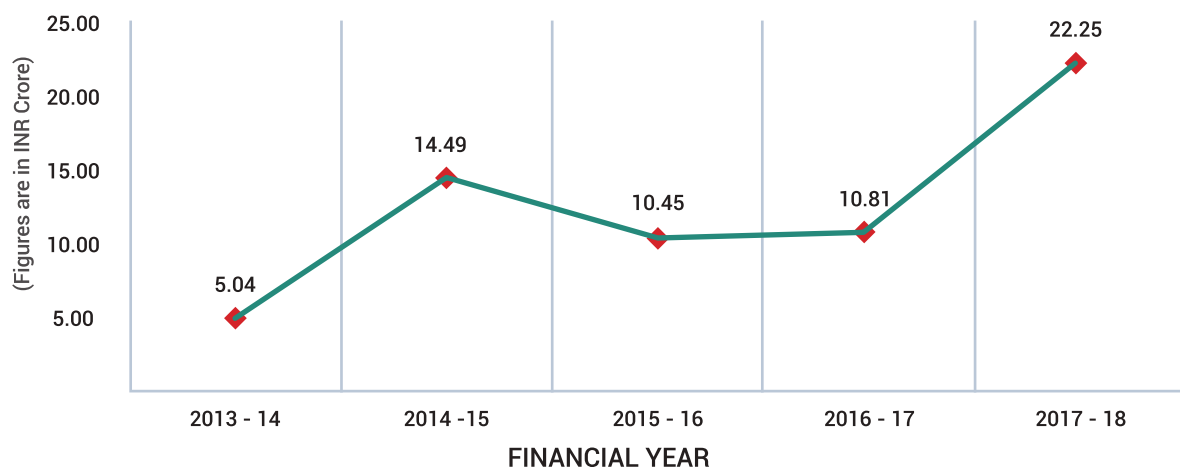
THF is also directly running signature campaigns such as the Cochlear Implant Program, Little Hearts, Permaculture, Sree Sankara Vidya Niketan and various self-implemented programs in Uttarakhand like the Integrated Village Development Program (IVDP). THF has also taken over the operations of Nanda Devi Centre of Excellence for Handloom and Natural fibres and a private handloom unit, namely Panchchuli Women Weavers at Almora, Uttarakhand under Direct Implementation Livelihoods project.

There has been more than 100 per cent increase in utilization towards projects directly being implemented by THF.

PROJECTS	DIRECT IMPLEMENTATION
2013-14	5.04
2014-15	14.49
2015-16	10.45
2016-17	10.81
2017-18*	22.25
*Un-audited numbers	

DIRECT IMPLEMENTATION

The Signature Campaign



BUDGET 2018-19

THF's budget is always aligned with its Vision, Mission and Objectives. The yearly budget is prepared after a thorough study of its past experiences, current situations and comprehensive plan for the ensuing financial year.

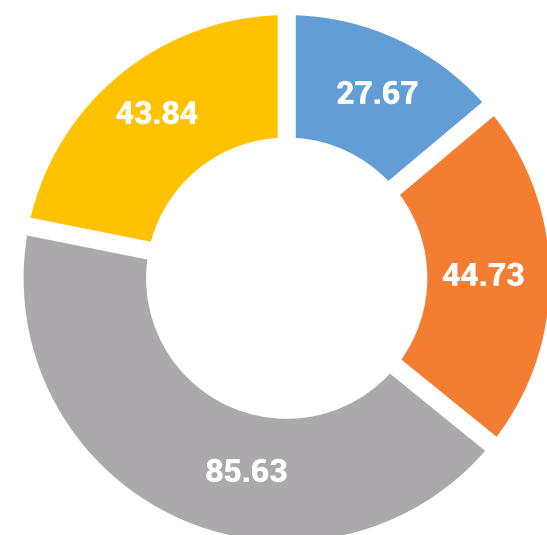
Uttarakhand 2020 being an important state-wide development program has a budget formulated separately and then consolidated with overall budget of THF.

THF & UK 2020

Sector	THF	UK2020	Total
Disability	25.00	2.67	27.67
Health	19.58	25.15	44.73
Women Empowerment & Livelihoods	14.90	70.73	85.63
Education	20.62	23.22	43.84
Total	80.09	121.76	201.87

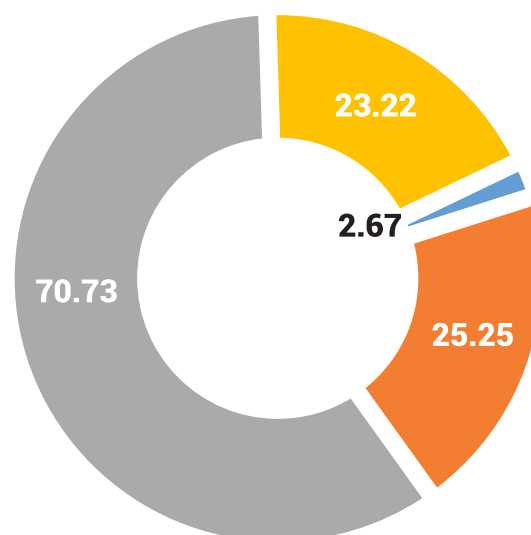
(Figures are in INR Crore)

THF & UK 2020



■ Disability
 ■ Health
 ■ Women Empowerment & Livelihoods
 ■ Education

UK 2020



■ Disability
 ■ Health
 ■ Women Empowerment & Livelihoods
 ■ Education

Uttarakhand 2020 completed its third year in 2018 since its inception in November 2015. The program geared up in the third year with the budget increasing by 135 per cent from 51.96 crore in 2017-18 to 121.76 crore in 2018-19.

(Figures are in INR Crore)



We are pleased to share The Hans Foundation (THF) Annual Report 2018.

Like every year, this year too The Foundation has been able to reach the remotest areas and

the most marginalized communities of our country, through our exceptional partners. The report presents an overview of the work done in the last one year and underscores national level initiatives. Through this report, we acknowledge and deeply appreciate the transformational work being done by our partner organisations at the grassroots level.

I would like to express my profound gratitude to Lt. Gen. S. M. Mehta (Retd) AVSM, SM, VSM** for providing me with the opportunity to contribute to this report and for being a prodigious guiding force behind the accomplishments of The Foundation. He has been a courageous visionary, a meticulous planner and a decisive executor under whose leadership, the organization is growing by leaps and bounds.

I would like to thank the entire program team in Delhi and Dehradun office for extending all possible support for compiling and collating the data. The report would not have been complete without their help and support. Further, I would like to thank the finance team for their contribution and hard work in compiling the financial summary and providing a comprehensive picture of the financial outlay.

We would also like to thank Ms Manjulaa Shirodkar for reviewing the content and editing the report. It is in order to thank Sid Ghosh for designing this issue.

The entire team would like to express their sincere gratitude to Ms. Shweta Rawat, our Chairperson, for her vision, commitment and fervour that have set unparalleled standards in social development work in the country. Her unstinted guidance, support and encouragement have been the key motivation for the team to strive for perfection and ensure that our interventions reach the unreached.

We hope that this Annual Report provides an overall perspective of our work and you enjoy reading it.

Swati Sharma

Sr. Program Manager
The Hans Foundation





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