



Annual Report

April 2021 - March 2022



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A note from the President

Bird's eye view of Annual Report of SOCHARA April 2021- March 2022

The journey of SOCHARA in 2021-22 has been satisfying and exciting!

SOCHARA SOPHEA CHLP (Community Health Learning Programme) 2021-23 has been a tremendous success, making way for strengthened collaboration with CHAI, Misereor, and more recently the Martin Luther Christian University, Shillong. A significant achievement has been CHLP making way for the MPH course Year II for Alumni and current scholars. This is a proud moment, and collaboration, for all of us in SOCHARA.



The Archive project of SOCHARA Resource Centre continues its activities with renewed focus, and HFALC (Health for All Learning Centre) have made significant headway in Networking and Solidarity with Civil Society Organizations and individuals in their personal journeys.

SOCHARA thanks all of you readers, while inviting your attention to highlights of this report.

People's Covid Helpline with Yumetta Foundation, Doctornet, Nutrition programmes in Madhya Pradesh, Sanitation, Communitisation processes and programmes across have been able to contribute to enhancing community awareness. With respect to promoting community health action through voluntary as well as government initiatives, Health System Observatory, Sanitation and Communitisation have made difference. SOCHARA's contribution to Research include – EACT study apart from critical inquiries in the areas of WASH, Institution related situation analysis, needs assessment studies in government Schools of Tamil Nadu. SOCHARA team provided critical comments on consultation organized by Tamil Nadu Child Rights Observatory. This is part of a contribution in the area of evolving strategies that enhance knowledge, skill and attitude of persons involved in community health and development.

SOCHARA contributed in a large way to revisiting Tamil Nadu State Health Policy, participated in ten District Health Assemblies, contributed to development of Vision Document of Karnataka by organizing state level NGO consultation and participating in human health resource review of the State.

Readers will find it interesting to know about Village Based Oxygen Saturation (VBOS) and monitoring system and Helpline.

SOCHARA is grateful to all members, especially executive committee members, and greatly appreciates the hard work by the entire staff in making all this happen.

We are grateful to all donors, network partners, and numerous individuals for their solidarity and friendship.

Dr. Pruthvish. S
President-SOCHARA

A note from the Secretary

Every crisis gives opportunity for the community organisations to respond and rebuild. COVID came as an opportunity for SOCHARA to revive the Community Health Learning Programme (CHLP) in a new hybrid mode without diluting its values and ethos. This was a big step carried out during 2021-22.



During the wave 2 of COVID, we realised the importance of Oxygen saturation issues and its pressure on the public health care system. We decided to set up a system - village based oxygen saturation monitoring (VBOSM) through which people in the rural places can monitor their oxygen saturation levels at home taking help from helpline and village volunteers and reaching out to Oxygen concentrators kept in the blocks. Our solidarity partner Misereor funded this initiative. We roped in Yumetta foundation and several other partner NGOs. This was established in Chattisgarh and NE states of India.

Like previous year – this year also SOCHARA responded tremendously to the COVID – by distributing dry ration kits to the urban slums of Bengaluru, North Karnataka and Kolar districts – many thanks to Azim Premji Foundation, AID US, Satya Sai International Organisation who supported us magnificently. We could also support 100+ waste pickers in the Vijayawada region by providing alternative livelihood support.

We continued our school health programme and community based WASH programme in the two urban slums of Bangalore and 24 schools in and around Bangalore urban district.

We also continued our community health action initiatives/ programmes in Tamil Nadu and Nutrition programmes in two districts of Madhya Pradesh.

Overall it was a satisfactory year, but we want to do more in the coming years and I am sure that with the help of dedicated staff we can do a lot in the years ahead.

My sincere thanks to all the SOCHARA staff, senior advisors, ARC, SISEC, the Executive Committee and General Body members - for their timely support, suggestion and feedback.

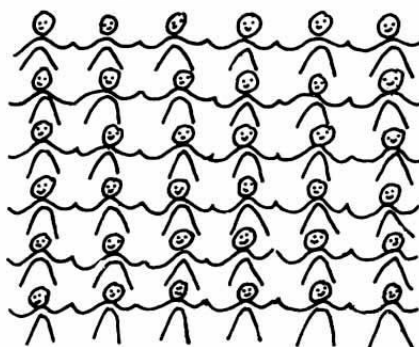
My sincere thanks to all our funding partners.

Thank you for reading this Annual Report. Any suggestions are welcome.

Sincerely,

A handwritten signature in black ink, appearing to be 'n. g.' followed by a stylized flourish.

Gurumoorthy. M
Secretary-Coordinator



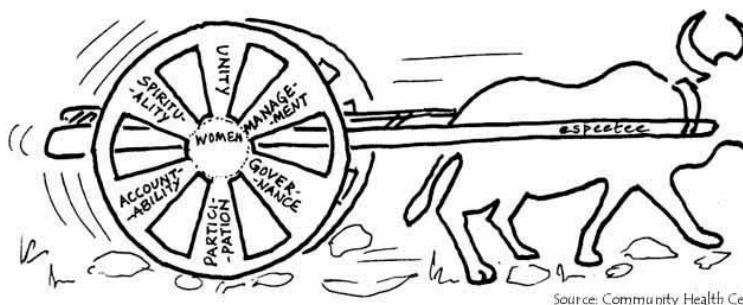
Vision & Mission

SOCHARA is an interdisciplinary resource group of community health professionals utilizing multiple pathways to facilitate and promote the goal of Health for All –

- It works through community action and partnerships, teaching and training initiatives, research, knowledge dissemination, policy advocacy and engagement with the public health system.
- It focuses on public health system development, action on the social determinants of health and community action for health with a social justice perspective.

Objectives

1. To create awareness of the principles and practice of community health among all people involved and interested in health and related sectors.
2. To promote and support community health action through voluntary as well as governmental initiatives.
3. To undertake research in community health policy issues, including strategies in community health care, health personnel training, integration of medical and health systems.
4. To evolve educational strategies that enhance the knowledge, skill and attitudes of persons involved in community health and development.
5. To dialogue and participate with health planners, decision-makers and implementers to enable the formulation and implementation of community oriented health policies.
6. To establish a library, documentation and interactive information centre in community health.



Source: Community Health Cell

The Annual Report is organized around the Objectives of SOCHARA.

OBJECTIVE I: *To create awareness on the principles and practice of community health among all people involved and interested in health and related sectors*

A range of diverse community health initiatives were undertaken during the year in the context of the ongoing COVID 19 pandemic due to SARS CoV2. This included new innovative work that was pandemic specific, and other work building on existing ongoing community based work in Karnataka and Madhya Pradesh.

People's COVID Help line:

SOCHARA took the lead by setting up a helpline with the support of Association of India's Development, AID US. We roped in many partners including Yumetta Foundation. In Tamil Nadu, SOCHARA hosted the helpline along with MNI (Jan Swasthya Abhiyan TN) and DoctorNet.

During the COVID second wave in India, SOCHARA was involved in various activities including awareness programs for communities, an online helpline (as part of all India helpline) support in Tamil Nadu where SOCHARA hosted the helpline. Volunteers from various sectors including medical, information technology, students, civil society organisations, trained counselors and general public were mobilized to support this initiative. The help line in Tamil Nadu primarily focused on clarifying doubts on COVID to general public, linking them with the public health system facilities, if needed, and follow up counseling.

The activity was carried out through multiple levels of training and orientation for different sections of human resources pooled for the helpline. Few major trainings were:-

- May 18 – Help line Volunteers Introduction meeting in two batches: (Core team, Dr. Ganthimathi & Dr. Needhirajan) - 45 & 17 Participants
- May 18 - COVID District Volunteers Introduction meeting: (Core team, Dr. Ganthimathi) - 94 Participants
- May 29 - Help line Volunteers (COVID) Orientation meeting: (Core team, Dr. Subhasri, Dr. Ganthimathi & Dr. Rubesh Kumar) - 74 Participants
- June 1st - Help line Volunteers (Vaccine) Orientation meeting: (Core team, Dr. Subhasri, Dr. Ganthimathi) - 81 Participants

During the year 2021-22 we also conducted various training programmes for different groups as follows:-

- On 10th June 2021 – “Orientation on COVID and Vaccination” for the Tamil Nadu Voluntary Health Association (TNVHA) members in which 78 participants attended.
- On 20th May 2021 - Orientation on opportunities for social workers during COVID period for the post-graduate students of Madurai Lady Dock College in which 35 students participated.
- On 14th June 2021 – Training on COVID safety measures in Community, for the volunteers from Vanavil organization, Nagapattinam in which 28 participants attended.

Community based Nutrition Program for young children in MP

The nutrition programme of the Centre for Public Health and Equity (CPHE) in Madhya Pradesh functions in 44 *anganwadis* of 27 villages and 2 urban slums, with the help of 22 nutrition workers, and the core team in Bhopal.

Rajiv Nagar and Gandhinagar are the two slums of Bhopal urban. Shahpur block in Betul district and Ganj Basoda block of Vidisha district are the two rural areas.

Health and nutrition workers were actively collaborating with *anganwadis* in their areas. This involves supporting child growth monitoring, health education, mothers' meeting and home visits. We worked with children under the age of 5 years for better health and nutrition; antenatal and postnatal women for good antenatal health, safe delivery and good health after delivery. The workers attended the Village Health and Nutrition Day (VHND) sessions to support the Health Dept. and ICDS programme in providing mother and child care. Our nutrition workers are trained in nutrition, malnutrition, growth monitoring, antenatal care and anaemia.



Malnutrition trends:

Area	2018	2019	2020	2021	2022
Bhopal slums (Urban)	38%	25.8%	19.8%	15.5%	16.8%
Betul and Vidisha district (Rural)	-	26.9%	24.8%	15.8%	17.7%



Supporting activities - Madhya Pradesh



Supporting activities - Madhya Pradesh

CBNR - Community Based Nutrition Rehabilitation

In the process of CBNR we demonstrated how to tackle children with severe malnutrition at the community level, with the help of locally available resources. CBNR process was undertaken with 44 children. At the end of 4 months, the change from severe to moderate malnutrition was seen in 11 children, moderate to normal in 16 children. There was no change in status in 17 children, though their weight had all increased. This could be due to a low birth weight or a premature birth.



Data of CBNR

Duration	Total number of children	Moderate to Normal to	Severe to Moderate	No change (in Grade)
4 Month	44	16	11	17

Tamil Nadu

129 awareness sessions (excluding campaigns and celebrations) were conducted among the community, school children, Police Club children and sanitation workers on Vaccination, Waste Management and Segregation, Adolescence and Puberty, World Water Day, World Toilet Day, World Nutrition Day, etc. with **1835** people participating in them.

- Snakes and Ladder awareness game on safe sanitation practices at Chintadripet Police Boys and Girls Club, Perumbakkam Government High School and Avadi Boys Higher Secondary School - 27 participants attended the programme.
- Waste management awareness through card games at Chintadripet Police Boys and Girls Club - 7 participants attended the programme.
- Regular field visits were made to MKB Nagar Police Club to address the concerns and queries of communities on ongoing vaccination camps for children.
- As a part of flood relief support, essential commodities distributed to Chintadripet, Kodambakkam and Perumbakkam Boys and Girls Police club
- Saidapet Police club visit and discussions with the Scoutmaster on the recently received notification on slum clearance by TN Slum Clearance Board.

In Bengaluru, Karnataka the team undertook several community based activities:

- COVID-19 Vaccination awareness programme in Anandapuram and Mayabazar through door to door visits from April to June 2021.
- A three-day hand washing campaign was conducted in Mayabazar and Anandapuram communities, Bangalore. (2500 people benefitted in total)
- Trained SOCHARA field Coordinators on 'Vector-borne' Module.
- Organised a Session on 'Social Welfare Schemes' in Mayabazar community.
- Mayabazar community volunteers along with technical team attended Women's day celebration at HCL Campus, Jigani.
- 24 community meetings and 26 community volunteers meetings were conducted in Maya Bazaar and Anandapuram communities, which discussed community issues and challenges.
- 46 community members of Maya Bazaar benefitted from the Sonehalli PHC Health Camp supported by C-WASH.
- Provided Street play training sessions for Maya Bazaar community volunteers by professional street play team. Total session: 16 nos

Objective II : To promote and support community health action through voluntary and governmental initiatives in health and related sectors

On the 10th of May 2021 a wider consultation was organized by SOCHARA on behalf of MNI to discuss measures to be taken by various sections to mitigate the impact of COVID, in which 65 people took part. It was followed by a press meet.

Health System Observatory (HSO)



HSO state level sharing and planning meet
at Nallampalli, Dharmapuri

In order to uphold patient's rights in both government and private health care sector, (especially in the corporate and large private hospitals) and to build pressure to enact laws to regulate the private sector, which is embedded within social accountability and social regulation framework, and prevent privatization of public health services, we initiated different activities at multiple levels :-

1. Creating awareness among the community on their rights in the private and public hospitals.
2. Dialogue with the policy makers at District, State and National level.
3. Networking with civil society groups and dialogue with health care providers to ensure patients' rights.

As part of these, we conducted multiple activities which include:-

1. Continued initiatives in 9 blocks of Tamil Nadu including four rural blocks of Dharmapuri, two rural blocks and, one semi-urban block of Tirupattur, and one rural and one urban block of Tiruchirappalli, with a set of activities.
2. Two state-level meetings (along with advisory body), six district level reflective and planning meetings were conducted during the reporting period.
3. Observation and exploration visits to district and sub- district hospitals, Primary Health Centres, Sub-centres, Anganwadi centres and private hospitals were made in these districts and blocks.
4. Issues identified during these visits were discussed with the concerned authorities along with the submission of memorandum.
5. Continuous community meetings were organised to raise awareness on patients' rights and entitlements.
6. Oriented members for active participation in District Health Assemblies.
7. Oriented the members on documenting case studies.

Apart from the multiple field orientations and interactions with civil society organisations, the following state level meetings were organised to further strengthen the health system observatory:-

1. On 19th July 2021 state-level brain storming session on the concept and possible activities of health system observatory was organised.
2. On 4th October 2021 a state level discussion was organised.

3. On 5th February 2022 a HSO state level meeting was organised at Nallampalli, Dharmapuri district, to plan five months activity, with 27 participants from Dharmapuri and Tirupattur districts. Dharmapuri and Tiruvannamalai health assembly experiences were shared and discussed as bases for the planning.
4. On 2nd March 2022, the first inaugural and orientation meeting on HSO was held at Krishnagiri, with the participation from 17 NGOs, in the presence of District Magistrate and Secretary to DDHS, and it was agreed to observe the health system further in the district.
5. On 19th March 2022, the first training on Health and Health Rights to HSO Krishnagiri observers was conducted at Krishnagiri with Resource persons by the SOCHARA and MNI core team.

Sanitation Program - Personal Hygiene

- Menstrual Hygiene - two training sessions on Menstrual Hygiene for two different batches were conducted for Prasoon staff and a youth group. Topics covered in the training were: the first menstruation experience, body mapping, menstrual cycle, hygiene (pad / cloth), physical and mental problems and social stigma.
- Hand Washing - In all 44 anganwadis of all three field areas, we trained the staff and the communities on how to do a proper hand wash.
- Some resource material was translated and disseminated on menstrual hygiene and also a hand washing manual.

Communitization Process

- After the COVID lockdown, support was given to adolescent girls in the Aishbagh centre on education, health, and challenges in personal hygiene. After discussions with them, informal learning sessions were started in the centre from February 2022.
- Conducted WASH related minor repair work (RO repaired) at Municipal Higher Secondary School, Lakshmipuram, Chennai, where 811 children benefited from the initiative.
- Conducted a two-day programme for Children's Day at four schools in Bangalore.
- Conducted a two-day programme for Global Toilet Day in Anandapuram and Maya Bazaar communities.
- Conducted Women's day celebration at Mayabazar and Anandapuram and organised 7 Street plays on Waste Management and Alcoholism (Total participants-350); awareness programme on the duties of keeping the environment clean by the community members, sanitation workers, volunteers, BBMP supervisors and Marshals, as a part of Women's day celebration (Participants-50); conducted Snake and Ladder game in Mayabazar as a part of Women's Day celebration (Participants-30)
- Team members handed over newly renovated girls' toilet infrastructure at Chintadripet Police Boys and Girls Club. The number of girls who benefited – 39.
- Inaugurated and handed over newly constructed toilets at ASB High School on 4th of August 2021.
- 39 non-functioning street lights were repaired and 2 new street lights installed in the Maya Bazaar community, ensuring safety of women and children.
- 728 Black spots were cleaned in the Maya Bazaar community.
- 12140 milk packets were collected as a part of milk cover collection campaign.
- 1780 dry ration kits were distributed in Maya Bazaar and Anandapuram communities for community members and BBMP Sanitation workers.

SOCHARA undertook a project entitled “Every Child Counts: Safe water and Safe Environment for Children”. The objectives of this Project is:

1. Ensure adequate access to WASH facilities particularly hand-washing with availability of soap and water, which are critical for infection prevention and control of COVID-19
2. Improvement in WASH infrastructure and an environment which encourages and facilitates hand-washing and respiratory hygiene in institutional settings such as schools, Anganwadi and health care centers can result in reductions in spread of COVID-19

Summary:

- One project coordinator was recruited. Team members were inducted on their roles and responsibilities and trained on preliminary assessment.
- Identified 55 institutions for project implementation. It includes 25 schools, 25 anganwadi centres and 5 Urban Primary Health Centres. Preliminary assessment was carried out in all institutions and a rapid assessment report was prepared.
- The team worked on two project components: 1. Infrastructure Development and 2. Capacity Building for Behavioral Change.

S.No	Output Indicators	Total number of Units
SCHOOLS		
1	New Handwash stations in schools	8
2	Improved Water Supply and storage in school	6
3	School toilets retrofitted, Inclusive and Gender Segregated	12
4	Teachers Training (Including Headmasters) on Hygiene and behavioral change	3
5	School Development and Management Committee (SDMC)	25
6	Hygiene training in schools (Sensitization and training of school parliament student members)	50
7	Plan - Operation and Maintenance of School WASH Infrastructure Development	25
ANGANWADIS		
8	New Hand wash stations in anganwadis	7
9	Improved Water Supply and storage in Anganwadis	8
10	Hygiene training to Anganwadi workers and helpers	46 (3 sessions)
10	Hygiene training to pregnant women and lactating mothers	277 (75 sessions)

S.No	Output Indicators	Total number of Units
11	Hygiene training to Out of school adolescent girls	318 (25 sessions)
12	Display of Covid appropriate behaviours through wall paintings in schools, anganwadis and UPHCs (strategic places)	30 (Institutions)
13	IEC materials developed and disseminated	55 (institutions)
	URBAN PRIMARY HEALTH CENTRES	
14	UPHC - Toilet construction with hand wash facility. Gender segregated and separate toilets for Staff and patients	One (UPHC)
15	Improvement in water supply and storage	One (UPHC)
16	Training to Health care workers	Five sessions



Menstrual Hygiene For Adolescent Girls



Strengthening child cabinets



Hygiene campaign at schools



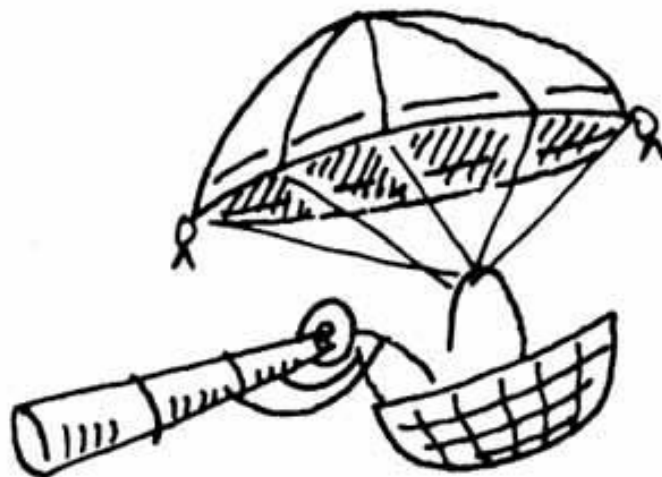
Constructed handwash stations at schools

Objective III : To undertake research in community health policy issues, including strategies in community health care, health personnel training, integration of medical and health systems.

Equitable Access to COVID Technology (EACT) study:

EACT study was coordinated by the global Peoples Health Movement (PHM), which was done in three continents. SOCHARA played an important role in conducting the study in India. Apart from taking responsibility of managing funds for the study, SOCHARA coordinated and conducted the study in Tamil Nadu. The final report was prepared in the month of June 2021 and released for public viewing in the month of July 2021.

- Conducted WASH- related needs-based assessment at 5 schools in Chennai.
- Conducted infrastructure related situational analysis in 2 schools and ITI Campus, | (Ambattur and Guindy)
- Conducted WASH need-based assessment at 14 Schools at Anekal.
- Needs assessment in Lakshmipuram Government Higher Secondary School and Avadi Boys Higher Secondary School



Objective IV: To evolve educational strategies that enhance the knowledge, skill and attitudes of persons involved in community health and development

The major initiative under this SOCHARA Objective is the Phase IV of the Community Health Learning Program which is described later (see page 20).

There are several ongoing short training programmes, orientations and student placements mentioned below:

- Two students of the Masters in Public Health from the Tata Institute of Social Sciences, Mumbai campus did their 5 months internship with SOCHARA – CEU. Ms. Subhasini (a medical graduate) and Ms. Nandhini (an engineering graduate) did explore the co-creation of health of the community in terms of community participation, rights and responsibilities, health planning by community etc.,
- On 31st July 2021 a team member gave an orientation on women's health to more than 100 participants. This was organised by All India Democratic Women's Association, one of the MNI members.
- SOCHARA contributed to a series of meetings on the Sustainable Development Goals report 2020, to orient and do a reality check on the achievements. Field practitioners from various places participated. These series of meetings was held in the month of July 2021.
- Two Chennai team members are mentors and resource persons of the CHLP program of SOCHARA. This includes mentoring of an intern each viz Ms. Nivedha Sakthivel and Ms. Abirami Aravindhan.
- Tamil Nadu government released its policy on children. SOCHARA team members had given critical comments to this policy from health aspects during the consultation organized by Tamil Nadu Child Rights Observatory on 15th December 2021 in Chennai.
- On 28th December a team member participated in the district level TB Patients empowerment meeting at Udhayam Centre, Tiruchirappalli, organized by REACH.

Apart from mentoring the team had participated in various trainings and orientation meetings in different aspects of health, as part of its continuous learning programme:-

- Wall painting on WASH topics at schools and Police Clubs of Chennai and Bengaluru
- Facilitated the online drawing workshop conducted by HCL-F for school-going children at Maya Bazaar and Anandpurum community
- Developed Covid-19 Vaccination FAQ booklet based on the concerns of the community members and translated it into Kannada. Circulated to the community members through online mode.
- Developed Covid-19 second wave guidelines (prevention, precautions and control), translated it into Kannada and distributed it in the community
- COVID second wave – precautions and home isolation guidelines booklet (translated into Tamil) and circulated to the Scout Masters in 6 Police Clubs on online platform.

- As a part of “World Toilet Day”, poster distribution at Kodambakkam Boys and Girls Police Club, Saidapet Boys and Girls Police Club, and Lakshmipuram Government Higher Secondary School.
- Board games distributed at Avadi Government Girls Higher Secondary School, Kodambakkam, Saidapet, Muthialpet Boys and Girls Police Club.
- Toilet Day poster distribution and board games distribution at Avadi Boys High School and Muthialpet Government High School.
- SOCHARA’s technical staff attended a workshop on ‘Child Protection Policy’ and ‘Self Audit Tool’ at HCL Technology Campus, Jigani.
- Participated in “Child Protection - Self Audit Tool and Compliance Workshop” conducted by HCL-F Chennai team.
- Organised a session on Prevention Of Sexual Harassment (POSH) policy by Geeta Menon, Co-founder of Stree Jagriti Samiti, for the team members.
- A team of HCL Foundation visited SOCHARA office and Maya Bazar community and interacted with community volunteers.



Source: Community Health Cell

Objective V : To dialogue and participate with health planners, decision-makers and implementers to enable the formulation and implementation of community oriented health policies

The Advisory Group on Community Action for Health (AGCA) is a Standing Committee of the National Health Mission (NHM) that has promoted and supported Community Action for Health (CAH) and Community Based Monitoring and Planning (CBMP). Thelma has been a member of AGCA since its inception in 2005. In the current year the work focused on response to the Covid 19 pandemic. Online AGCA meetings were held with active participation in a sub group that developed specific guidelines for community participation in response to the pandemic. These were circulated to all states and followed up by the AGCA Secretariat, who are very proactive and efficient. The mechanisms for communitisation of the public health system that were developed over the years, with ASHAs and the Village Health and Sanitation Committees (VHSNCs) played a crucial role during the pandemic. We participated in several online regional meetings that were held with the district participants in Karnataka, organized by the AGCA Secretariat. Village Covid Taskforces were set up in many places. A dip stick method was used to study vaccine hesitancy and we joined meetings in Rajasthan. As part of the State working group we participated online in most of the District Health Assemblies initiated and organized by the Department of Health and Family Welfare in Tamil Nadu, discussed below.

We also contributed to the Citizen Engagement stream of the Lancet Citizens' Commission on Reimagining India's Health System.

SOCHARA along with its allied partners and resources (including MNI members) was involved in various health policy strengthening activities, including drafting a Tamil Nadu state health policy, conducting district health assemblies and designing a Right to Health Act framework for Tamil Nadu.

Tamil Nadu State Health Policy



First State Health Assembly inaugurated by Tamil Nadu Chief Minister Mr. M.K.Stalin in the presence of Health Minister, officials, NGOs, WB officials and others

The Tamil Nadu government has taken initiatives to write its own health policy for the state. The existing framework for implementing health programs in the state is largely derived from the Tamil Nadu Public Health Act of 1939, hence there is a growing demand and need to formulate an updated policy of its own.

SOCHARA has been invited by the State Planning Commission of Tamil Nadu and the member of the economic council of the chief minister of Tamil Nadu to contribute to this policy

draft, and on the Right to Health Act in Tamil Nadu, along with other experts in various fields. SOCHARA has contributed to three chapters - the chapter on **Community process in health in Tamil Nadu** and the chapter on **private sector regulation in Tamil Nadu** (along with JSA members). We have also contributed to **Occupational Health and Safety in Tamil Nadu** through discussion and submission of recommendations to the Planning Commission of Tamil Nadu.

Health Assemblies in Tamil Nadu – a historic event in India



District Health Assembly - interacted by TNHRSP officials at Thiruvannamalai by SOCHARA, MNI and HSL members

- One of the important strategies to ensure community participation in health is to have an open multi-sectoral dialogue to hear and address the needs of the community. JSA and MNI continuously facilitate such meetings across the state and nation and invite policy makers to hear the voices of the community. In 2019 Tamil Nadu government, with the support of the World Bank, has taken this initiative on their own, and SOCHARA oriented the team on this theme.

Due to covid-19 this was delayed, till the situation improves.



Observed medical waster management at Dharmapuri Medical College Hospital, Memorandum raised to Dean of the College by HSO

- Two SOCHARA team members were appointed as state working committee members by the health department. The government planned to conduct 10 district health assemblies in the year 2021-22. Through few online meetings the working committee advised the government on the effective hosting and organization of these assemblies.
- The first district health assembly hosted by Tamil Nadu government was held on the 23rd December 2021 in Tiruvannamalai district and on 30th December in Dharmapuri district. These are the first of their kind in India.
- In the month of January and February 2021 district level health assemblies were organised in the districts of Tirunelveli, Thenkasi, Tutukudi, Ariyalur and Nilgiris. In some of these districts the district core team has conducted block level health assemblies also. SOCHARA –MNI members attended in person in the Tiruvannamalai, Dharmapuri, Nilgiris, Thenkasi, Tirunelveli district assemblies, and the SOCHARA core team and some of the general body members attended all these assemblies in the online mode.
- State Health assembly was organised at Omandurar multi- speciality hospital conference hall, Chennai on 30th March 2022, which was inaugurated by the Chief Minister of Tamil Nadu. The Tamil Nadu Health Minister, along with other higher officials from the health department was present. District authorities and community representatives from 14 districts where district assemblies were held participated and presented the proceedings of their respective district assemblies. SOCHARA team facilitated the presentation and group discussion of these districts, along with the other higher officials.

SOCHARA will continue its support to this initiative of the Tamil Nadu government in the coming years as members of state working committee, and in mobilizing civil society support from the districts to run effective “peoples health assemblies” in Tamil Nadu.

Right to Health Act in Tamil Nadu

- Along with the health policy for the state health system, Tamil Nadu is attempting to bring the Right to Health Act in the state, which is a long time demand of the health movements, including MNI –JSA. With the help of the civil society organizations National Health Mission organized a consultation on 9th March 2022 in which SOCHARA team members along with MNI members participated and gave their inputs. Continued efforts to bring a people-centric health act will continue by SOCHARA and MNI in Tamil Nadu.

Right to Health
*is a part and parcel of Right to Life
and therefore right to health is a
fundamental right guaranteed to
every citizen of India
under Article 21 of the
Constitution of India.*



SOCHARA SOPHEA CHLP 2021-23 – A report

Online Collaborative Phase

Introduction

The Society for Community Health Awareness Research and Action (SOCHARA) through the School of Public Health Equity and Action (SOPHEA) offers a unique Community Health Learning Programme (CHLP). The programme is unique as it encourages participants to explore the social paradigm of community and public health, and engage in community health action, based on community needs and first-hand community experiences. As a response to the ongoing pandemic the CHLP was modified and adapted to reach out to vulnerable communities through the training of Fellows.

CHLP 2021-23 is an online collaborative phase of CHLP in the context of COVID pandemic and builds on the understanding of the impact of COVID-19 on communities, and equips the participants to build appropriate strategies to tackle emerging challenges. SOCHARA collaborated with the Catholic Health Association of India (CHAI) for this phase of CHLP and is supported by MISEREOR for a period of two years. Coincidentally the current Director General of CHAI is an alumnus of the first batch of the CHLP. The two year collaborative phase commenced on 1st February 2021. In the first 3 months the CHLP team worked on developing the curriculum of the programme, along with undertaking the selection process for the Fellows, following a robust method that evolved over the years. The sessions for the programme commenced from May 2021. The duration of the programme is nine months with 30 learning modules delivered through live online sessions and other teaching learning processes, as well as a community-based project to enhance the learning experience.

We developed a Learning Management System (LMS) using open source framework Moodle. We hosted it on AWS. Vimeo platform was chosen to keep the recorded videos and zoom for live sessions.

Programme Goal

To contribute to building awareness on covid-19 and improving the medical and social care of communities.

Programme Objectives

1. To empower the learners to provide effective pandemic response to the communities they work with.
2. To train learners to design community-based covid-19 action programmes on a practical basis in consort with their theoretical learnings, through their field-based projects.

Programme Methodology

- Part time: Participants can continue with their current employment
- Blended learning: Weekly live sessions with recordings made accessible
- Mentorship: Continuous mentoring by experienced subject matter experts and community health practitioners through the programme and after.
- Community based field projects: With the participant's current organization or SOCHARA's partner organization.

Selection Process

The programme was announced on 5th February 2021. The dissemination of information was done through SOCHARA networks. The applicants had to fill a Google form and submit it along with their CVs and statement of purpose. We received 61 applications and 55 were

shortlisted for interviews. A rigorous process was followed for selection and 35 fellows were selected in March 2021.

Participants' Profile

The CHLP 2021 batch was a mix of fellows from diverse backgrounds and geographical locations. They are between 21 and 56 years of age with 20 women and 15 men. The fellows are from 14 states of India with most from Madhya Pradesh. All except one are post-graduates and some of them are pursuing post-graduation. There are 7 allopathic doctors, 2 ayurvedic doctors, 3 dentists, 2 nurses, 6 who have completed BSW or MSW and others have completed MPH or MA in Development. They all have working knowledge of English and the majority are employed. CHLP 2021 batch of 35 Fellows were divided into 7 groups with 5 in each group to carry out group assignments in the spirit of collaborative learning.

Curriculum and Content Delivery

CHLP 2021 curriculum development was the first step in planning this phase of the programme. The 52-week curriculum which was used for the earlier phases of CHLP, was modified to suit the requirements of the new online phase. The objective of the programme is to empower learners to provide effective response to the pandemic in the communities they work with. The development of curriculum was a participatory and consultative process among the partners MISEREOR, CHAI and SOCHARA. A new 30-module curriculum was developed from the earlier 52 -week curriculum, given the online and part-time nature of the programme. This curriculum was then put up for review by the ARC and inputs from these discussions were incorporated.

Module development was the next step. The process of module development involved onboarding of learning facilitators. For each module videos of 20 to 30 minutes duration were recorded and uploaded on the LMS after editing. Apart from the pre-recorded videos the module had additional learning materials and 2 or more live interactive sessions. The live interactive sessions were scheduled on Mondays and Saturdays. The live sessions are highly interactive enabling fellows to clarify doubts and reflect further with the subject matter expert.

The team of learning facilitators met several times and planned the module delivery. The coordination was done by the CHLP team, and 66 learning facilitators (LFs) were onboarded for the CHLP 2021. Because the programme was online it was feasible to onboard LFs from diverse geographical locations, which was one of the strengths of the programme.

As a part of content development 90 pre-recorded videos were created with each video of minimum 20 minutes duration. 58 Learning Facilitators from 40 SOCHARA network organizations and 8 Learning facilitators from the SOCHARA team were onboarded for the same. 80 Live Interactive Sessions with each session of an average of 2 hours duration were conducted and 120 Additional Learning Materials were shared with Fellows in the course of the programme. All this content was uploaded on the LMS, and the Fellows could access them at their convenience.

Mentorship

Mentorship has been a core and valuable component of CHLP, and this has been highly rated through the several external evaluations of the programme. The role envisaged for the mentors is that of a friend, philosopher and guide and a fellow traveler in the community health journey during CHLP and beyond. The role of the mentors is critical to the learning process.

Mentorship in this phase was also online and provided by mentors who were willing and able to take this responsibility. 22 mentors were onboarded. Mentorship was launched on 18th August 2021 with a meeting with all mentors.

Projects

Community based projects is an important component of the programme as it strengthens the perspectives gained by the Fellows from theoretical frameworks. CHLP 2021 was unique as it was in the context of the covid-19 pandemic. The community-based projects planned reflected this context and ensured that the pandemic preparedness of the communities is strengthened.

At the completion of the sixth months of the programme, Fellows were supported to do a community-based project on some community health related issues for a period of 3 months. The project period was November 2021 to January 2022. February and March 2022 were allocated for report writing. Project component was launched on 9th October 2021 and the Fellows were asked to start planning for the same with their mentors. The project could be a community health action (which can be completed in 3 months) or for those who are interested in developing their research skills, a research project.

Following are the details of projects planned by CHLP 2021 Fellows, (Annex 6)

- 21 Fellows conducted projects, 9 -Research, 12 - Community Health Action.
- SISEC approval process completed for all the 9 research projects.

Final Reports

The final report to be shared by Fellows was divided into 2 sections. In section A the Fellows shared their CHLP journey and take aways from the programme. Section B was about the projects that they conducted as a part of CHLP.

12 Fellows submitted their final reports which were shared with their mentors for feedback /comments. Out of the 12 reports one Fellow submitted only section A, as she had not conducted any project.

Mid-term External Review

Programme review of the CHLP by external reviewers has been an important exercise conducted by SOCHARA since the first phase in 2002-3. The mid-term review for CHLP 2021-23 (phase IV) was conducted in the months of January and February 2022 by Dr Dominic Misquith and covered the SOCHARA Fellows. A participatory method was used to conduct the review and develop the report.

ARC- Academic and Research Council

A new ARC was constituted for CHLP Phase IV in 2021 and the 6th ARC meeting was held on 24th February 2021. There are a total of 10 members including a member-secretary who is a SOCHARA CHLP team member. Subsequently, 3 ARC meetings were held till March 2022 which guided the CHLP 2021 programme. The inputs by ARC members were valuable as Phase IV was the first online phase of CHLP. Hybrid meetings were held with some members attending on Zoom and others in person at the SOCHARA office.

SISEC- SOCHARA Institutional, Scientific and Ethics Committee

SOCHARA strongly believes in adhering to the principles of bioethics in research as well as in public health practice. SOCHARA constituted SISEC in the year 2014. SISEC reviews research proposals put up by CHLP Fellows and interns; by team members; and by SOCHARA associates. SISEC is an 8-member committee including a SOCHARA team member as the member-secretary. SISEC played an important role in CHLP 2021 as 14 Fellows planned a research project. The members with approval from the chairperson and co-chairperson agreed that each member will review 2 proposals and give approval. The SISEC support to maintain the scientific rigor and to ensure the adherence to ethical norms continues to be crucial to CHLP.

Conclusion

The year 1 of the phase IV of CHLP concluded on 31st March 2022. The delivery of modules ended on 26th February 2022 with the module on social movements and health movements. The last date to submit reports was 15th March 2022 which was later extended to 31st March 2022. We had 6 Fellows who opted out of the programme due to personal or professional reasons. The remaining 29 Fellows are working with communities or pursuing their academic goals and contributing to community health process in diverse ways. 3 Fellows started their own organizations and networking among Fellows is active. Building community capacity for an effective pandemic response, which is rooted in the principles of equity in health and right to health, is continuing to grow from strength to strength at SOCHARA.

Testimonials

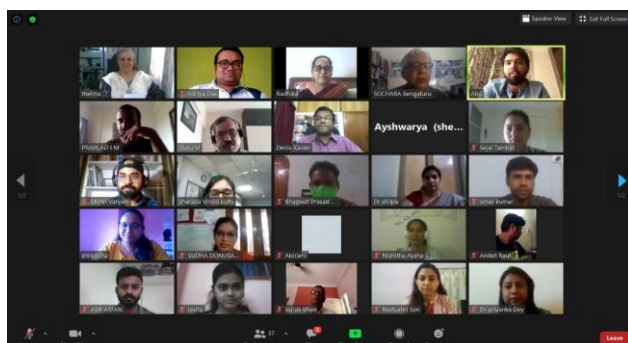
"CHLP for me was much more than an academic course, but rather a beautiful 'sangam' of people committed to working towards True Health of our society, without letting any biases affect the work. I feel relaxed that I have friends (including faculty and the CHLP team) to support me and fall back on, whenever in doubt.

Thank you CHLP for a new chapter in my life towards consciousness on Health."

- Ankit Das, CHLP 2021 Fellow

"As a social worker in the health sector, CHLP has been an invaluable learning experience for me. DoctorNet was originally working mainly on curative and preventive health. But learning about the importance of mental health and community health intervention has broadened my perspective, and I'm looking forward to incorporating my learning in the field. The learning facilitators brought their rich experiences and expertise, to deliver insightful and meaningful sessions. This course helped me to view health not as a disease to be treated, but as a fundamental right that should be wholistically addressed. Many thanks to SOCHARA for organizing this enlightening course."

- Abirami, CHLP 2021 Fellow



Fellows and Learning Facilitators interacting in an Online Live Session



Fellows met in-person during CHLP 2021 in the spirit of collaborative learning and Networking

CHLP 2022-23

In March 2022 SOCHARA announced CHLP 2022-23 and the announcement poster was shared with SOCHARA friends and associates. 54 shortlisted applicants were interviewed by the 3 panelists and 46 applicants were selected for CHLP 2022.

There was an organic continuation into the next reporting year. The Online CHLP 2022 Program started from the 1st week of May 2022 (as planned). We organised the 'Confluence of Community Health Changers Program (CHCC)' (in-person) for five days in the last week of May 2022. 26 Fellows from the CHLP 2022 batch attended all five days and 16 Fellows from CHLP 2021 batch attended the last three days of the Confluence. A certificate for CHLP participation was given to all the CHLP Fellows (2021 batch) who attended the CHCC.

In the CHCC, we had many exciting sessions such as panel discussions, field visits, group activities, communication workshops etc., planned. It provided a great opportunity for interaction among CHLP 2021 and 2022 Fellows, SOCHARA team members and friends of SOCHARA. The 5 days were like a celebration of coming together of community health practitioners.



Objective VI : To establish a library, documentation and interactive information centre in community health

A. Resource Material translated for dissemination

- The following material (notes, booklets, health educational material) were translated into Hindi and distributed widely:
Covid-19 concerns, Fever Clinic information, Covid-19 pandemic and precautions, Covid-19 vaccination, Black Fungus information and precautions, managing India's second covid-19 wave: urgent steps, AIIMS covid-19 home management information, booklet on home based care of covid-19, covid-19 (spread, preventive measures and home care) for community volunteer training purposes, and Stop covid-19.

Other material translated included the following:

- Antenatal Care (for training), 'Your Rights at the Medical Store', note on Gas Tragedy Hospitals, Lifestyle, article by Avay Shukla ('When did we become such a brutal country?'), 'Power analysis in health policy and systems research: a guide to research conceptualization' which was shared by Dr. Rajeev BR.

B. Community Health Library and Information Centre (CLIC)

CLIC has grown over the years. It continues its support to the SOCHARA team in all three units (Bengaluru, Bhopal and Chennai) and also serves outside users. Many documents are scanned by CLIC for the CHLP reading materials which are put on the Learning Management System (LMS). Documents and PPTs are circulated via email to the people who needed it as reading materials. Many books and journals and magazines are subscribed to the library.

The current collection or stock in CLIC are as follows:

Sl. No.	Description	Numbers
01	Books	16,873
02	Journals / Magazines / Newsletters	52
03	Resource Files	575
04	Documentaries / Videos	509
05	Posters	1,300

- Received books as donation from Mr. Prasanna Saligram; Dr. Mani Kalliath; Sheela Rajgopal; Dr. Ravi Narayan and Dr. Thelma Narayan.
- Published **Health Round-up** every month ie 12 issues during the year, which were shared via google groups to 1088 users
- Books and posters displayed and photos taken during meeting 'Confluence of Community Health Changemakers', Community Health Fellowship Programme, face-to-face meetings with all the fellows from 17th to 22nd January 2022 at St. John's Medical College, Bangalore.
- Listed out the PPTs of SOCHARA that was prepared by technical staff of SOCHARA. It was initiated by Dr. Ravi Narayan and Mr. Prahlad. PPTs collected by Mr. Mahadeva Swamy and listed by Mr. Yashas. It is stored on a hard disk.

- The CH Friend Circle WhatsApp group has 198 participants.
- SOCHARA also has a social media presence.

C. Publications:

- Annual Report 2020-2021
- Posters on SOCHARA Objectives
- Thank You Shirdi – a photo video prepared by SOCHARA for the memorial meeting of Dr. Shidi Prasad Tekur which was held on 3rd June 2021. He passed away on 16th May 2021
- Published WASH Newsletter every month that described activities of the WASH programme in both Bengaluru and Chennai.

CHLP Reports

- Sejal Tambat -. Community Health Learning Programme - A Report on the Community Health Learning Experience. p1-15
- Utpal Gogoi.- Community Health Learning Programme Report - Covid-19 pandemic and its impact on eye care services among tea garden workers, Assam.p1-11
- Vinaykumar Vishwakarma.- Community Health Learning Programme - A Report on the Community Health Learning Experience. p1-13
- Priyobrat Rajkhowa.- Community Health Learning Programme Report - The impact of COVID-19 pandemic on parental health-seeking behaviour for childhood immunisation: Experience from local health facilities in Assam. p1-10
- Aravindan - Community Health Learning Programme - A Report on the Community Health Learning Experience. p1-7
- Abirami Aravindan- Community Health Learning Program 2021-22 Report. p1-11
- Asif Asfan Parangodath - Community Health Learning Programme - A Report on the Community Health Learning Experience. p1-19
- Bhagwat Prasad Panika - Community Health Learning Programme - A Report on the Community Health Learning Experience. p1-18
- Nivetha Sakthivel - Community Health Learning Programme - A Report on the Community Health Learning Experience. p1-20
- Srijita Basak - Community Health Learning Programme - A Report on the Community Health Learning Experience. p1-3
- Shilpa.- Community Health Learning Programme - A Report on the Community Health Learning Experience. p1-8
- Kamath Nidhi - Community Health Learning Programme - A Report on the Community Health Learning Experience. p1-9

D. The Silver Jubilee Museum and Archival Project (SJ MAP)

- Started archiving of MFC materials; Rational Drug Use;
- Updated archival files – Disaster Response; SOCHARA Newsletters; CHLP Background materials both in English and Hindi;
- Gurumoorthy M took the initiative in developing **Digital Archive Platform** for SOCHARA Archives and Library. He spoke to people running similar archive initiatives (Ashoka, APU and IIT - Delhi) and approached Balaji Kutty for the implementation. He had a meeting with the team in February 2022. URL is <https://archive.sopheasochara.org/handle/123456789/1>

An overview note is provided at the end of the Annual Report of the **SOCHARA Sarai** which uses all the material in SJMAP

E. Report of the Health for ALL Learning Centre (HFA LC) - April 2021 to March 2022

The HFALC team (RN, TN, HRM) continued a range of activities as follows:

i. **The *Lancet* Citizen's Commission (LCC) on Reimagining India's Health System** is a cross sector initiative to develop a citizen's roadmap to achieving universal health coverage in India over a period of ten years. The LCC has five workstreams – Financing, Human Resources for Health; Governance; Community Engagement and Technology for Health. SOCHARA is one of the Knowledge Partners of the LCC. Dr. Thelma Narayan is an invited Commissioner. There were weekly research meetings, monthly full Commission meetings, participation in Theory of Change workshops, participation in webinars, and writing for the Newsletter. SOCHARA team have been involved in a literature review on Human Resources for Health with a focus on comprehensive primary health care.

ii. **SOCHARA *Sarai*** – The team has continued to reach out to a number of young doctors interested in working in rural areas or on specific areas of focus, as well as to a number of students and others interested to explore health in all its fullness.

iii. Learning initiatives and placements

Postgraduate MPH students mentored online for internships during this period:

- MSRMC PG Students' visited SOCHARA, Bangalore on 22nd February 2022 as part of their curriculum activities, and technical staff of SOCHARA took a session for them.
- St. Clare College Students visited SOCHARA, Bangalore on 2nd March 2022, as part of their curriculum activities.
- Dr. Ravi had a Zoom interaction with RGIUPH MPH graduates who completed their graduation in January this year on 17th March 2022.
- Sessions conducted for RGUHS MPH Students by SOCHARA in March 2022 (5 days) - Field Visit to Maya Bazaar, Bangalore on 8th; Advantages and Challenges of Community- based Interventions on 14th; Medical Pluralism-Traditional and Alternative Systems on 18th; Needs assessment, problem identification, program development on 28th; and Program Evaluation on 30th.

iv. Learning facilitation sessions and interactions :

- SOCHARA hosted an online meeting 'NGO Interaction in the Context of Health Sector Reforms' for Arogya Karnataka, Vision Group on 2nd July 2021.
- The awareness programme on POSH held on 24th November 2021, was facilitated by Ms Geeta Menon. The team in Bangalore attended in person and teams in Bhopal and Chennai attended virtually.
- Had an interaction meeting with Dr. Kavary Nambisan who was batch mate of Dr. Ravi Narayan at St. John's Medical College and Hospital and a long term contact of SOCHARA on 25th March, 2022.

v. Journal Club

The team agreed to have the Journal Club twice in a month (1st and 3rd Friday of every month, 11 am to 1 pm). CHLP team will coordinate it.

- 'The Virus of Communalism: What will be our response? India 2008: The reality once again' -held on 25th March 2022.
- Discussion on the Union budget and its allocation for health held on 11th March 2022.
- Ms.Aadira Stephen presented 'Are socio-emotional learning programmes missing the mark?' on 28-01-2022.

vi. Participation in Seminars, Panels and Meetings:

- Dr. Thelma's interview on 'Reimagining India's Health System @CitizenhealthIN' on Lancet Citizens' Commission, A citizens' roadmap to achieving universal health coverage.
- Memorial online meeting 'Remembering Shirdi' to celebrate the life and contribution of Dr. Shirdi Prasad Tekur (former SOCHARA Secretary-Coordinator) held on 4th June 2021 from 6:30 pm – 8 pm. Thank You Shirdi – a photo video developed.
- Discussion on the 3rd wave fueled by the Omicron variant of COVID with Dr Yogesh Jain.

vii. Solidarity support to other organisations

- Shyamsundar Raithatha had a discussion with Ravi and Thelma on his idea of a comprehensive primary health care program.



viii. The Story of ‘The SOCHARA Sarai’ and SJMAP

The SOCHARA Sarai

“ The SOCHARA Sarai on First Main, First Block, Koramangala in Bengaluru is a place where people on the Journey towards 'Health for All' can find shelter sustenance, support , solidarity and companionship; a public house, a meeting place for discussion and dialogue over a cup of tea; for some a destination and for others a point of departure – mid course or mid-career; a place to rest in the middle of a long journey.....”

- Adapted from Sarai Reader 01

- CSDS Delhi

- *Sarai* is a word that means a travelers’ inn; a sort of ‘*dhaba*’ a rest house on the road towards a particular destination. Fellow travelers reflect on their health journeys.
- The journey towards ‘Health for All’ is an important one for many health professionals as they move beyond commercialized and commodified bio-medicine towards the goals of -- Primary health care;
 - Building community health;
 - Equitous health systems and policy;
 - and relevant health options for marginalized, disadvantaged and neglected sections of the society;
 - or create relevant community oriented or community based interventions to existing or newly evolving health challenges.
- This journey involves reflecting on social and community perspectives; unlearning previous learning ; developing new constructs , new partnerships and facilitating the community and empowering them to take more responsibility for their own health and wellbeing and being part of a countervailing power that demands Health as a right.
- Halfdan Mahler, retired WHO Director General and one of the architects of the Health for All goal described this journey as a tortuous road to Primary Health Care.
- SOCHARA, began as a personal journey of professional exploration by two of its co-initiators who spent most of the year 1982- visiting Community Health and development initiatives from the friends and associates of the Community Health Movement in India in the early 1980’s and also visiting young doctors and health workers whom they had trained in the Department of Community Medicine of St. John’s Medical College, Bengaluru in previous years.

- In 1984, building on the reflections of this Bharat Darshan they co- initiated the CHC as a study – reflection – action experiment building on similar community health journeys of various colleagues, friends and associates.
- SOCHARA has always considered its work as a ‘Celebration of Personal Journeys towards Health for All and has always welcomed young and old explorers, pilgrims, activists and action initiators to visit, share, associate and be part of its work.
- The underlying philosophy and convictions enabled SOCHARA among many other initiatives it was associated with, to be identified as a welcome stop on the journey to Health for All. It became over the years a place where one could do the following.
 - Meet people especially HFA enthusiasts and activists would share their own community health stories
 - Listen to reflections on the journeys of others with patience, enthusiasm and solidarity
 - Discuss and dialogue on issues, initiatives, innovative ideas and projects
 - Be put in touch with lots of relevant literature, books, manuals, journals and newsletters, health promotional and audio visual materials from the health movement in India and the globe and refer to the collections in SOCHARA’s – CLIC
 - Allowed to explore archival collections and archives of documents and reports and news letters from health initiatives and networks and associations and movements with which SOCHARA had been associated.
- In 2016, when SOCHARA celebrated its Silver Jubilee (having been registered in 1991) two important developments took place to make the above experiences into more sustained initiatives or projects so that the new generation of HFA enthusiasts and activists could access these materials and continue to interact with older fellow travelers in this journey.

a) SJMAP

The first development was SJMAP- the Silver Jubilee Museum and Archives Project. This was initiated to collate organize and catalogue this significant collection of documents, publications and health promotional and communication materials that had been collected over the years.

- A live collection of praxis from SOCHARA’s deep involvement with the Community Health movement including networks and associations like mfc, VHAI, CHAI, CMAI, ACHAN, AIDAN, PHM, JSA, Science Movement, Women’s Movement, and other movements - organizations like WHO, GFHR, PHFI and others.
- This project seeks to collate all relevant historical /archival materials especially pre 2000 AD and make it available for reference by visitors, serious researchers and HFA explorers and innovators.

b) SARAI

The second development was to create the concept of a the ‘*Sarai*’ into a more definitive structure of activity so that visitors, HFA enthusiast, researchers and others could actually meet the co-initiators and the elder activists in the SOCHARA network by appointment to hear stories from personnel journeys and of the movement, share

their own stories and questions and evolving ideas and plans; and also if required stay in our rather spartan guest house which till recently had only been used by visiting team members from other clusters.

- Since 2016 till 2020- over the last five years we have seen the process of meeting and discovering and associating with a most diverse eclectic, innovative, multidisciplinary and multisectoral group of especially young people who reached us literally through just word of mouth information, or visits to the SOCHARA website or via www.communityhealth.in
- A checklist of the key callers and *Sarai* visitors (not exhaustive) and purposely clustered into some groups of visitors with similar orientation, purpose, needs and goals will give some idea of this exciting group and its widely diverse and hugely interesting backgrounds and guests. A few examples are given in each group just as an indication of the types of visitors and themes involved.

Over the last five years as the SJMAP initiative has progressed an overview of the factors for sustainability of SOCHARA and explaining its continued stability and dynamism was identified. These were classified into eight categories as a presentation at the Annual Staff Retreat in March 2020. These include the following factors for sustainability from a study of the history of SOCHARA.

Minimum size of core team at cluster levels – 3+2 formula

- 3 technical (multidisciplinary, multisectoral)
- 2 supportive (admin, accounts, library, communication, office support)
- 3 legged stool

Mixed funding (4 options)

- Solidarity funding – donation /support without specific project
- Project funding – specific focus of action and area etc
- Endowment /Corpus large donations for investments in long term support
- CSR (being explored now a days)

Network approach not institutional ethos – 8 options facilitated

- SOCHARA - Society Members, SOCHARA - extended team members, SOCHARA associates, SOCHARA partners, SOCHARA friends, SOCHARA fellows, SOCHARA field mentors and SOCHARA linked networks

Community Health Approach to health challenges

- Community Health Axioms (check list)
- Community Action for Health (Communitization)
- SPECE Analysis and action on social determinants
- Evidence based decision making not only idea based (is it working?)
- Each initiative has resulted in interesting approaches eg: CHESS, CHATA, CAH etc, is this happening in the current action initiative? Community Health Approach to Nutrition? Community Approach to Sanitation? Community Health Approach to Mental Health? Community Health Approach to Health Promotion in Schools?

Collective and Transparent Communication

- Acknowledging mails (basic courtesy)
- Keeping HQ(C/S and AO) and all team members informed
- Keeping cluster team involved and informed

- Using cc in emails when required to keep larger network informed
- Non hierarchical style except when writing officially or to authorities
- Regular reporting of activities and experiences and learning's through staff meetings, emails to tech team and website and social networking.

Building on Local History, Linkages , Past involvement and in house experience

- Keeping track of SOCHARA and cluster archives
- Keeping track of past, present linkages
- Keeping in touch with extended network and involving them in all activities to enhance collectivity.

Exploring all aspects of a Public Health/Community Health Challenges in Sequences

- Awareness- Action- Learning facilitation and training - action research and evaluation, policy engagement and documentation and advocacy (Network and Movement if relevant),
- Practicing Community Approach by experimenting and reflecting, in house and within team of the values of SOCHARA appreciated by team and fellows,
- Team building,
- Accountability,
- Participatory Management,
- Solidarity learning from each other,
- Collectivity over individualism,
- Enhanced Voluntarism in spite of remuneration,
- Inclusive,
- Nonhierarchical functioning,
- Transparency,
- Collaborative and engagement ethos.

Finally, this provision of opportunity through the creation of the *SARAI* and *SJMAP* initiatives in the Jubilee years has become the most concrete and hopefully sustainable innovation celebrating and building on the past even as the new SOCHARA team- past transition evolves its future plans enthusiastically and confidently especially since 2019.

Both Sarai and SJMAP offer new explorers and innovators on their journeys towards Health for All, a concrete option to get to know study, refer, reflect, review on their journeys by reading and referring to this wealth of materials on grounded praxis and field realities and a concrete option to meet past explorers and innovators to learn from their stories and to gain perspectives caution, context, inspirational stimulus and solidarity in their own journeys.

A checklist of a cross section of visitors to the Sarai clustered into 10 groups with somewhat similar goals and journeys (This is not a complete list but just indicative) 2018-2021

Community Health/Primary Health Care Explorers

- Dr. Pravin Singarayar, OBG Postgraduate, SJMC- Community based maternal health
- Dr. Randall Sequeira, Medicine Postgraduate, SJMC- Adivasi Health
- Dr. Sangeetha.M, Medico, Stanley Medical College, Chennai- Opportunity in Community Health
- Dr. Carl Britto, Medico, St. John's. Post Rhodes Scholarship- Health System Research
- Dr. Priyadarsh, Dali Rajhara and mfc convenor, Networking and HEAL Fellowship
- Dr. Nidhin Cyril, Pune, Coinitiator, Yumetta
- Dr Akshay Dinesh, MMC, SVYM- Exploring CH Options

Health Systems Researchers and PhD Students

- Dr. Mohit Gandhi- JNU- PHC agenda in Community Medicine
- Dr. Pooja- JNU- Corruption in medical colleges
- Chandrika- Mysore University, Health Policy Development in Karnataka
- Amitabha Sarkar- JNU-World Banks role in State Health Policy and Health System Development
- Kiran Kumbhar – History of Health For All movement
- Sunil Mathew George – Access to Health Care for Adivasis in Attapadi, Kerala
- Niranjana- IDS Sussex, Health for All movement in India

Fulbright Scholars from the USA

- Jack Fukushima- Nutrition of under six children with an SDH lens
- David Wanky- Medical Pluralism
- Vineet Raman

Fellowship Coordinators

- Health India fellowship- Priyadarsh
- Rural travelers fellowship- Pravin Singaraya
- TB Health Systems Development – ITU fellowship

Senior Scholars and Health Movement Colleagues and former fellows

- Anurag Bhargav- TB researcher and consultant, TB Study on Jhar
- ShyamSundar, Health Fellowship, UCSF
- Gabor Tiroler, AYUSH, Sweden
- MA Balasubramanyam- Integrated Health Systems & Plural Health System Policy
- Rakhal Gaitonde
- Unnikrishnan Payapill
- Rajan Patil

- Rajeev Basapathy
- Sameer Khan
- Krishna Pratap Singh
- Suraj Sarvot

MPH/MSc Postgraduates – short field posting

- Abhinav, TISS, Community Mental Health
- Adithya, TISS Community health
- Priyadarsh, TISS
- Manisha, TISS
- Anuj Kumar Aasthi, APU
- Yassir Saleh, CHAD

Community Health and Development /Social Sector Explorers

- Abu Huzaria Sheikh, Vismaya Kalike – after-school support initiative
- Vignesh Prasad , Vismaya Kalike – after-school support initiative
- Abhishek- Health communication
- Aravindan-DoctorNet
- Abihrami-DoctorNet

Medical students – seeking relevance and paths less travelled (Johnite Tales and Spirit of St. Johns Group)

- Tejas.S, Rahul Mishra, Taniha Gulati, Judah Pereira, Navin C.Rao, Thomas, Eulalia Pereira, Sandra, Sreela.

This group later formed into an informal group on the theme, (till they completed their undergraduate medical studies) called ‘The spirit of St. John’s’ and have had interactions with Drs Thelma, Mani and Shirdi and others, and St. John’s elder alumni.



Objective VII: Networking and Solidarity with Civil Society organisations

Strengthening of state and district health networks :

After having multiple online meetings, running a helpline in the first half of the year based on the need of community and the presence of the lock down, we have started convening physical meetings after the covid-19 pandemic had subsided. An extended steering committee meeting of MNI was held in Tiruchy on 23rd October 2021 with more than 35 participants to discuss various issues including Peoples Health Assemblies, case study collection on covid care in public and private hospitals and conducting district level MNI meetings.

- On 27th December 2021 we conducted the Tiruchirapalli district level MNI Meeting at Udhayam Centre, Trichy to take forward district level activities. Based on the observations, visits to health centres were made along with district and state team.
- On 28th December 2021 we facilitated Perambalur district level MNI Meeting at DAWN Trust Hall, Perambalur.
- On 2nd and 19th March 2021, meetings were conducted to strengthen the Krishnagiri district MNI chapter.

Strengthening JSA national secretariat :

- SOCHARA is one of the supporting organisations in running the national secretariat of JSA. One of its staff members is part of the secretariat committee. As part of that we continuously contribute to various functions of the movement including organising National Co-ordination Committee meetings, bringing statements, hosting peoples parliament etc.,
- On 28th July 2021 JSA hosted its National Co-ordination Committee (NCC) meeting to discuss various issues including strengthening of the network and expanding NCC membership. Based on that the national secretariat contacted various states and networks of JSA to choose their representatives and updated the same.
- On 1st November 2021 a national level consultation was organised on patients' rights by Oxfam and one of the team members participated and contributed to the study and campaign.
- Several meetings were held between secretariat member organisations to implement the JSA –NCC decisions and to strengthen the secretariat activities.

Networking

- CPHE SOCHARA Fellows discussed their current contributions and future plans for contributing to community health in Madhya Pradesh.
- Meetings with different organizations to discuss subjects like - Harmony and Cultural Heritage (with Anhad), Harmony and Development (with Sadbhavna Centre), discrimination in health care services (with Masum) and gender-based violence and its impact on health (with Cehat).
- Participated in a youth camp organized by the NGO Yumetta in Chhatisgarh.
- Vaccination Awareness campaign was conducted as part of National Vaccination Day at Mayabazar and Anandapuram community in collaboration with Swasti (Swathi Mahala Sangha) (Participants 185) and local Primary Health Centres.
- Covid-19 vaccination camp was organised by Namma clinic Chamarajpet. Our field coordinators and community volunteers actively participated in this vaccination camp held at Anandapuram community, Bangalore (total participants -385)

- Visited Assistant Commissioner of Police to discuss infrastructure at Saidapet Police Club, Chennai.
- Young Kalam Science Fest was organised at BBMP Boys High School, Austin Town for government schools supported by the HCL Foundation.

Solidarity through membership in committees / governance of other groups

- Ameer Khan and Thelma Narayan (TN) are members of part of the Tamil Nadu Government's state working group for 'Health assemblies in Tamil Nadu'
- SOCHARA is continuing part of the National Co-ordinating Committee of the Jan Swasthya Abhiyan and also one of the host organisations of the national secretariat. Currently Ameerkhan and Nidhi Shukla represent SOCHARA.
- CEU is hosting the secretariat of MNI Tamil Nadu and one of the team members is part of the steering group of MNI.
- Ameerkhan continues as the general body member of the RUWSEC, Tamil Nadu
- TN (Dr. Thelma Narayan) is a member of the Advisory Group on Community Action, National Health Mission
- TN is a Director of the Public Affairs Foundation (PAF) Bengaluru
- TN is a Commissioner in the Lancet Citizen's Commission on Reimagining India's Health System
- TN is on the General Body of APD and INSA India
- Dr. Ravi Narayan is on the Advisory Group of PHM Global



COVID 19 RESPONSE

Background

In the last week of April, during the peak of COVID wave 2, Misereor team reached out to SOCHARA and CHAI independently to learn more about the COVID situation in India and how we are responding to it. We exchanged a few emails and had meetings with Misereor on April 27th, May 10th and May 15th. By then, we had some plans - setting up a helpline, recreated Sahay and reached out to various community health organisations on how we can work with them. Based on our understanding and actions, a wider meeting was called on Jun 16, 2021- meeting with Misereor, Begaca (a company which is going to do project management of COVID responses of Misereor partners worldwide), CHAI and SOCHARA.

From SOCHARA, we explained to them about potential opportunities to work with communities through our network and CHAI talked about institutional actions. Towards the end of the meeting Misereor and Begaca (a company which is going to do project management of COVID responses of Misereor partners worldwide) agreed to release emergency funds to CHAI and SOCHARA in kind (Oxygen concentrators, Oximeters and accessories) and cash. In total INR 15cr (CHAI 11cr and SOCHARA 4cr) were allocated.

A. Village Based Oxygen Saturation Monitoring (VBOSM) system and helpline

The purpose of this project is to establish a system with the AIM to “Decrease mortality and morbidity of covid positive or covid suspected patients, achieved by early detection and prompt referral, with a system of village based monitoring of patients , strengthening of primary and secondary level health system to manage these referred patients , and supporting this initiative with dedicated covid helpline (Hopeline).

OBJECTIVE:

In particular, this project is intended to achieve the following Objective:

- Decrease death and suffering of people due to covid.
- Capacity building of Mitans to identify covid related serious patients at village level.

Introduction

VBOSM + COVID-19 Call Centre has the vision to help people in the panic driven times by a three tier approach – 1. Preventing the infection 2. Early diagnosis and treatment 3. Specific information during admission at tertiary care centres.

RESULT

1) Total Calls

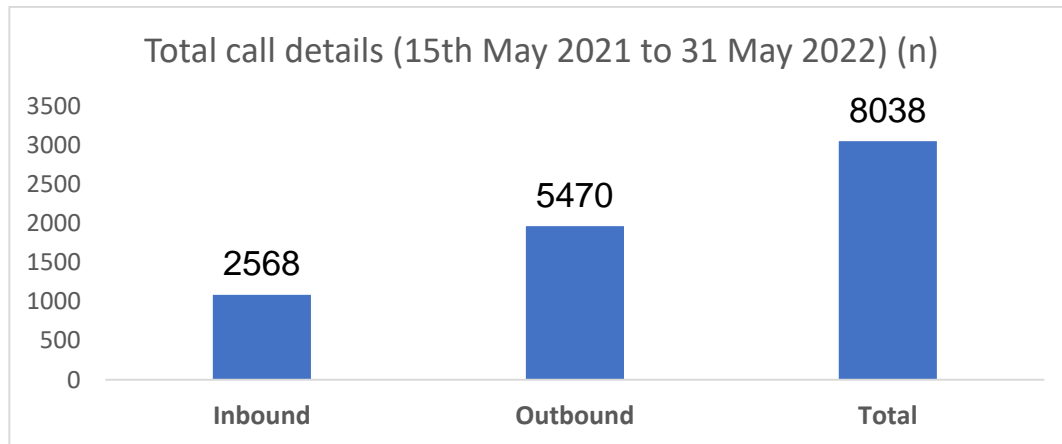


Fig.1. Showing the total calls.

2) State wise distribution of calls

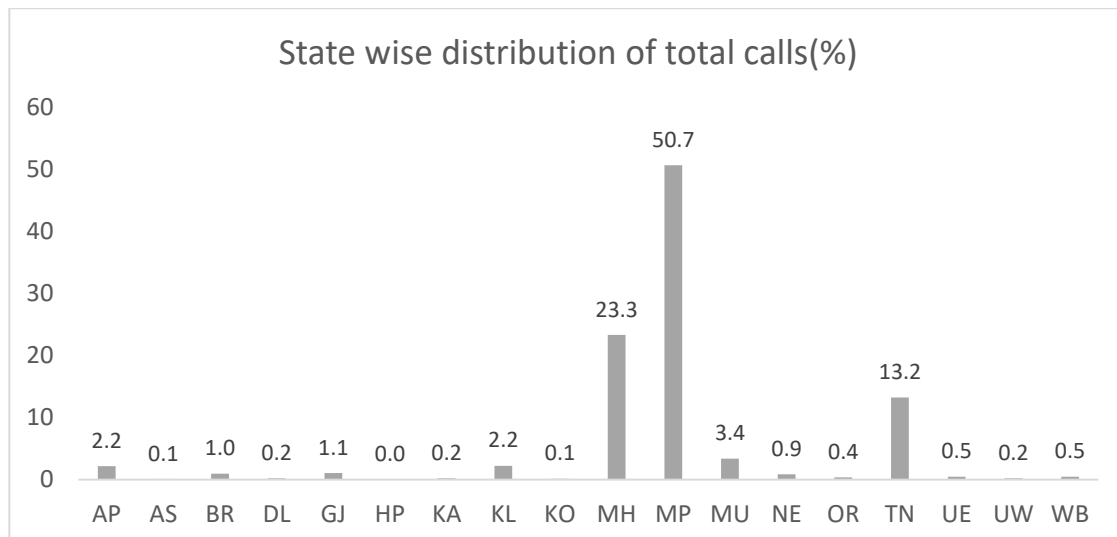
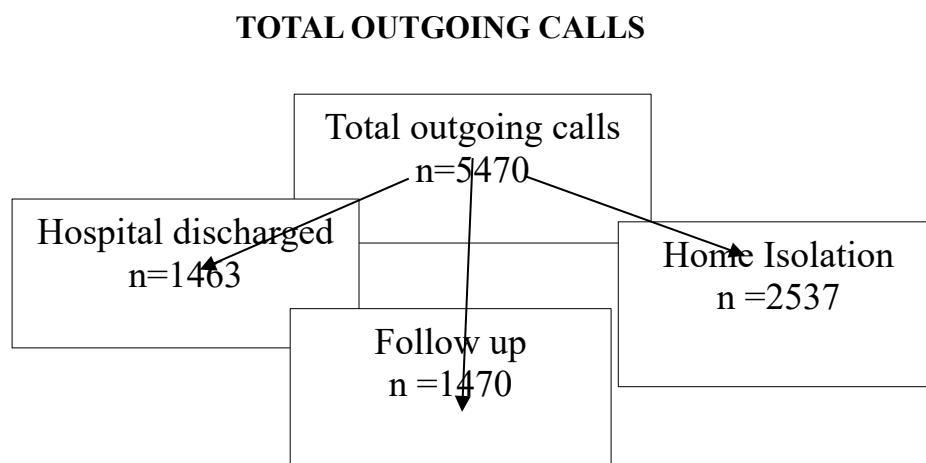


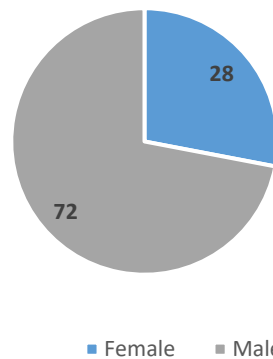
Fig.2. Showing the circle wise distribution of total calls.

3) Total outgoing call distribution



4) Gender wise distribution of patients -

Gender - Discharged pt(%)



Gender distribution- Home Isolated(%)

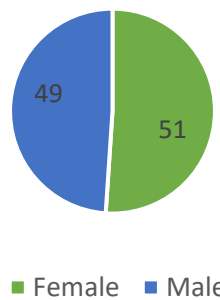


Fig.3. Showing the gender distribution of home discharged and Home isolated patients of Surajpur and Dhamtari district, Chhattisgarh.

5) Patients status as assessed from incoming and outgoing calls.

Present status of patient(%)

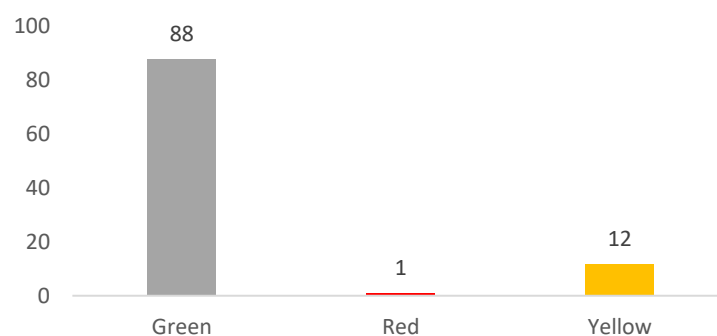


Fig.5. Showing the present distribution of the patients in the various zones

6) Co morbidities of patients

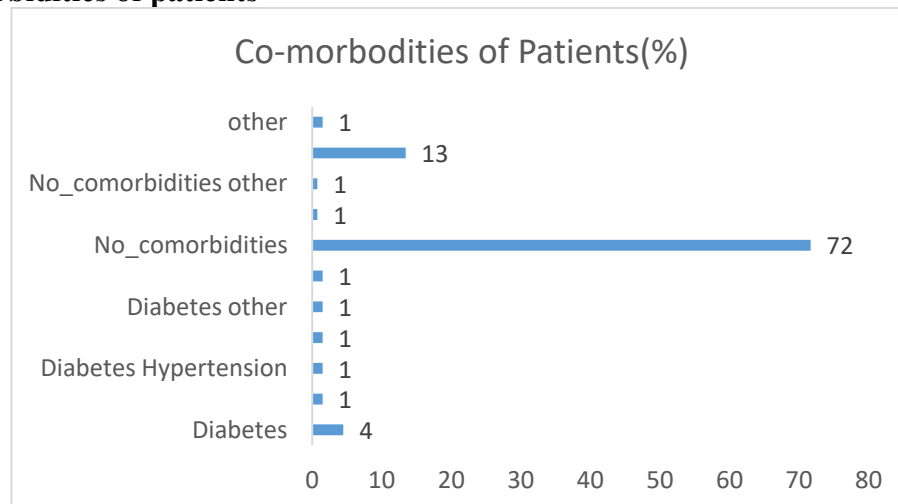


Fig.6 Showing the details of co morbidities of patients

7) Symptoms among home isolated patients

Presence of symptoms at the time of call (%)

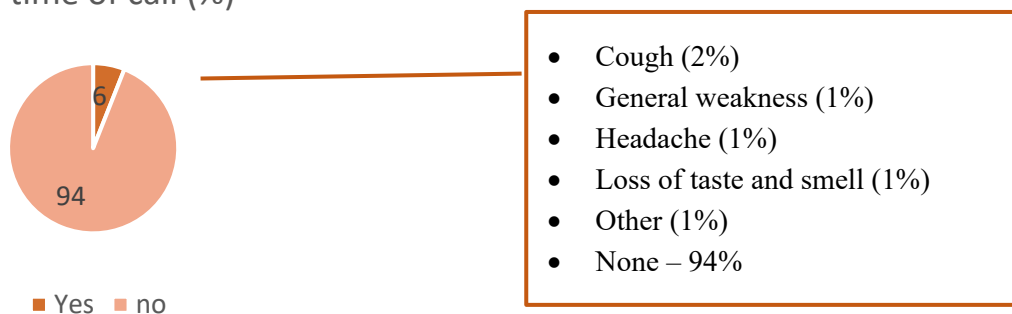


Fig.8. Showing the presence of symptoms at the time of call of home isolated patients of Surajpur and Dhamtari, Chhattisgarh.

8) Vaccination status among called patients

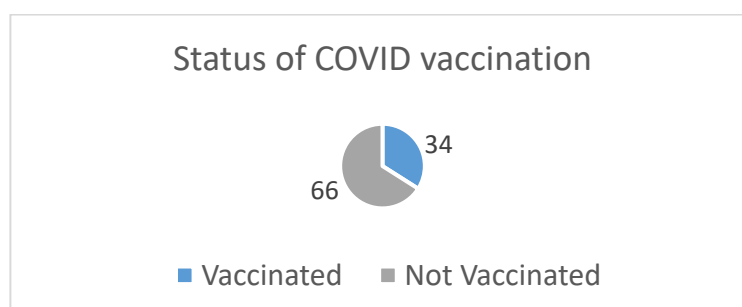


Fig.9. Showing the status of vaccination among the responders of home isolation, Surajpur, CG.

VBOSM + Training work done till 31 May 2022

a) In Chhattisgarh

- 1) 2800 Mitans and 140 Mitans trainers trained in Surajpur district of Chhattisgarh.

- 2) 88 Anganwadi workers trained in Raipur district.
- 3) 20 Mitans trained in Baloda Bazar district.
- 4) 50 Mitans Trained in Narayanpur district.
- 5) 120 Anganwadi workers trained at Jagdalpur district
- 6) 70 Mitans trained in Baloda Bazaar.
- 7) 80 Mitans supervisors trained who will train 700 Mitans of Narayanpur district.
- 8) Follow up calls to all these trained people is being done through Covid helpline.

b) In North East Region

- 1) 80 Health workers were trained in Aizawl, Mizoram.
- 2) 50 Health workers were trained in Manipur state.

System Strengthening for COVID

Equipments (PPE, Pulse Oximeter, Oxygen Concentrators)

- 1) Equipment was distributed in:-
 - Surajpur CHCs (70 Oxygen concentrators)
 - Ambikapur rural area (Sangwari) (10 oxygen concentrators, 2000 pulse oximeters)
 - 2 Oxygen concentrators given to Sukma district administration .
 - Equipment was given to district administration in Chakradharpur district of Jharkhand.
 - Equipment was distributed to PHCs, CHCs in north-east India in the states of Mizoram, Manipur and Nagaland.
- 2) Trainings conducted for health workers in:
 - Madhya Pradesh
 - Chhattisgarh
 - Maharashtra
 - North-east Indian states.

Summary

- 1) Around 6000 people were trained in VBOSM + 10 districts of 4 states.
- 2) Total ongoing and incoming calls were around 8000.
- 3) Institutions in 15 districts of above four states were provided with COVID related equipment like Oxygen concentrators, Pulse Oximeters, PPE, etc.
- 4) Around 1000 village health workers were trained about COVID across four states.
- 5) The helpline with dedicated national number +91 91755 94833 was initiated on the 21st of May 2021.

B. Dry ration kits for vulnerable families in Karnataka - Report

When the COVID second wave was at its peak, lockdowns and restricted economic activities affected livelihoods. AIDUS, APF (Azim Premji Foundation, Bangalore) and SSSIO (Sri Sathya Sai International Organisation, USA) came forward to ease the hunger problems of urban poor in Karnataka. Through their support, we could support

- 7250 families in Bangalore (1) Maya Bazaar – 1000 kits; (2) Sudarshan Nagar, Bismilla Nagar – 1350 kits; (3) JD Mara (JP Nagar) – 1500 kits; (4) Venkatapura– 600 kits; (5) Jaraganahalli – 450 kits; and (6) Thyagaraja Nagar – 500 kits.
- 4530 families in five districts across Karnataka

SOCHARA along with Stree Jagruti Samiti (Domestic Workers Rights Union), HeeraFoundation, Raza Education Society and host of community volunteers distributed rations in six wards of Bengaluru Urban district. We carefully evaluated vendors and made a decision based on cost per kit, delivery schedule, delivery cost, payment terms and quality of materials. We also increased the protein content of the kit.

The kit consists of : 10 kgs rice; 5 kgs wheat flour; 2.5 kg tur dal; 1kg black chana; 1 ltr sunflower oil; 500 gm. groundnut; 1 kg salt; 2 kgs sugar; 250 gm tea powder; 300 gm. chilli powder; 100 gm dhanias powder; 100 gm turmeric; and 100 gm sambar powder.



- Online meetings were organized with volunteers in Chintamani, Davangere and Haveri. The symptoms and treatment for covid-19 were discussed, as were the safety protocols to be followed during packing and distribution. In Chintamani and Davangere, meetings were also organised with the local ASHAs so that local volunteers could get a better understanding of the ground situation and

offer support to ASHAs where required. Subsequently, some volunteers joined ASHAs on their rounds to convince families to quarantine, get vaccinated etc.

- With families struggling to meet basic food needs, we knew that they were drastically cutting down on pulses, oilseeds, dairy, eggs, meat, fruits and vegetables. A nutritious diet is as important as treatment for long-term recovery from Covid-19. So, wherever possible, we incorporated nutritious foods in the kits. Volunteers in each region decided on the composition of kits based on local preference and availability, procured items and distributed them.
- Provided ration kits to 1000 families in 31 villages of Kolar district



- Dry Ration kits to 1800 families

ಪ್ರಜಾವಾಣಿ

ಬೀಡಿ ಕಾರ್ಮಿಕರಿಗೆ ಆಹಾರದ ಕಿಟ್ ವಿತರಣೆ



ದಾವಣಗೆರೆ
ಲಾಕ್ಡೌನ್ ಸಂದರ್ಭದಲ್ಲಿ ಉದ್ಯೋಗವಿಲ್ಲದ ಸಂಕಷ್ಟ ಎದುರಿಸುತ್ತಿರುವ ಬೀಡಿ ಕಾರ್ಮಿಕರಿಗೆ ನೆರಳು ಬೀಡಿ ಕಾರ್ಮಿಕರ ವತಿಯಿಂದ ಆಹಾರ ಧಾನ್ಯದ ಕಿಟ್ ವಿತರಿಸುತ್ತಿರುವುದು ಶ್ವಾಸರೋಗ ಕಾರ್ಯ ಎಂದು ನ್ಯಾಯವಾದಿ ಅರುಣ್ ಕುಮಾರ್ ಪ್ರಶಂಸಿಸಿದರು.

ನೆರಳು ಬೀಡಿ ಕಾರ್ಮಿಕರ ಯೂನಿಯನ್ ವತಿಯಿಂದ ಬೀಡಿ ಕಾರ್ಮಿಕರಿಗೆ ಆಹಾರ ಕಿಟ್ ವಿತರಣೆಗೆ ಎಸ್‌ಎಸ್‌ಎಂ ನಗರದಲ್ಲಿ ಚಾಲನೆ ನೀಡಲಾಯಿತು. ಲಾಕ್ಡೌನ್ ಹಿನ್ನೆಲೆಯಲ್ಲಿ ಸಂಕಷ್ಟದಲ್ಲಿರುವ ಜನರ ಸಹಾಯ ಮಾಡುವುದು ಎಲ್ಲರ ಕರ್ತವ್ಯವಾಗಿದೆ. ದೈನಂದಿನ ಬದುಕಿನ ನಿರ್ವಹಣೆಗೆ ತೊಂದರೆ ಅನುಭವಿಸುತ್ತಿರುವ ಜನರಿಗೆ ಪ್ರತಿಯೊಬ್ಬರು ಸಹಾಯ ಮಾಡುವುದು ಇಂದಿನ ಅಗತ್ಯವಾಗಿದೆ. ಕರೋನಾ ತಲ್ಲಣದ ಸಂದರ್ಭದಲ್ಲಿ ಬಡ ಜನರಿಗೆ ಸಾಕಷ್ಟು ಸಮಸ್ಯೆ ಉಂಟಾಗಿದೆ. ಅಂದೇ ದುಡಿದು ಅಂದೇ ಉಣ್ಣೆ ಮಾಡುವ ಜನರಿಗೆ ಬಹಳ ತೊಂದರೆಯಾಗಿದೆ. ಈ ನಿಟ್ಟಿನಲ್ಲಿ ಅಂತಹ ಜನರ ಸಹಾಯಕ್ಕೆ ಬರಬೇಕಾಗಿರುವುದು ಎಲ್ಲರ ಕರ್ತವ್ಯವಾಗಿದೆ ಎಂದರು.

ನೆರಳು ಬೀಡಿ ಕಾರ್ಮಿಕರ ಯೂನಿಯನ್ ಅಧ್ಯಕ್ಷ ಜಬೀನಾ ಖಾನಂ ಮಾತನಾಡಿ, ನಗರದಲ್ಲಿರುವ ಬೀಡಿ ಕಾರ್ಮಿಕರ ಬದುಕು ದುಸ್ತರವಾಗಿದೆ. ನೆರಳು ಬೀಡಿ ಕಾರ್ಮಿಕರ ಯೂನಿಯನ್ ವತಿಯಿಂದ ಎಲ್ಲ ಬೀಡಿ ಕಾರ್ಮಿಕರಿಗೆ ಆಹಾರದ ಕಿಟ್‌ಗಳನ್ನು ವಿತರಿಸಲಾಗುವುದು ಎಂದರು.

ಕಾರ್ಯಕ್ರಮದಲ್ಲಿ ಯೂನಿಯನ್ ಕಾರ್ಯದರ್ಶಿ ಕೆಂಜಪ್ಪ ಎಂ, ಪದಾಧಿಕಾರಿಗಳಾದ ನಾಹೇರ್ ಬಾನು, ಶಿರಿನ್ ಬಾನು, ಸೂರ್ ಪಾತಿಮಾ, ಸಬೀನಾ ತಾಜ್, ನಗೀನಾ ಬಾನು ಮುಂತಾದವರು ಉಪಸ್ಥಿತರಿದ್ದರು.



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Response in AP:

Upon the request of DBRC, a local NGO based in Guntur, SOCHARA had come forward to respond to covid-19 through awareness drives and vaccination campaigns, supporting the people in a prompt way. This was by identification of vulnerable sections and distribution of dry ration kits to the families of targeted communities. In our work, targeted communities include waste pickers, transgender people, HIV infected patients, differently abled people and migrant workers. This was supported by Humanist Society of Medicine.



Vaccination awareness and drive

C. Livelihood Programme:

In the wake of livelihood losses amid the covid-19 induced distress, many of them have lost work and livelihood. It is planned to implement a programme aimed at strengthening the livelihoods of the waste pickers, and also encouraging them to take up alternative livelihoods.

We have organised a series of meetings with the waste pickers and sensitized them about the need to strengthen their livelihoods.

30 waste pickers were provided with a 3 wheeler rickshaw after which they no longer carry their collected waste on their shoulder, rather carrying on their rickshaw instead. 50 four wheeler pushcarts were provided, and assistance for 15 petty shops was given. Hence they have taken up these alternative livelihood methods.



D. Community monitoring to ensure equitable access to covid-19 technologies and health services: a four-state campaign

- SOCHARA undertook a collaborative project ‘Community monitoring to ensure equitable access to covid-19 technologies and health services: A four-state campaign’ with People’s Health Movement (PHM Global), Viva Salud (Belgian NGO defending the right to health for all through people’s empowerment) and EACT (Equitable Access to Essential Health Technologies) in the context of Covid -19

The overall project goal was to develop a stronger commitment within governments and global institutions, and in the public discourse to make policies related to access to technologies based on public health priorities, rather than on market principles and corporate profits

The operational goals were to assist in the implementation of Situational Analysis of Equitable Access to covid technologies in India. This includes situational analysis with regard to inequity in access to diagnostics and treatment, especially hospitalized care for covid-19 and non covid-19 patients; monitor community access to essential health technologies in the post covid-19 context, in particular to note how access has changed with the coming of the pandemic and how equity in access changes as new technologies for covid-19 develop; to document the health related issues faced by different individuals and communities in selected areas in the country; monitor developments in such areas and note trends in both global governance and in proposed countries, that lead to greater or lesser public ownership of health technologies and facilities.

1. The situational analysis would document the health related issues faced by different individuals and communities in selected areas in the country identified by the consultant organisation.
2. Monitor developments in such areas and note trends in both global governance and in proposed countries, that lead to greater or lesser public ownership of companies, distribution, and platforms as opposed to or in favor of dependence on market mechanisms.
3. The consultant organisation shall analyse the health systems preparedness and financing and the governance of healthcare, including supply side issues related to equity in access to diagnostics and hospitalizations. These could be through interview or consultations with identified groups and key informants.

The consultant organisation shall prepare reports on the situational analysis at the end of the term of the contract. The report thus prepared shall indicate the methodology and tools used. The output should be useful to inform civil society organizations and relevant authorities about policy and implementation gaps and measures that could help improve access- at global, national and local levels. This campaign was taken by Ms. Neelanjana Das, Dr. Gopal Dabade and Mr. Amit Kumar - in the states of Bihar, Chhattisgarh and Karnataka.
[the full report of this campaign is available at SOCHARA]

Human Resources in SOCHARA

SOCHARA has a committed, talented, inter-disciplinary team, presently based in three clusters in Bangalore, Chennai and Bhopal. The following team members based in CHC-Bangalore, CHC –Chennai and CPHE Bhopal were the human resources supporting the activities during this reporting period .

TECHNICAL TEAM

1.	Mr. Gurumoorthy.M	:	Secretary and Coordinator
2.	Dr. Ravi D'Souza	:	Senior Consultant and Co-Coordinator, MP-CPHE
3.	Mr. Ameer Khan	:	Co-Coordinator-SOCHARA, Training & Research Associate.
4.	Mr. Prahlad I.M	:	Co-Coordinator and Training and Research Associate
5.	Ms. Nidhi Shukla	:	Training and Research Assistant
6.	Dr. Radhika Kaulgud	:	Programme Coordinator, CHLP
7.	Mr. Suresh. D	:	Communication Officer and SIMS Manager
8.	Mr. Azam Khan	:	Training and Research Assistant
9.	Ms. Sreelakshmi Santosh	:	Training and Research Assistant
10.	Mr. Abu Huraira Shaikh	:	Project Leader - SAHAY
11.	Mr.Karthikeyan Kandasami	:	Project Manager
12.	Mr. Alfred Raju	:	Training and Research Assistant
13.	Mr.H.R. Mahadeva Swamy	:	Information Officer
14.	Dr. Judyangel	:	Project Manager
15.	Mr. Mallesh K.M.	:	Training and Research Assistant
16.	Ms. Nandini Senguttuvel	:	Training and Research Assistant
17.	Dr. Shikha Upadhyay	:	Training and Research Assistant
18.	Ms. Aadira Stephen	:	Training and Research Assistant
19.	Ms. Jyothi	:	Program Assistant
20.	Ms. Prema	:	Field Coordinator
21.	Ms. Rajani	:	Field Coordinator
22.	Mr. Kudiয়ারasu	:	Program Assistant
23.	Ms. Parveen Taj	:	Community Facilitator
24.	Mr. Suryakumar	:	Community Facilitator

ADMINISTRATIVE TEAM – (Bengaluru - HQ)

1. Mr. V.N.Nagaraja Rao – Administrative Officer
2. Mr. Mathew Alex: Accountant
3. Ms. Maria Dorothy Stella : Office Supervisor
4. Mr. Hanumanthappa – Account Assistant

SOCHARA has additional support staff in Bengaluru.

1. Mr. Hari Prasad Ojha- Office Assistant, SOCHARA Bangalore
 2. Mr. M.S.Joseph – Office Assistant, SOCHARA Bangalore
 3. Mr. Tulsi Chetri – Office Assistant, SOCHARA Bangalore
- And office helpers in Bangalore, Chennai and Bhopal

In Bhopal and Chennai offices admin, accounts and library work is managed by the technical team.

ADVISORS

- Dr. Ravi Narayan - Community Health Advisor and Archivist, SJMAP
- Dr. Thelma Narayan – Senior Advisor, Academic and Health Policy Action

SOCHARA Members : Society members are also resource persons from multidisciplinary backgrounds with rich experience and will be invited as and when required to support and advise regarding technical aspects and skill development of the new team. In addition some members will actively support governance as members of the EC.

Governance and Administration

During the year 2021-22 the Executive Committee meetings were held on (1) 10th June 2021 (2) 13th September 2021 (3) 27th October 2021 and (4) 11th January 2022.

Executive Committee

- | | | | |
|----|-----------------------|---|----------------|
| 1. | Dr. Pruthvish. S | - | President |
| 2. | Dr. Denis Xavier | - | Vice President |
| 3. | Dr. Maya Mascarenhas | - | Treasurer |
| 4. | Mr. Gurumoorthy. M | - | Secretary |
| 5. | Dr. Ganthimathi.J | - | Member |
| 6. | Dr. Susanta Ghosh | - | Member |
| 7. | Dr. Adithya Pradyumna | - | Member |

Finance & Management Committee (FMC)

1. Mr. As Mohammad – Chair
2. Dr. Maya Mascarenhas – Member
3. Mr. Gurumoorthy. M – Member

SOCHARA Academic and Research Council (ARC) Members

- | | | | |
|-----|--------------------------|---|------------------|
| 1. | Dr. Thelma Narayan | - | Chairperson |
| 2. | Dr. Pruthvish.S | - | Member |
| 3. | Fr. Dr. John Thekkekkara | - | Member |
| 4. | Dr. Ramani Atkuri | - | Member |
| 5. | Dr. Sunita Bandewar | - | Member |
| 6. | Mr. Karthikeyan | - | Member Secretary |
| 7. | Dr. Mohan Isaac | - | Member |
| 8. | Dr. Senthil Kumar | - | Member |
| 9. | Mr. Prasanna Saligram | - | Member |
| 10. | Ms. Maryann Washington | - | Member |

SOCHARA Institutional Scientific and Ethics Committee (SISEC) Members

- | | | | |
|----|-------------------------------|---|---|
| 1. | Dr. Arvind | - | Co-Chairperson |
| 2. | Dr. Manjulika Vaz | - | Co-Chairperson |
| 3. | Ms. Janelle Fernandes | - | Member Secretary & Associate Director, CHLP |
| 4. | Mr. As Mohammad | - | Member |
| 5. | Ms. Pushpa Achanta | - | Member |
| 6. | Dr. Sushil Kadanakuppe | - | Member |
| 7. | Dr. Edward Premdas Pinto | - | Member |
| 8. | Rev. Dr. Christopher Vimalraj | - | Member |

POSH (Protection of Women from sexual harassment) Committee

1. Dr. Radhika Kaulgud
2. Ms. Nidhi Shukla
3. Mr. Gurumoorthy. M
4. Mr. V.N.Nagaraja Rao

CLIC Committee

1. Mr. As Mohammad
2. Mr. Prasanna Saligram
3. Mr. Prahlad I.M.
4. Mr. H.R. Mahadeva Swamy
5. Mr. V.N.Nagaraja Rao
6. Ms. Nidhi Shukla
7. Mr. Kudiyarasu

General Body Members

1.	Dr. Ravi Narayan	2.	Dr. Thelma Narayan
3.	Dr. P. Chandra	4.	Dr. Mohan Isaac
5.	Ms. Valli Seshan	6.	Mr. Sam Joseph
7.	Dr. Sunil Kaul	8.	Mr. K. Gopinathan
9.	Dr. H. Sudarshan	10.	Dr. M.K. Vasundhra
11.	Mr. As Mohammad	12.	Dr. Ravi D'Souza
13.	Dr. N. Devadasan	14.	Dr. Kishore Murthy
15.	Dr. Neela Patel	16.	Dr. Anand Zachariah
17.	Prof. Shanmuga Velayudhyan	18.	Ref. Sr. Aquinas Edassery
19.	Dr. K. Ravi Kumar	20.	Dr. Muraleedharan V.R
21.	Dr. Arvind Kasturi	22.	Ms. Anjali Noronha
23.	Dr. Ramani Atkuri	24.	Dr. Lalit Narayan
25.	Dr. Rahul ASGR	26.	Dr. Priyadarsh Ture
27.	Mr. Prasanna Saligram	28.	Mr. Ameer Khan
29.	Mr. Prahlad I.M.		

Honorary Members

1. Rev. Fr. John Vattamattam – Honorary Member
2. Dr. D.K. Srinivasa- Honorary Member
3. Mr. A. Arumugham – Honorary Member.

OUR PARTNERS

MISEREOR
IHR HILFSWERK



**Azim Premji
Foundation**

HCL
HCL FOUNDATION



WaterAid



MF
Maharashtra Foundation



HUMANIST
CENTRE FOR MEDICINE



viva salud
UNITED IN THE STRUGGLE FOR HEALTH



Acknowledgements

WE THANK

1. KZE / Misereor for the immense financial support.
2. AID-USA for their immediate and timely financial support.
3. BEGECA for their support in getting the COVID 19 medical equipments.
4. HCL Foundation for their continuing support to the C-WASH project in Bangalore and Chennai.
5. APPI (Azim Premji Philanthropic Initiatives), Bangalore, for their financial support to distribute the dry ration kits to slum dwellers of Bangalore urban district.
6. Sri Sathya Sai International Organisation (SSSIO), USA, for their generous contribution.
7. Maharashtra Foundation (USA) for their generous contribution.
8. Viva Salud for their contribution
9. Humanist Centre for Medicine, Bangalore, for their generous contribution.
10. "A FRIEND OF SOCHARA" for his generous contribution.
11. Mr. Aroon Raman for his contribution to Bhopal activities.
12. Ms. Hema Hattangady (Bangalore), for her great support towards Betul (Madhya Pradesh) Nutrition Project.
13. Jal Seva Charitable Foundation (JSCF) for their contribution towards the implementation of the project entitled "Every Child Counts: Safe Water and Safe Environment for Children".
14. Dr. Priyadarsh and his team of health workers for the implementation of COVID Project in North Eastern states.

Thanks to all SOCHARA Staff.

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AUDIT STATEMENTS

***SOCIETY FOR COMMUNITY
HEALTH AWARENESS,
RESEARCH AND ACTION***

***AUDITED STATEMENT OF ACCOUNTS
FOR THE PERIOD ENDING
31ST MARCH, 2022***

Audited by
RATNA RAVI KUMAR.B
Chartered Accountant,

No. 326, V Main, I Block, Koramangala, Bangalore – 560 034.

SOCIETY FOR COMMUNITY HEALTH AWARENESS, RESEARCH AND ACTION, BANGALORE
RECEIPTS AND PAYMENTS ACCOUNT FOR THE YEAR 01.04.2021 TO 31.03.2022

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CONSOLIDATED ACCOUNT

RECEIPTS	SCHE DULE	For the year ended 31/03/2022 (Rs.)	For the year ended 31/03/2021 (Rs.)	PAYMENTS	SCHE DULE	For the year ended 31/03/2022 (Rs.)	For the year ended 31/03/2021 (Rs.)
To Opening Balance: 01.04.2021				GENERAL EXPENSES			
Cash on Hand- Local	28	4,285.00	8,009.00	By General Expenses Local	1	761,914.70	1,175,355.95
Cash in Hand -Foreign	27	8,776.50	7,379.00	By General Expenses- Foreign	12	1,119,179.62	137,886.14
Cash at Bank - Local	32	3,262,135.18	81,318.91	By Expenses met through Endowment Interest	17	206,731.00	1,079,897.46
Cash at Bank - Foreign	31	2,382,131.27	1,150,059.42	By Expenses met through Dr. Salim Yusuf funds	14	10,000.00	1,111,731.82
Fixed Deposits - Corpus Fund (Local)	36	99,418.00	99,418.00	By Expenses met through Dr. Mathias Steiger funds	16	177,537.00	-
Fixed Deposit - Corpus Fund (Foreign)	35	353,534.00	353,534.00	Community Action and Policy Advocacy			
Fixed Deposits - Gratuity	35	990,167.50	998,167.50	By Community Health Initiatives (KZE-321-900-1627) Old Project			3,824,587.46
Fixed Deposits - Foreign General	35	507,406.00	-	By Community Health initiatives KZE-321-900-1819 (New Project)	19	4,911,497.32	1,106,617.00
Fixed Deposit - KZE Fund			400,000.00	By Community Health Learning Program (CHLP) Expenses - MISERIOR -321-900-1846	20	3,070,192.36	535,331.97
Fixed Deposit - (Friends of SOCHARA- Dr. Mathias Steiger fund)		807,707.00	-	By Begica Misereor Project - Procurement and distribution of Oxygen Concentrators and accessories - BG- 321-202104 0417	13	7,558,016.36	-
Fixed Deposits- Endowment	37	18,159,494.00	18,159,494.00	By Association for India Development - Boston	15	390,288.00	-
Fixed Deposit- AID Boston			100,000.00	By Expense incurred for Viva Salud	26	286,218.00	302,243.00
Interest From Bank				By HCL- Foundation Expenses - Water and Sanitation project -Bangalore Unit	2	8,666,615.00	8,777,663.00
Interest earned from Fixed Deposits (Foreign)	39	269,692.00	82,777.00	By HCL- Foundation Expenses - Water and Sanitation Project -Chennai Unit	3	2,011,665.00	1,671,990.00
Interest earned from Fixed Deposits (Local)	39	51,069.00	12,638.00	By Betal Project Expenses in MP	8	19,378.60	-
Interest earned from Fixed Deposit (Gratuity FD)	39	43,818.00	-	By Jai Seva Charitable Foundation Expenses	7	3,650,000.00	-
Interest earned from KZE FD	39	1,306.00	-	By Health for All Learning Centre Expenses (Local)	5	27,941.00	-
				By Aroon Raman Project Expense	4	489,955.00	-


President

for Society for Community Health
Awareness, Research and Action


Treasurer


Secretary



SOCIETY FOR COMMUNITY HEALTH AWARENESS, RESEARCH AND ACTION, BANGALORE

RECEIPTS AND PAYMENTS ACCOUNT FOR THE YEAR 01.04.2021 TO 31.03.2022

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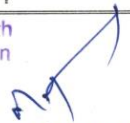
CONSOLIDATED ACCOUNT

RECEIPTS	SCHE DULE	For the year ended 31/03/2022 (Rs.)	For the year ended 31/03/2021 (Rs.)	PAYMENTS	SCHE DULE	For the year ended 31/03/2022 (Rs.)	For the year ended 31/03/2021 (Rs.)
Saving Bank Account (Foreign)	39	51,362.00	21,894.00	By Covid 19 Support Expenses (Local)			
Saving Bank Account (CH)	9	639.00	1,032.00	Humanist Centre for Medicine Project Expense	6	2,611,336.35	-
Saving Bank Account (BPL)	10	57.00	76.00	Azim Premji Philanthropic Initiatives Expenses	6	7,788,690.00	-
Saving Bank Account (Local)	1	41,307.00	13,263.00	Titan Sahodari Project Expenses	6	499,000.00	-
Interest earned from Endowment fund FD	17	857,602.00	1,084,921.00	Covid 19 Support Expenses (Foreign)			
				Association for India Development-D Central Chapter- Expenses	23	7,261.00	860,419.00
To Community Action and Policy Advocacy				Association for Indian Development - Houston Chapter			424,935.00
Grant received from KZE - 321-900-1627ZG	18	23,788.00	3,535,732.50	Association for Indian Development - US			1,045,463.00
Grant received from KZE-321-900-1819	19	3,873,162.50	1,721,000.00	MP - Covid Support Expenses			40,094.00
Grant received from Misereor for CHLP -321-900-1846	20	2,002,074.80	1,656,259.00	Hemalaksha Foundation			317,000.00
Grant from BEGECA Misereor Project No 321-900-1859 ZG	13	15,148,483.00	-	Covid 19 Support Expenses (Local)			
Grant from Viva Salud- Belgium	26	293,807.00	294,654.00	Contribution from Doctors Forum Expenses			698,728.64
Grant from Maharashtra Foundation	25	357,430.00	-	Contribution from MP Covid 19 Support			397,574.64
Grant from Sri Sathya Sai International Organization	24	1,549,438.00	-	Cambium Network Pvt Ltd - Expenses			300,000.00
Contribution received from Friends of SOCHARA - Switzerland (Dr. Mathias Stiger)	17	809,005.00	815,253.00	Azim Premji Philanthropic Initiatives			2,555,413.00
Grant from AID Boston		-	395,175.00	Jal Seva Charitable Foundation			250,000.00
Contribution to Solidarity Fund		-	83,270.00	Titan Company Pvt Ltd- Sahodari Project			393,150.00
Contribution Others SOCHARA	1	44,000.00	469,439.44	AID Covid Care through cloud funding Expenses	23	10,998.95	
Contribution from Ms. Hema Hattangandy	8	500,000.00	-	AID Covid Bangalore region Expenses	23	3,207,650.26	

for Society for Community Health Awareness, Research and Action


President


Treasurer


Secretary



SOCIETY FOR COMMUNITY HEALTH AWARENESS, RESEARCH AND ACTION, BANGALORE

RECEIPTS AND PAYMENTS ACCOUNT FOR THE YEAR 01.04.2021 TO 31.03.2022

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CONSOLIDATED ACCOUNT

RECEIPTS	SCHE DULE	For the year ended 31/03/2022 (Rs.)	For the year ended 31/03/2021 (Rs.)	PAYMENTS	SCHE DULE	For the year ended 31/03/2022 (Rs.)	For the year ended 31/03/2021 (Rs.)
Grant from HCL - Foundation	2	7,747,533.00	12,711,840.00	AID Covid Call Centre Expenses	23	1,237,925.00	
Contribution from Aroon Raman	4	150,000.00	387,250.00	AID Covid 1000 families Expenses	23	1,316,700.00	
Contribution from India's Collective Action		-	296,400.00	AID Covid Delhi Slum Expenses	23	636,756.00	
Contribution from Crowd Funding - Medical Assistance	1	191,672.77	-	Sri Sathya Sai International organizational Expenses	24	1,356,728.80	
Grant received from Jal Seva Charitable Foundation	7	3,650,000.00	-	Community Health Initiatives			
Contribution towards Covid 19 Support	1	201,000.00	17,000.00	CEU - Chennai Local Expenses	9	6,004.00	
Contribution from APPI for front Line Workers		-	304,000.00	Health for All Learning Centre HFALC (Sarathy Foundation)			1,260.00
Contribution towards Health for Learning Centre	5	11,100.00	-	Health for All Learning Centre HFALC (Local Contribution)			2,107.00
Grant from Azim Premji Philanthropic Initiatives	6	7,830,000.00	-	Support to MP CPHE Bhopal -AID Boston			161,849.00
Contribution from Humana Centre for Medicine	6	2,820,000.00	-	Support to MP CPHE Bhopal -Aroon Raman			30,000.00
Contribution from Sahay Initiative	1	25,001.00	-	Expense met towards Sahay Initiative			100,000.00
Contribution towards Covid 19 Support- Foreign				Fixed Assets purchased (Local)	1	10,250.00	60,550.00
Contribution from AID Chapter		-	867,680.00	Fixed Asset purchased (Foreign)	19	6,112.00	
Contribution from AID Houston		-	424,935.00	Advances paid (Local)	11	717,083.00	867,733.00
Contribution from AID US		-	1,149,030.00	Advances paid (Foreign)			378,547.00
Contribution towards MP Covid Support		-	251,000.00	Gratuity Paid			49,690.00
Contribution from Doctors Forum		-	805,008.00	Rental Deposit paid for Maya Bazar Office	41	20,000.00	

Sri
President

M. S. Srinivasan
Treasurer

A. S. Srinivasan
Secretary



SOCIETY FOR COMMUNITY HEALTH AWARENESS, RESEARCH AND ACTION, BANGALORE

RECEIPTS AND PAYMENTS ACCOUNT FOR THE YEAR 01.04.2021 TO 31.03.2022

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CONSOLIDATED ACCOUNT

RECEIPTS	SCHE DULE	For the year ended 31/03/2022 (Rs.)	For the year ended 31/03/2021 (Rs.)	By	PAYMENTS	SCHE DULE	For the year ended 31/03/2022 (Rs.)	For the year ended 31/03/2021 (Rs.)
					Fixed Deposits			
Interest on TDS Refund		-	5,770.00	"	Fixed Deposit - Foreign General	36	1,226,162.00	507,406.00
Miscellaneous Income		200.00	-	"	Fixed Deposit - Foreign General - MS	36	1,326,102.00	807,707.00
Program Advance recovered (Local)	11	578,083.00	378,941.00	"	Fixed Deposit - MIS- CHLP Project	36	2,000,000.00	
Program Advance recovered (Foreign)		-	887,547.00	"	Fixed Deposit - Corpus Fund - LC			99,418.00
				"	Fixed Deposits - Corpus Fund-FC	36	412,179.00	353,534.00
				"	Fixed Deposit - Gratuity Fund	36	1,018,086.50	990,167.50
				"	Fixed Deposit - BG- Covid Fund	36	5,000,000.00	
				"	Fixed Deposit-Endowment Fund	37	18,159,494.00	18,159,494.00
TOTAL		82,862,676.48	55,232,874.03		TOTAL		82,862,676.48	55,232,874.03

PLACE: BANGALORE

DATE : 07.09.2022

Srinivas
President

Manjunath
Treasurer

Atul
Secretary

**for Society for Community Health
Awareness, Research and Action**

Subject to my report of even date





sochara
building community health