

sochara
building community health

ANNUAL REPORT

2024 - 2025

"The fastest way to change society is to mobilize the women of the world"



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From the desk of President ...

Esteemed members of general body, executive committee,

Cordial greetings!

It is with a sense of pleasure and satisfaction that I am penning few words as note to annual report of SOCHARA 2024-25. The year has been with challenges and amidst this I am happy that our staff in Bangalore, Bhopal and Chennai locations have done dedicated work and service in its facets of WASH, combating malnutrition, school Health. Apart from inputs in community awareness, communitisation, CHLP (Diploma in public Health) and Year II MPH has strived to be landmark achievements. Association of SOCHARA with District Health Assembly initiative in Tamil Nadu is a big effort in Public Health Advocacy promising replication in many Districts in Tamil Nadu and other States in the Country. Efforts towards documentation through story telling and Anubhav initiative has been a novel initiative giving opportunity to leave a valuable legacy in the Country. Expansion of WASH to Vijayawada is a welcome activity.



The annual report is being presented based on specific objectives and gives opportunity for self-assessment. I am glad that a comprehensive financial audit involving external auditor has been undertaken by finance committee recently.

I take this opportunity to express our gratitude to all in SOCHARA – people, financial and moral supporters, collaborators of SOCHARA for helping us move forward successfully towards Golden Jubilee decade. Personally, I am grateful to Mr Gurumoorthy, past Secretary and current Secretary – Ms Prafulla, Members of Executive committee, appreciate all staff in Chennai, Bengaluru, Bhopal, Vijayawada and many virtual locations for the dedication, contribution towards activities of SOCHARA.

As I am stepping out as President of SOCHARA, after completing the two terms of three years each, I wish all the SOCHARA staff of all the units, the Executive Committee, the new members of the EC - who are going to get elected this AGBM.

A handwritten signature in blue ink, appearing to read 'S. Pruthvish', with a long horizontal stroke extending to the right.

Dr S Pruthvish
President, SOCHARA

From the desk of Secretary...

At the outset I thank SOCHARA family for welcoming me with open hands and helping me settle down soon. Thanks to Mr. Gurumoorthy Mathrubhootam, the predecessor who had set a high standard in stabilizing SOCHARA particularly during COVID times. So if not higher at least the incumbent secretary had to maintain the status co, which I feel I have done to the best of my ability.



Year 2024-25 has been a roller coaster journey with lot of ups and few downs. Year 2024-25 marked the initiation into Climate change and Women's health as additional spokes. SOCHARA engages as part of its community health approach- Hub, working on various determinants of health –Spoke. While the projects were short duration the transformation or impact was not a measurable aspect, but it definitely paved way for further engagement along the same themes and taking it to the next level in 25-26 and so 24-25 **became the year of Women's health** with two initiatives WOHLA (Women's health and livelihood alliance) and MSRHR (Menstrual, sexual, reproductive health and rights). The other motivation for initiating Climate change work, was it was natural for the EC to expect the incumbent to explore opportunities in the climate change spheres since the new secretary came in with an experience and knowledge in that area.

This year we also got few opportunities to present the SOCHARA work directly with partners; Know your partner, program from AID, meeting KZE- Misereor team at Aachen, Germany We transitioned from one more phase of our core work Community action for health and nutrition to another. We did see a setback in finances for not achieving the target of local and other contributions mandated by certain partners.

C-WASH also entered a new phase and also a new geography. SOPHEA is growing steadily and getting recognized as the to go practitioners' academic courses. But a five year vision document for the collaborations is still in limbo. SUDHA has been steady and has accomplished 60% of the target, but still a long way in term of larger vision/ impact, promotion and increasing foot fall- access.

Certain systems – (opening of specific accounts) were brought for smooth functioning of the admin and accounts for the advantage of the team members. Still a few to be addressed. I thank Team SOCHARA and stand in solidarity.



Prafulla.S

Secretary-Coordinator

Executive Summary — Annual Report April 2024 – March 2025

The year 2024–25 was one of strategic consolidation for SOCHARA: the organisation strengthened accredited learning pathways, expanded community-facing projects with measurable reach, deepened policy engagement, advanced digital knowledge systems and took concrete steps toward financial resilience.

Key achievements and examples

- **Growth in accredited learning (SOPHEA / CHLP / MPH-CH):** SOPHEA continued to run the hybrid 12-month Community Health Learning Programme (now a Postgraduate Diploma) and facilitated the 3rd MPH-CH batch; participants completed internships, exposure visits and a Community Health Change Makers Confluence (CHCC). These academic and experiential gains strengthened SOPHEA's role as a training hub for community health practitioners.
- **Large-scale community impact (WOHLA, WASH, school health):** The WOHLA initiative trained **83 healthcare champions**, reached **~240 communities**, conducted **292 sessions** and engaged **~7,500 women**, with early increases in SRH awareness and uptake (over 95% awareness of contraceptives reported). C-WASH and school health work upgraded toilets, hand-wash stations and RO systems across project sites in Bengaluru, Chennai and Vijayawada.
- **Nutrition & primary-health interventions (MP — Bhopal cluster):** The CPHE Bhopal, nutrition programmes operated across 36 Anganwadis in Betul, Vidisha and Bhopal (~2,294 registered children), delivering growth monitoring, '1000-days' counselling and a targeted community-based nutrition rehabilitation (CBNR) drive in Vidisha — with month wise data included in the report to track coverage and malnutrition trends.
- **Policy engagement & networks:** SOCHARA advanced people-centred health governance — supporting the Jan Swasthya Abhiyan national secretariat, promoting the Tamil Nadu "Health Assemblies" model (including orientation of ~1,500 health officials) and participating in national/state policy dialogues to place community demands on planners' agendas.
- **Knowledge systems, digitisation & innovation:** CLIC holdings and digitisation expanded substantially (library holdings **~17,047 books**; large-scale scanning and uploads to public archives). Technical upgrades included LMS migration, multilingual transcript workflows and a pilot community-health AI chatbot using retrieval-augmented generation — strengthening SOCHARA's capacity as a public learning resource.

Challenges and lessons learned

- Persistent barriers remain: multilingual needs and limited digital access in target communities, scheduling constraints for urban poor participants, and the necessity for longer program durations to secure sustained behaviour change. The report flags these operational constraints and proposes participatory, language-appropriate and livelihood-linked responses.

Forward priorities (short to medium term)

- Scale WOHLA to wider age groups and add livelihood linkages; consolidate SOPHEA with short regional courses and multilingual materials; sustain CLIC/SUDHA digitisation and knowledge tools; and continue policy campaigns (Right to Health, institutionalising Health Assemblies). These priorities aim to deepen impact.

Conclusion: 2024–25 was a year in which SOCHARA converted programmatic strengths into institutional momentum — expanding accredited training, documenting measurable field outcomes, investing in digital archives and education, while sustaining a clear emphasis on community voice and policy influence.

Abbreviations:

SOCHARA – Society for Community Health Awareness, Research and Action

SOPHEA – School of Public Health, Equity and Action

CHLP – Community Health Learning Programme

MPH-CH : Masters in Public Health – specialization in Community Health

WHOLA – Women’s Health and Livelihood Alliance (WOHLA) Project

CWASH – Community Water, Sanitation and Handwash

CLIC- Community Health Library and Information Centre

SUDHA- SOCHARA Unit of Digital Humanities and Archives

MSRHR- Menstrual, Sexual, Reproductive Health and Right

CEU – CHC Extension Unit

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

SOCHARA- CEU continued its contribution to “Health Assemblies” in Tamil Nadu which is an unique program in the country to hear people’s health need and demands. Since 2020, during the COVID-19 epidemic, the Tamil Nadu health system has initiated this assembly concept with the support of civil society organizations including SOCHARA- MNI. During these years assemblies have been conducted at different levels including Panchayat health assemblies. In this year the state working, has decided to conduct these assemblies from the ground at the Jan Arokyia Samithi institution level (In Tamil Makkal Nalavalvu Kulu), up to the state health assembly. SOCHARA as an official nodal NGO for this process continued its support at all three levels including assisting the state health authorities in designing the programme, hand holding the district and sub-district level health system authorities for better execution, and mobilizing civil society organizations to enhance peoples participation in the assemblies. Some of the major activities were:

- On 28-11-2024, at the Tamil Nadu state working committee meeting an taken an important decision was taken to see that future assemblies would be steered by the civil society in Tamil Nadu. SOCHARA as a state nodal NGO will mobilise the district level civil society organisations to support the assembly process.
- We have supported the Tamil Nadu Health Assemblies with two broad strategies. To support the health system and mobilise civil society and community to make the platform a people’s platform. We have mobilised civil society across the state, trained them to advocate the people’s health issues during their respective assemblies.
- We had multiple rounds of discussions with the Chennai Corporation health officials (including chief health officers) and negotiated to run health assemblies in all the 200 wards of the Chennai Corporation along with 15 zonal and 3 district level health assemblies. All these assemblies were held.
- We initiated the Right to Health campaign in Tamil Nadu to adopt a state specific health policy and to enact a Right to Health Act for Tamil Nadu. As part of that we prepared a detailed Health Manifesto for Tamil Nadu which was handed over to the official political parties and candidates for the Parliamentary election in Tamil Nadu during 2024. The manifesto was prepared through four level exercises: 1. Community meetings across the state to get first-hand information on people’s need; 2. District level civil society meetings, 3. State level meeting with multi-stake holders and resolutions of the recent health assemblies held in Tamil Nadu; these were compiled to prepare the final manifesto.

As part of the Right to Health campaign during the year 2023-24 we initiated a signature and postcard campaign at the Chennai International Book Fair on 1st January 2024 to adopt the Right to Health policy and enact a Right to Health Care Act in Tamil Nadu. In this year we have posted 3400 post cards addressed to Chief Minister of Tamil Nadu. 4000 signatures across 12 districts from the general public were collected and submitted to the Tamil Nadu Chief Minister’s special cell. This is an ongoing campaign which will continue next year.

- **5th Global Peoples Health Assembly** - From 7th April to 12th April 2024 SOCHARA took part in the 5th Global Peoples Health Assembly in Mar Del Plata, Argentina organised by

People's Health Movement. SOCHARA shared its views in various themes including globalisation and commercialisation of health care, impact of geo-political situation on health, strengthening primary health care etc.,

- On 26-04-2024, we conducted an orientation session on 'Right to Health' to staff of HPERC, Thirunelveli.
- On the 18th and 19th May 2024 we conducted a session on "Health and Hygiene, Mental Health and Emotions" for children at Block Library Centre, Thiruvannamiyur, Chennai.
- On the 27-06-2024, we organised a training session on Health and Wellness centres for more than 30 member organisations of Thozhi Federation. Training was focussed on importance of holistic wellbeing through centres.
- On 29-04-2024, we attended a meeting titled "Kathipoma" with Transgender at Spastic Society, Thiruvannamiyur, Chennai
- We attended and contributed to the Common Health Annual Meet (4th and 6th July 2024), held at Vishwa Yuvak Kendra, New Delhi. During the meet there was a review and strategic planning for the upcoming year of the network's activity.
- On 24-07-2024, we oriented the international community interested in the people's participation in health concepts. The orientation meeting was organised by the Asian Health Institute (AHI), Japan and Thailand National Commission for Health Office (NCHO) jointly. SOCHARA team shared the Tamil Nadu health assembly experience. Participants showed interest in further discussions and orientation sessions on the concept.
- On 25-09-2024, we organized online consultation with more than 30 participants on status of Tamil Nadu Chief Minister's health insurance scheme.
- On 16-10-2024, we had an online consultation with NCHO officials, Thailand, including Ms. Khanitta, on health assemblies.
- **Thailand National Health Assembly:** As part of the promotion of Health Assembly concepts in Tamil Nadu, to learn from international experience we have been invited by National Health Commission office of Thailand to take part in their 17th National Health Assembly which held from 26th to 29th November 2024 in Bangkok.
- On 24-11-2024, we hosted a session on the Right to Health with Dr. Abhay Shukla, well-known public health expert from SATHI, Pune. The session was for more than 10 key MNI activists to understand the struggle in Maharashtra for Health for All.
- On 03-12-2024, on behalf of SOCHARA – CEU, a speech was delivered in an international online webinar on Universal Health Coverage. It focussed on grassroots perspective on social participation in health governance, connecting local experiences in Tamil Nadu with global models like Thailand's National Health Assembly (NHA).
- On 10-01-2025, we conducted a training session on mental health and health movement for MSW students of St Joseph College of Dharmapuri.
- We attended a national dissemination meeting on Reproductive Health on 05-03-2025, organized by Common Health, at India International Centre, New Delhi. The meeting aimed at disseminating key work of the network with the focus on maternal health rights perspective.
- Tamil Nadu has 40 health unit districts and around 10000 sub-centres. During the 2025-26 period, health assemblies will be conducted at all the sub-centre levels viz., each of the 10000 Makkal Nalavalvu Kulu (MNK) i.e. Jan Arogya Samithi (JAS). In order to make these assemblies effective, the health department organised an online orientation program for officers of each of these 40 health unit districts. A training team from the department together with SOCHARA – CEU team members oriented all the health officials across Tamil Nadu

from 18th to 24th March 2025. Together we have oriented around 1500 health officials across the state on the health assembly and MNK.

- On 24-03-2025, we organised a state level orientation meeting for civil society organisations in Tamil Nadu to prepare for conducting health assemblies for the year 2025-26.

SOCHARA, supported by several partners worked on Rural and Urban settings with special focus on Hygiene. During the year under C-WASH project SOCHARA team worked with urban and rural communities at Karnataka (BBMP, Bengaluru Urban and Hassan), Tamil Nadu (Chennai) and Andhra Pradesh (Vijayawada).

- Maya Bazar is a poor urban locality situated near Neelasandra in Bangalore, having 600 + households with a dense population of around 3500 individuals residing in 6 acres of land. People have been residing there for more than 100 years and are predominantly from the Hindu (Tamil and Kannada speaking) and Christian communities. Most people work as painters, in small businesses, as home makers and others.
- Anandapuram is a poor urban locality situated near to K.R.Market in Bangalore, having 750 households with a dense population of around 4500. The individuals in the community are predominantly Hindu, Muslim and Christian. Most of the individuals are having small businesses, or are housewives, home makers, sanitation workers, and others.
- Pillaganhalli is a poor urban locality near Bannerghatta road having more than 4000 households. In the year 2024-25, supported by a funding partner, we extended our intervention to this area. This focusses on strengthening local government system and community through a networking approach.
- We are working with 25 schools in BBMP and Bangalore Urban working area.
- The sanitation problems in poor urban localities include open defecation, severe garbage disposal challenges, small roads with unplanned drainage systems and poor personal hygiene practices.
- There are 150+ slum divisions within the Chennai Municipal Corporation including greater Chennai, with 29% of the city's total population being slum dwellers (2011 census). This works out to more than 1.08 million (ranks 2 in India).
- In fact, most of the slums and schools in the city of Chennai in general do not have proper sanitation facilities (potable water supply, sanitation and waste disposal / management system). Environmental conditions in slums are usually unsafe, they pose serious threats to the health and well-being of slum dwellers in general and pregnant women, lactating mothers and children in particular.
- We also have plans to continue our work with 10 schools and 5 Police Clubs in Chennai.

From the financial year 2024-25 onwards SOCHARA started interventions at Vijayawada in Andhra Pradesh, working with 10 schools and 1 community.

- The proposed project aligns with SOCHARA's approach of working towards integrated, sustainable development with poor urban populations, through a focus on WASH, community health and health promotion with community engagement. Partnership with local bodies and other NGOs who are already working in the area, regular work reviews and feedback will help ensure progress.

Awareness programme for the community, frontline health workers, school teachers and sanitation workers on WASH Modules (Volunteers).

- We conducted **116 awareness** programmes covering **3538** beneficiaries on topics like hand wash, health & hygiene, vector borne disease, postal department awareness, Nirbhaya one

stop sakhi centre awareness, Police department awareness on legal rights, waste segregation and menstrual hygiene.

- We have conducted **38 Awareness** programmes in Chennai schools and Police clubs covering **2404** beneficiaries, on various topics like oral hygiene, personal hygiene, waste segregation, clean environment, HMP & scrub typhus, dengue, vector borne diseases and hand wash.
- 65 awareness sessions in class rooms in 10 Vijayawada schools covering topics like **hand wash hygiene, oral hygiene, safe drinking water, water borne diseases, vector borne diseases, menstrual hygiene management, toilet etiquette and good habits**. 7 volunteer engagements namely **sanitation feast, cleanliness drive, safe drinking water, no plastic (2 programmes), and menstrual hygiene management (2 programmes) covering 7 schools were done**.
- We have developed **2 sets of IEC** materials focused on dental hygiene and nutrition health. These have been printed for distribution in schools and communities of Bengaluru.
- We have created **3 sets of IEC** materials and 15 modules in Chennai on HMPV, scrub typhus, dengue, diarrhea, WASH, MHHM (2), personal hygiene, oral hygiene, body hygiene, hand hygiene, waste segregation, waste management, WASH management during disasters, vector borne diseases, clean environment.
- **Seven (7) hygiene modules** were developed in Telugu, and flip-charts on hand wash hygiene, safe drinking water, toilet etiquette and need of toilet, waste handling, vector borne diseases / water borne diseases, menstrual hygiene management, and oral & dental health in Vijayawada were prepared.
- **Ten (10) wall** writing in schools and community covering **74** beneficiaries in Bengaluru.
- **Ten (10) wall** writings at 6 different locations including Government higher secondary schools and Police Clubs in Chennai.
- Wall writings of **13 boards**, covering **1072 square feet** with thematic diagrams on **hand wash steps, saving water, menstrual hygiene management, keeping premises clean, toilet etiquette, and good habits** were prepared at **3 schools in Vijayawada**.
- We have conducted **30 street plays** covering **429** beneficiaries on topics like POCSO Act, waste segregation, kitchen garden, health & hygiene, vector borne diseases in Bengaluru.
- **Seventy four (74) awareness** programmes in schools and anganwadi covering **3040** beneficiaries on various topics like kitchen garden, Walkathon on waste segregation, menstrual hygiene and hand wash.
- **Sixty five (65) awareness sessions on C-WASH modules, and 7 volunteer activities across 10 schools in Vijayawada were conducted**.

Rural sanitation programme

- SOCHARA team created awareness on solid and liquid waste management in rural communities from Hassan and Bengaluru urban zilla panchayat. Three awareness programmes were conducted covering toilet etiquette and inline waste water systems.

Capacity building and exposure visit (SOCHARA team – HCL F partners meet)

- We have attended **5 Exposure visits** with HCL-F Partners - CUPA, NIMHANS (on mental health), Solidarity Foundation, PFC Delhi and TSSF.
- Conducted awareness programme on toilet usage and maintenance, WASH modules with SDMC members and Child Cabinet children at 10 schools.

- **Six (6) awareness programmes** on toilet usage and maintenance, WASH modules with SDMC members and Child Cabinet children covering **205 beneficiaries in Bengaluru**.
- We have conducted **12 O&M plan** sessions including menstrual hygiene management and toilet etiquette, covering **201** beneficiaries in Chennai.
- We have conducted **9 sessions** for students on operation and maintenance of school WASH infrastructure across 9 schools covering **250** students in Vijayawada.
- On 07-04-2024, we also released Urban Health Manifesto 2024 at TNSF office, Gopalapuram, Chennai.
- Meeting with South Chennai volunteer on follow-up of Manifesto on 4th and 6th May 2024

Menstrual Sexual Reproductive Health for Informal Workers

Informal workers, especially migrants and beedi workers, were the worst impacted by the lockdown and COVID-19 crisis, pushing many families, especially women, into unemployment and extreme poverty. This has led to women having to deprioritize their Menstrual, Sexual, Reproductive Health and Right (MSRHR) needs due to the overwhelming focus on survival and immediate economic challenges. But MSRHR remains one of the key concerns among the marginalized women¹, especially the informal workers we engage with, due to the lack of access to good products, inadequate water and sanitation facilities in their workplace and households. The COVID-19 pandemic not only brought the existing issues to light but also exacerbated concerns related to MSRHR of women migrants and informal workers. While COVID-19 exposed our health system's existing weaknesses, effects on MSRHR were often indirect and under-recognized, some of the major challenges being: Inability to purchase basic needs like sanitary pads and contraceptives due to lack of income. Women inevitably use menstrual products for prolonged durations or turn to unsafe alternatives like cloth and rags. Early, complicated pregnancies resulting from child marriage due to school drop-offs Mothers and new-borns experiencing significant complications without medical support Higher rate of maternal and infant mortality due to lack of medical facilities and care. Unintended pregnancies due to increased gender-based violence, lack of access to contraceptives and abortion services

Objectives

The project aims to provide comprehensive menstrual-sexual-reproductive health care for 500 informal workers in Bengaluru and Davangere, Karnataka through:

- Access to free sustainable products, awareness, fighting myths and taboos,
- Access to medical care, support in treatment and surgeries
- Contraception, family planning, condom usage, STD/STI prevention, understanding consent
- Pregnancy to postnatal care, hospital assistance, access to entitlements Community based Nutrition Programme

Progress

1. Recorded their case stories of women and their experience at local government hospitals and healthcare centers for pre and postnatal services - cash bribes for free services,

2. Conducted door to door surveys with women in Bangalore on their menstrual, sexual, reproductive health and access to services
3. Meeting with Asha workers, to strengthen relationship with Anganwadi workers and ensure that women get health services.
4. Meeting with doctors, maternity dept staff and ASHA workers to discuss maternal and new born care, current challenges at government hospitals and PHCs, needs analysis for community members
5. Procurement of eco-friendly microfibre cloth pads that can be reused up to 4 years, to prevent infections from using poor quality pads with insufficient changes
6. Awareness workshops, pad distributions and demonstrations in Bangalore and Davangere.

Nutrition Work Madhya Pradesh

The Madhya Pradesh community-based nutrition program operates in Bhopal, Vidisha, and Betul districts.

The following regular interventions are a part of the programme:

- Health education at the family level.
- Meetings with mothers.
- Support to the VHND.
- Growth monitoring of under-5 children.
- Capacity building of community level workers.

Key highlights from April 2024 to March 2025:

- Intensive child development and growth monitoring was conducted at the anganwadi centre and in the community.
- Regular health education is provided at individual, family and group levels within the community. Some of the topics covered were breast feeding, weaning, common illnesses of children, growth monitoring and hazards of packaged (junk) foods.
- Community-based nutrition rehabilitation (CBNR) using locally available foods was started in Vidisha this year, where special attention is being given to children born with low birth weight.
- Apart from weight for age (underweight), other nutritional parameters such as wasting and stunting were measured in children in Vidisha district.
- The '1000 Days' programme, implemented with ASHA and anganwadi workers, focussed on important aspects such as antenatal care, exclusive breastfeeding, timely introduction of complementary foods, and maintaining these practices. The use of commercial weaning foods was strongly discouraged.
- A special focus is on the timely introduction of complementary foods for children over 6 months old. The nutrition workers regularly monitor this process.
- During the mothers' meeting, recipes were demonstrated using locally available nutritious food items and distributed to all children, especially malnourished children. These demonstrations were done with community participation.

- As cases of pneumonia, fevers, and diarrhea in children increased, health educational material was prepared on these diseases, and there was regular communication with individuals and the community.
- Visits to the nutritional rehabilitation centres (NRC) were made to interact with staff and review children referred there from the community.
- Training and capacity building of our field workers is done regularly. An effort was made to improve documentation.
- Short video clips showing community engagement were prepared for AID -India. Training was provided to our field staff to prepare case studies.
- Meetings and interaction with senior officials of the ICDS programme were made and our work was presented to them. We also requested their advice and suggestions on new field areas to be taken up by us.

Table1: District wise Nutritional Status Report of Children (Apr 2024 – Mar 2025)

S. No.	District	Month	Registered children	Weighed children	Normal weight children	MAM children	SAM children	Total malnourished children	% Malnourished children
1	Betul	Apr-24	1027	948	824	105	19	124	13.1
2		Mar-25	955	927	795	110	22	132	14.2
3	Bhopal	Apr-24	157	152	123	24	5	29	19.1
4		Mar-25	146	142	107	28	7	35	24.6
5	Vidisha	Apr-24	1231	1084	937	126	21	147	13.6
6		Mar-25	1193	1045	895	118	32	150	14.3

Overall, though there has not been very much progress in reducing childhood malnutrition in our field areas, the interaction with the community and the ICDS officials has increased significantly during the year under review.

2. School Health programme:

The main activities of the school health programme were:

- Visits to schools and coaching centres to organise and conduct health related activities with the children.
- Engagement with teachers to understand teaching processes.
- Meetings with library in-charges to assess library facilities, improving the reading habit in children.
- Health education of school children on health, hygiene, nutrition, sanitation and environment. An IVR based health education system was also established.
- Engagement of community and observation of Teacher's Day and Republic Day was done to promote civic values, citizenship and social awareness.

These and other related activities were also done in co-operation with like-minded organisations in our field areas, such as Muskaan, We Care and the Savitribai Phule Coaching Centre.

3. Environmental Health:

The environment-related activities during the year were community-based initiatives, awareness

creation, collaborations and campaigns.

Some of the activities were:

- Green initiatives including seed collection and seed ball campaigns, and awareness on importance of trees and green cover.
- Water and lake conservation in the major lakes of Bhopal, with the help of an eco-activist. The problems of lack of signage, solid waste and sewage pollution and encroachment were highlighted. The use of eco-friendly materials for idols for immersion was also promoted.
- Preparation for heatstroke during summer, including health education, and distribution of advisories.
- Other aspects covered include reduced use of plastics, zero-waste living, reducing carbon footprints, sustainable practices.
- Bhopal gas tragedy 40th anniversary observation – rallies, exhibitions, street plays and film screenings were organised.
- A talk by an expert on climate change was organised, with a discussion on related subjects like carbon credits.
- Consciousness of nature and preparation of a concept note on the integration of nature-based learning in schools was also done.



Mothers' meeting



Demonstrating complementary feeding



Weighing process



Vaccination



Home Visit



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

Campaign on Right to Health in Tamil Nadu:

Tamil Nadu is steadily progressing in its health care indicators compared to other states in India. However, the state is reluctant to enact the Right to Health Care Act to make health care a fundamental right for its citizens. The state, with the help of experts and civil society movements such as MNI, as drafted its own health policy. The policy is robust and demands health care as a right. The government is yet to publish and adopt it. During the year 2023-24 SOCHARA, CEU and MNI initiated a few important activities to make the people of Tamil Nadu aware of the Act. A few important activities are given below.

- The campaign on Right to Health was initiated in the month of December 2023 followed by training and orientation on the same topic for the leading activists of MNI. The training was conducted during the month of February 2024. This was followed by a wider signature and post card campaign in Tamil Nadu.
- **Post card Campaign** – To express people's demand in a democratic way the movement-initiated post card campaign with the above said two demands. From across the state between January and July 2024 more than **5000 post cards** sent to Tamil Nadu chief minister's special cell.

Signature campaign – Following the postcard campaign, a signature campaign was initiated with the same set of demands. In the reporting period we have collected more than **30,000 signatures** from various groups of people across the state. These signatures were sent by the district MNI members to the Tamil Nadu chief minister's special cell.

On 20th June 2024 we have oriented development activists and general public on the Right to Health signature campaign in Sir P.T Thiyagarajar Arangam and related issues in Tamil Nadu.

Block level meetings

Under the CWASH programme, Regular block level meetings / training with service providers (officials, elected representatives, local leaders and other stakeholders) are conducted in Bengaluru, Chennai and Vijayawada. Block level meetings are the meetings that give space for both the community members and government officials along with the NGOs working in the locality to come together to discuss and initiate solutions for the community. These meetings are crucial for bridging the gap between the communities and Government.

- We have conducted **11 block level meetings** in 3 communities covering **162 beneficiaries in Bengaluru**.
- We have conducted **28 stakeholders' meetings** with local NGOs / CBOs / Government institutions and community, covering **36 beneficiaries in Chennai**.
- **16 community meetings**, 1 block level meeting were conducted covering **491 community members in Vijayawada**.

Community Meetings

- **124 community meetings** covering **1246 beneficiaries** were conducted on various topics like health issues and waste segregation, in Bengaluru.

Supporting Community Volunteers (capacity building, training, monitoring and empowering volunteers to take forward for sustainability)

- **82 volunteer meetings** for **volunteers** to train and empower them to take forward for sustainability in Bengaluru.
- **4 volunteers** from slum linked with the Police Club were supported in Chennai.
- **2 community volunteers** (female) appointed and working for the community in Vijayawada.

To develop infrastructure

Infrastructure development at community and schools (building toilet, RO plant (O&M) setting up hand washing facilities, water storage, renovating toilet at community and schools) - Bengaluru

- Infrastructure development at **6 schools and 2 anganwadis** with hand wash and toilet facilities covering **528 beneficiaries in Bengaluru**.
- Infrastructure in 3 schools and 2 Police Clubs were developed including **5 urinals, 2 toilets, 2 hand wash stations (each in different locations) - in schools; 2 urinals, 4 toilets, 2 hand wash stations (each in different locations) - in Police Clubs, covering 967 beneficiaries in Chennai**.
- **2 hand wash station** repairs done; **5 RO units repair** work done, **child-friendly toilets- 2** at MPP school done; toilet block (**3 toilets for general category, 1 for differently abled persons, 1 dry room**) for Intermediate students at ZP Boys High School premises done in Vijayawada.

Women's Health and Livelihood Alliance (WOHLA) Project

- WOHLA is a multi-stakeholder initiative supported by DXC Technology, this initiative is implemented in collaboration with Samhita's Collective Good Foundation (Samhita-CGF), with active field implementation by the Society for Community Health Awareness, Research and Action (SOCHARA).
- The initiative focuses on addressing the needs of women from underserved communities in Bengaluru, Karnataka.
- The project integrates sexual and reproductive health (SRH) services, the project places women at the center of the intervention, leveraging community-based strategies to promote long-term health, economic resilience and livelihood support.
- The project aims to build a society where young women from marginalized communities have equitable access to healthcare, information, and economic opportunities.

Objectives

- Increase access to comprehensive SRH information, counseling, products, and services.
- Understand gender equity and myths associated with SRH.
- Reach out to 7500 participants through 75 women.
- Generate sustainable livelihood opportunities by training women entrepreneurs and integrating health with income-generating models.
- Enhance financial and digital literacy among women to improve their autonomy and decision-making capacity.

Activities

- Networking and collaborating with organizations working in urban poor localities in Bengaluru.
- Identifying the WOHLA Champions - 83.
- Organizing Training of Trainers (TOT) sessions in collaboration with NGOs.
- Developing IEC Materials to promote awareness and behavior change.
- Assessing KAP on Women's Sexual and Reproductive Health through baseline and end line survey forms.





Outcome

- Total number of WOHLA Healthcare Champions trained: 83.
- Total number of communities/areas reached in and around Bengaluru: 240.
- Total number of sessions conducted for participants: 292.
- Number of TOTs conducted for community-based organizations: 7 TOTs.
- Total number of women participated in the training: 7500.

Impact

- First-ever training on Sexual and Reproductive Health (SRH).
- Over 95% of the participants had heard about contraceptives.
- Participants started using of SARC & LARC.
- Many participants understood the link between menstrual hygiene and infections.
- Exposure to proper nutrition and its benefits, especially during menstruation.

Reflections

- Active engagement of women during the sessions on SRH/FP and Livelihood.
- WOHLA Champions played a key role in enhancing community trust.
- The session on Financial Literacy led to public opinion on the need of savings.
- The age limit was questioned by the participants.
- Women were urged to educate men on SRH/FP and Gender Equity.



Challenges

- Addressing the work schedules of domestic workers in urban poor slums.
- Finding suitable locations for training sessions.
- Restricting the age group to 19-29 years due to concerns about pre-adolescence and menopause issues.
- Creating a conducive atmosphere for training sessions.
- Facilitating sessions on contraceptives directly due to the lack of smart mobile phones among participants.
- Customizing sessions into one of the various Indian languages spoken in the urban poor communities.



Future Directions

- Expand program engagement to include women in the 12–50 years age group.
- Develop strategies to involve men and family members in gender-equitable health practices.
- Define project duration to be minimum 18 months.

- Use methodologies like co-creating posters, pamphlets, focus group discussions, street plays, and audio visuals in simpler language.
- Converge with government schemes and services for scalability and sustainability.
- Include financial and digital literacy and Entrepreneurship development programs (EDP) training.
- Design feedback mechanisms considering the illiteracy of participants.
- Strengthen livelihood component by offering vocational training, mentorship, and market linkage support for women entrepreneurs.
- As mentioned above most of the participants are illiterate, the design of feedback mechanism should factor this audio recording their feedback.

Conclusion

- While WOHLA demonstrated a powerful model for empowering women through integrated interventions that combine health, knowledge, and economic agency, it should adopt participatory approach, rooted in community leadership to sustain the efforts.
- Moving forward, the emphasis on scalability, inclusion, and institutional linkages will be key to replicating and expanding WOHLA's impact across other regions.
- WOHLA should close the loop by creating the entrepreneurship link women s health such as women's nutrition products, sustainable menstrual products, services chaos, etc.. as part of their digital and financial literacy.

Climate Change

Participatory mapping and design of behaviour change communication tools and initiating youth club for climate action

SOCHARA with the support from Restless development initiated a youth action club, to seed the idea of Climate change, its impact among youth and lead them to action.

Youth action is important because young people can be a positive force for development, and their participation can lead to social change: Youth can also shape the future by being a key stakeholder in achieving the SDGs and a sustainable future. They can be change agents, innovators, and leaders in community development.

The major focus of the project was participatory mapping and building behavior change collaterals which would encourage the youth to take action towards mitigation and adaptation for climate change induced water and health issues.

SOCHARA was able to implement some of the community health action tools in this project. SOCHARA is planning to continue working in the area based on the inputs from this project.

Anjanapura

Location: South Bengaluru

Anjanapura has a population of around 30,000 with a mix of all religions but predominantly Muslim community and migrants. Avalahally is served from different water sources in some parts tube well and in some other parts Kaveri water supply. The elite in the area have their individual RO systems at home while the poorer localities are served by community RO. Few, in particular migrant daily wage workers depend on Kaveri water for drinking and tube for other domestic purposes. Anjanapura lake sits right next door, but the water is not potable. While Pisciculture is carried out on contract, recently there have been losses due to death of fish owing to contamination.

While everyone is impacted by climate change, these urban poor communities can resonate with it indirectly only as water scarcity or supply problems. The initial conversations were all around seeking more water and refusing to engage in any other conversations. Few others would share and support. Through these initial visits the team collected the information and water supply and planned further meetings.

Preparatory work and Rapport building

As a starting point, SOCHARA explored entry points and possible collaborations. SOCHARA used the space and team of Vismaya Kalike, an after school study centre which works for the under privileged children. Further liaison with T Muniswamappa Trust and Makkala Jagruti, to understand the community and engage with the youth. Together with the collaborating partners SOCHARA took an exploratory tour to understand the fabric and geography of the community.

Participatory Tools

To initiate this few visits and basic demography information collection was carried to engage and invite the community for the mapping activity.



Participatory mapping helped the community Map the five assets; Natural, Physical/ Institutional, Financial, Social and Human.

This activity helped build rapport with the community and to certain extent ownership which ensured consistent participation.

The map was ground truth by **transect walks and household visits** with the support from students, few community volunteers and leaders. They went around the area and observed all the aspects / details of the community; roads and streets. the houses kutchha/ pukka houses, water taps, Are water storage facility, grocery shops, schools, anganwadis, hospitals, religious/ places of worship electricity poles, eateries, plants and trees, government department, PHC, etc,



Focus group discussions were conducted with women to collect further data and qualitative information, about the community, the social fabric, the consumption pattern, their practices, livelihoods, earnings, etc.



Some of the specific topics discussed in the focus group discussion was their understanding of climate change and health vis a vis epidemics and land use change, the impacts of inconsistent availability of resources and services on provisioning for the family, health, livelihood and education. The FGDs also engaged in the role of wetlands in the area. The ownership and maintenance. Their stake and responsibility in getting their community better their lives.



FGDs with youth focussed on their understanding of Climate change and why it is important, how they can engage to mitigate and adapt. **The Why** tool was administered.

The historical time line was administered to impress upon the change in climate and weather patterns resulting in change in cropping pattern and consumption pattern.

Sessions on Climate change, health and water

In contexts where clarity and insights are sought, it is believed that certain individuals or groups may gain from the processes of learning and engagement. The exchange of ideas, thorough discussion, and critical analysis play a significant role in deepening one's grasp of a subject. This is especially true when dealing with intricate matters where initial perceptions might be incomplete or misleading.



Understanding a situation or subject often involves not only grasping the core concepts but also recognizing the nuances and implications. The process may reveal new dimensions of the issue, allowing for a more comprehensive and nuanced perspective. Hence, the significance of continued learning and adaptation cannot be overstated, as it aids in the development of a more informed and insightful approach.

Through a small action of depriving them from water for some time, the concept of taking control of the situation, problem solving and arriving at alternate solutions was introduced. Then an exercise to identify low hanging fruits; the actions that they can take at their level with all the limitations. The youth were taken through a few sessions on the impact of collective voices and action. How to approach a particular department, what the public services they should be aware of. Youth were encouraged to present their opinion and thoughts.



A video about the environment, which covered various aspects of climate change and the causes behind it; pollution, increasing global temperatures and melting glaciers in different regions, like the Himalayas, loss of biodiversity, land use change etc, was played followed by a discussion session. After the video, students were asked to participate in a quiz, where they were asked to name the continents and the islands that are submerging due to rising sea levels, list of animals that are extinct, new emerging diseases, etc.

Engaging a creative communication team to build BCC collaterals.

Social innovation studio was engaged to develop BCC tools around the nexus of climate change, health and water. The team had few field immersions to understand the community. They conducted workshops and activities to further the understanding of the linkages between water health and climate change and what it means for this particular community.

They administered few surveys to internalise the concept of water scarcity leading to closing the loop for livelihood, loss of productivity, drudgery/ disadvantage for women. The participants

were divided into groups and asked to discuss, write points or draw maps on the chart sheets. The youth were deeply engaged in this workshop and provided insights into the collateral.

Development of Collaterals

The field immersion, workshops and few exercises with the youth provided a lot of insights into the design of collaterals, the medium to be used. With few discussions and iterations, it was decided that the collateral should impart knowledge, engage the youth in such a way that it leads to action. Hence a mix of videos showcasing how collective voice can bring positive change, few satire posters as to what is desired and what is in actual and digital journals with which the youth can engage on a daily basis and take action.

The questionnaire sought information about the daily activities and routines of community members, asking questions like, "How was your day?" "What time does your day start and end?" and "What do you do?" This questionnaire was distributed to the members, and everyone began to write about their routines. Later the team presented information on climate and environmental change through a video, in Kannada, Likewise water, how drinking water is filtered, and what problems children might face due to climate and environmental changes.



Collateral roll out and pilot testing

Around 30 participants attended, The program was divided into three parts: videos on climate change and water issues, a digital book, and forms that the youth were required to fill out when engaging with the community or conducting a survey. The collaterals included details about the water crisis and climate change, along with illustrations showing the direct and indirect impacts on health,

A digital book and forms that the youth were required to fill out while interacting with the community were provided to them, and they were sent into the community with clear information. While writing, some individuals shared information about the food they consume daily and the beverages they have for breakfast, helping us understand their levels of consumption.



Some images were shown and asked about possibilities for change, several members observed all the images and suggested changes in the image that provided food information. The youth had gained a considerable amount of knowledge, and the youth felt they could take action to better the community's wellbeing. Access to smart phones was a huge barrier for a lot of youths, hence wider dissemination was not possible.

Post the roll out the communication agency also carried out an impact study after rolling out the collaterals.

Youth club action

Water conservation a theme Rally by school children

Encouraged and inspired by the participatory mapping and climate change sessions, the local private school organised a children's rally advocating conservation of water, rain water harvesting and safe handling of water.



The Caravan program was organized to understand how well the youth connected with the collaterals and disseminate this information to the larger community.

At these centers, the involvement of children was very evident, as they showed great enthusiasm and asked many questions.

Plogging As part of youth action lab plogging (picking up litter while jogging) around the pond was organised and more than 40 youths participated to clear the area around Anjanapura/Avalahalli lake. The purpose and the larger goal of such actions were discussed. Subsequently, the youths picked up and collected all the small and large plastic wastes around

the lake. All types of plastic items such as plastic water bottles, caps, nursery plant bags, gutkha covers, chocolate wrappers, biscuit packets, etc. were picked up and more than ten garbage bags were filled with waste. Few youth took it to the next level of creating short reels to feed to social media.



Photography as a next step of engaging with climate action post the digital journal

The event garnered only few participants for the lack of access to smart phones, but was successful in engaging most of the youth from Yuva café. Since one of the advocacy sessions was around plastics as one of the attributes to climate change and polluter of wetlands etc. few youth connected with that thought and captured some of black spots around their residences and school. The youth were asked to explain their photographs, followed by discussion around them.

*Now, what can we do about it ?
 *Actually, the major reason for the rise in waste production is that we don't segregate, it due to which it doesn't get recycled & remains as a waste only

* we are taking waste segregation very casually and willingly or unwillingly

BLUE BIN
 *paper
 *plastic
 *metal
 or any other waste which can get recycled go.

GREEN BIN
 *All the kitchen waste such as vegetables, fruits or their peels, leaves, flowers, rotten fruits
 *basically, everything that gets decomposed by itself will go.

(see left photo)
 *people had thrown the waste in the road. It causes bad smell for which many diseases causing harm to the people, because of rain the waste which had thrown on the road it blocked half of the road.

*we end up mixing them together.

[we have a high landfills in Bangalore]




*This garbage is polluting the soil of beside sites, At the beside of that garbage, they growth trees and crops, which may get polluted, make the crops diseased.

& the garbage start smelling, that can make humans & animals diseased with several types of fevers, flow and viruses.

*In this picture they have thrown the garbage besides the Edges of forest, by that the animals can eat plastic & die.
 *And get infected & get infection.
 *because of so mach garbage, the mosquito are also increasing.




Gallery



Rally organised on Earth Day



Engaging with the community along with Social Innovation Studio



Yuva cafe, Anjanapura: Suma- SOCHARA field coordinator with Sahajan- Project lead, Yuva cafe Anjanapura taking session on Climate Change

Sarvatrika Arogya Andolana Karnataka (SAAK)

Executive Summary

During July 2024–March 2025, SAAK led grassroots actions across Karnataka to improve healthcare infrastructure, promote rights-based policies, educate stakeholders, and mobilize communities.

Key achievements include enagaging with Primary Health Centres (PHC), fellowships and Capacity building workshops

Mission and Scope

SAAK is committed to universal health rights and access for all Karnataka residents, building partnerships with government, civil society, and grassroots organizations. The movement proudly advances the Right to Health, equitable insurance coverage, and improvement in health service delivery at the ground level.



- Around 150–200 villagers accessed Kotegal PHC daily; guidance for chronic patients was commended.
- Nurses and ASHA workers actively participated in patient education on health rights.



13 November Belgaum workshop



26 October- Bangalore Workshop

Advocacy Community Mobilization

Weekly meetings of groups such as Janapara Samstha focused on right to health. Health teams of youth formed in five colleges and several schools, amplifying awareness on the Right to Health Act. Over 10 Sri Shakti Sangha groups received formal education on public health.

- ☹ ASHA/Anganwadi workers disseminated key health information.
- ☹ Patients' feedback facilitated positive changes in staff attitude and hospital hygiene, especially in Nayanahalli PHC

Advocacy with Legislators

SAAK held workshops and strategic meetings with MLAs, ministers, and officials during sessions in Belgaum, Bangalore, and elsewhere:





Fellowships- Fellows have been consistently engaging

- With the issue of the right to health through regular meetings and visits to primary health centers.
- Continuous monitoring has brought positive changes in cleanliness, staff behavior, and awareness among the public, supported by ASHA and Anganwadi workers.
- Around 8–10 Sri Shakti Sanghas have been educated on the Right to Health Act, while the Universal Health Movement – Karnataka is helping set up youth health teams in colleges and schools to spread awareness on free medicines, BPL card access, and the need for respectful hospital services.
- Capacity building workshops were conducted for NGOs in certain districts.
- Recorded case stories.
- Encouraged serious patients to seek health care at public health systems.

Workshops on Health Budget

Several workshops were held for trainers and community organizations, educating them about government budget allocations and how to advocate for improved resource distribution and accountability in the public health system.

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

SOCHARA along with George Institute of Health, Delhi has started an initiative (PATANG) of carryout research and documenting rich history of Community participation in health initiatives in Tamil Nadu. In a long term we are aiming to produce some modules on CAH specific to Tamil Nadu. PATANG - Promoting community Action for health – a co-produced, Technology-enabled platform to Achieve National Goals operates on 5 states with core hypothesis: By understanding the contexts, mechanisms, costs, and outcomes (Cn-M-Cs-O) of Community Action for Health (CAH) initiatives in India, a learning platform may be co-produced, improving knowledge, methods, and relationships across lay (NGO), state and community actors. This initiative is part of 5 states of India.

As part of this initiative during the reporting period we had created,

- We developed a protocol paper on CAH,
- We developed various documents including protocol, ethical guidelines, identifying secondary literature etc.,
- We attended national workshop held on 17th and 18th October 2024, Goa.
- We have mapped all the research activities SOCHARA- CEU engaged in the past two decade.

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

SOCHARA continued its support to many civil society organisations, institutions, individuals to make them critical force in securing people's health rights. These measures include supporting them in the state campaign on the right to health, encouraging them to involve in local actions, facilitating their commitment by increasing their capacity in health sector in order to improve health situation of the locality and the nation. Few important events are listed here.,

- We took part in Community Health Change Makers Confluence at Bangalore organised by SOCHARA.
- We supported a study on Nutritional status of children in pockets of Kodaikanal, done by MNI partner organisation HPERC. We have conducted training to the field team on this topic on 26th and 27th April 2024 and continued support till completing the study.
- We have contributed on the concept of Ethics and Professionalism Curriculum for frontline workers through meeting held on 22nd June 2024 in Chennai organised by RUWSEC and THAKUR foundation.
- On 03-06-2024 - took a session on health rights and health movements to final year MBBS students of CMC Vellore.
- Supported to organise regional conference on Right to Health by Child Rights group to involve in improving child Health in Tamil Nadu which held on 12th and 13th August 2024, Chennai.
- From 05th to 7th September SOCHARA –CEU participated in the international conference on bringing evidence to Public health policy held in IIM, Bangalore
- We have conducted a orientation session on role of social workers in health in Tamil Nadu on 10th September for Kumaraguru college of engineering students, Coimbatore.
- We have addressed more than 300 women students of Women's Christian college, Chennai on 23rd November 2024 on the topic of Role of civil society and students in protecting health rights of the people in Tamil Nadu.
- On 19-09-2024 - conducted session on Social determinants of Health for the CHLP participants of SOCHARA.
- We are supporting Thozhi federation to strengthened unorganised women workers rights and security in Tamil Nadu. As a mentor to the federation we have oriented the federation on many occasions including on 25th September to more than 80 leaders of the federation in Yercaud.
- As part of faculty development initiatives of SOCHARA one of our team members undergoing Master of Public Health training offered by SOCHARA and he participated in the Community Health Change Makers Confluence – CHCC held between 9th -13th Dec 2024 in Bengaluru. Also attended course training in Martin Luther Christian university, Shillong from 10th to 30th Aug 2024.
- On 21-10-2024, conducted session on participatory action research for MPH students of SOCHARA.
- On 23-11-2024, we have participated in the first regional webinar for the Dead Women Talking (DWT) Phase II organised by common health. It talks about maternal death and related issues in the country from a Peoples perspective. We have actively contributed in the first phase of it

- On 05-12-2024 - oriented the Thozhi federation leaders on “role of federations on supporting women workers rights” in Tiruchy.
- On 07-12-2024 - attended Thozhi’s executive committee meeting to discuss strategic plan held online.
- On 09-12-2024 - took session for MPH interns of SOCHARA on community participation, mechanisms and pathways for engagement.
- Strengthening Anusandhan Trust through governance meeting including on 10th August and 09th December 2024 held in Pune and online respectively. The trust has long history in strengthening health rights of people in India.
- In the month of January 2025, we have briefed the media on the possible impact of USA exit from WHO.
- DHWANI foundation which is supporting many civil society organisations in south India is aiming to strengthen the organisational structure of the NGOs invited to share SOCHARA’s knowledge on building networks and strengthening it. We shared our experience in the meeting held on 04th January 2025.
- From 03rd to 05th February 2025 attended conclave on civil society federations in India held in Bangalore organised by DHWANI foundation
- On 22-01-2025 - facilitated planning meeting of THOZHI federation held in Yercaud.
- On 22-03-2025 - facilitated partners online meeting with AID US
- We are part of the experts prepared document on finance sharing between state and union government. The material produced in Tamil and widely circulated to media.

1. Academic support and other activities

Community Health Learning Programme (CHLP) – Mentoring and buddy support was provided to the participants of CHLP. There was regular participation in the Mentors’ Connect and Buddies’ Connect. These focussed on training strategies. Mentoring was provided to six Fellows, as well as buddy support to others. This mentoring involved support to field work, presentations, idea drafts and reflections. The Community Health Action (CHA) projects were also assisted, in development and for reporting

Community Health Changemaker’s Confluence (CHCC) - This is a part of the CHLP and involves the following: -

- Exposure visits to organisations and their field area, including SOCHARA, followed by sharing of reflections on these visits.
- Presentation and discussion of drafts of projects by CHLP participants in their field area.

The CHCC was held in Bhopal in February 2025, and involved visits to organisations working with people affected by the Bhopal gas accident (Sambhavna Trust and Chingari). The slum where SOCHARA works was also visited, and there were interactions with the field worker and the local community.

Apart from all the above activities we continuously support actions to create critical mass among the students and young professionals through community health learning program of SOCHARA and hosting few interns of social work and public health students. During the reporting period we have mentored Tharini, Humaria and Archana.

CWASH

- Awareness creation to children/ community using IVR (Interactive Voice Response) technology
- We conducted **10 IVR** sessions at schools covering **1188** beneficiaries in Bengaluru

SOPHEA 2024-25

The work by Team SOCHARA SOPHEA relates particularly to the fourth SOCHARA objective (see below) while also linking with all the other objectives. The work is embedded within the larger ecosystem of the organisation. We work in collaboration with all team members and clusters, as well as with general body members. Building on the large and evolving network of community health practitioners and partnerships has enriched our teaching learning programmes.

Introduction

Supporting professionals with a passion for community health have been part of our DNA. Creative efforts have been made since inception in 1984 of the Community Health Cell (CHC). Articulation of an alternate community health approach based on a social paradigm shift drawing on social reality laid the foundations. A focus on social justice, and community participation towards bridging health gaps has been a conscious driver. Increased outreach and structure evolved since 1991 through SOCHARA. Constant learning, experimentation, praxis and evolution of community health approaches responsive to diverse contexts, were attempted.

This spirit continued through the year. The highlight of 2024-25 was the quality of engagement with participants of the CHLP and MPH-CH batches. The energy and abilities of the participants in working for health with communities in remote and challenging situations were motivating and humbling. Intense efforts by team SOPHEA and the larger SOCHARA team and network made it a full circle.

Fund raising by the Team was a big step forward towards self reliance. The continued generosity of donor partners is gratefully acknowledged.

There was team strengthening during the year with regular review and planning meetings and an increased staff strength. There was greater structuring of the two programmes in keeping with University and UGC requirements.

School of Public Health, Action and Equity (SOPHEA)

SOCHARA SOPHEA continued its initiatives towards capacity building for health equity between April 2024 and March 2025. These included the University accredited Community Health Learning Programme (CHLP) Postgraduate Diploma (PGD), Master of Public Health with specialisation in Community Health (MPH-CH), internships and community orientation visits.

SOCHARA-SOPHEA has over the years, consistently focused on 'action-based' community health approaches to public health problems and issues; strengthening the public health system;

addressing the wider health determinants of India's majority population - the rural and urban marginalised, vulnerable and socially excluded groups. SOCHARA's partnership with Martin Luther Christian University (MLCU), Shillong for University accreditation (formalised in May 2022) and its partnerships with donor agencies MISEREOR, AID-India, America India Foundation (AIF) and individual donors is based on common goals, shared ethos and values. These include the broad philosophy of communitising health, health practitioners, health systems and health policies; aimed at reducing social inequities in health, towards Health for All.

During the reporting period, the CHLP Post Graduate Diploma (PGD) program successfully completed the first batch of Phase V (2023–24) and initiated the second batch. The third batch of the MPH in Community Health (MPH-CH) also commenced in line with the university's academic calendar. The SOPHEA team underwent structural changes, with two new staff members joining the team. Internships and exposure visits were also facilitated during this period.

From April 2024 to March 2025, SOCHARA's School for Public Health Equity and Action (SOPHEA) focused on the following key activities:

1. Facilitated the hybrid 12-month Community Health Learning Programme (CHLP), Phase V – Batch 2.
2. Facilitated the 3rd batch of the Master's in Public Health with a Specialisation in Community Health (MPH-CH).
3. Completed CHLP Phase V – Batch 1 and initiated the 2nd batch of MPH-CH.
4. Issued PG Diploma certificates to eligible CHLP participants.
5. Supported internship placements for participants.
6. Coordinated an exposure visit for faculty and students from RV Dental College.
7. Institutional mechanisms - Academic and Research Council.

CHLP and MPH-CH Participant Stories

CHLP 2024-25 Batch summary

This note is a brief description of the CHLP 2024-25 participants. We tried to make it as short as possible, but we found it difficult as it wouldn't do justice to narrating their stories.

The batch was extremely diverse in their education, social background, the languages they speak and the profession they are involved in. The SOCHARA's vision of bringing various cadres of Health workers under one umbrella and working together for the goal of 'Health for All', addressing social determinants of health and making it a communitized health practice is not just a dream, but a process in action. The diversity of the new batch, the topics they selected for the action projects and the zeal by which they completed the action project affirms this.

The CHLP participants included Pediatrician, Public health professionals (MPH), AYUSH practitioners, Social workers (MSW), Engineers, UPSC aspirants, ANM, Nursing professionals, postgraduates in developmental studies, etc. All of them were brought together for one common cause of betterment of the Society and better Health.

It was a privilege for the SOPHEA team to work with the CHLP 2024-25 Batch. Their stories, experiences and work that they are doing were inspirational.

नाम श्वेता कुमारी (CHLP 2024-25)

मेरा नाम श्वेता कुमारी है, मैं बिहार के अररिया जिले से हूँ। फिलहाल मैं पीरामल फाउंडेशन में डिस्ट्रिक्ट करुणा फेलो के रूप में काम कर रही हूँ। यहाँ मैं लीडरशिप (नेतृत्व) को बेहतर बनाने में मदद करती हूँ और जेबीएसवाई (JBSY) लाभार्थियों को भी सपोर्ट करती हूँ। मुझे समुदाय के साथ मिलकर स्वास्थ्य के क्षेत्र में काम करना बहुत अच्छा लगता है। मेरा सपना है कि लोग अपने स्वास्थ्य के प्रति जागरूक हों और खुद का ध्यान अच्छे से रखें। CHLP पाठ्यक्रम से मुझे बहुत कुछ नया सीखने को मिला। पहले मैं सोचती थी कि स्वास्थ्य का मतलब सिर्फ डॉक्टर और दवाइयाँ होती हैं। लेकिन अब मैंने जाना है कि साफ पानी, पोषण, शिक्षा और अच्छा माहौल भी स्वास्थ्य के लिए जरूरी हैं। इस कोर्स ने मेरी सोच बदली है और मुझे अपने काम को बेहतर और समझदारी से करने की प्रेरणा दी है। अब मैं अपने समुदाय के लोगों की जरूरतों को अच्छे से समझ सकती हूँ और उन्हें सही तरीके से मदद करने की कोशिश करूँगी। इससे मेरा आत्मविश्वास भी बढ़ा है और मुझे लगता है कि मैं अपने समाज के लिए कुछ कर पाऊँगी। आज जो मेरी नजरिया स्वास्थ्य के प्रति बदली है, उसके लिए मैं सोचारा, पीरामल टीम और नीरज भैया का धन्यवाद करना चाहती हूँ। मैं खुद से वादा करती हूँ कि मैं अपनी क्षमता के अनुसार समुदाय को जागरूक करने में योगदान दूँगी और कुछ हद तक बदलाव लाने की कोशिश करूँगी।

My name is Shweta Kumari, I am from Araria district of Bihar. Currently I am working as District Karuna Fellow in Piramal Foundation. Here I help to improve leadership (leadership) and also support JBSY beneficiaries. I love working in the field of health with the community. My dream is that people should be aware of their health and keep their attention well. I got to learn a lot of new from the CHLP course. Earlier I used to think that health only means doctors and medicines. But now I have known that clean water, nutrition, education and good environment are also necessary for health. This course has changed my thinking and has inspired me to do my work better and wisely. Now I can understand the needs of the people of my community well and try to help them properly. This has also increased my confidence and I think I will be able to do something for my society. Today, I want to thank my view to my view of health, Piramal team and Niraj Bhaiya. I promise myself that I will contribute to make the community aware according to my ability and try to change some extent.

ज्योति कुमारी (CHLP 2024-25)

मेरा नाम ज्योति कुमारी है, और मैं बिहार के सीतामढ़ी जिले से हूँ। मैं वर्तमान में पीरामल फाउंडेशन में करुणा फेलो के रूप में कार्यरत हूँ। इस फेलोशिप में मेरा काम है जिला अस्पताल के स्टेकहोल्डर को वर्चुअल सपोर्ट करना और उनके लीडरशिप और व्यवहार परिवर्तन पर कुछ सवालों के साथ उनसे बात करना, जननी बाल सुरक्षा योजना के अंतर्गत आने वाली लाभार्थी का फीडबैक लेना और मैं अभी 3 महीने से पीरामल फाउंडेशन SOH (School of Health) के HR टीम को सपोर्ट कर रही हूँ, जिससे मुझे काफी सारी जानकारी मिली। CHLP कोर्स ने मेरे काम और सोचने के दृष्टिकोण को काफी प्रभावित किया है। इस पाठ्यक्रम ने मुझे समुदायिक स्वास्थ्य के विभिन्न पहलुओं के बारे में महारत से समझने का अवसर प्रदान किया, जिसमें जलवायु परिवर्तन के प्रभाव और प्रभावी संचार कौशल का महत्व शामिल है। स्वास्थ्य एवं सामुदायिक स्वास्थ्य के बारे में बेहतर जानकारी प्राप्त हुई। CHLP से पहले, मेरी समझ स्वास्थ्य के बारे में सीमित थी, और मैं मुख्य रूप से स्वास्थ्य सेवाओं पर ध्यान केंद्रित करती थी। लेकिन CHLP पाठ्यक्रम के बाद, मेरी समझ स्वास्थ्य के बारे में बढ़ी और अब मैं स्वास्थ्य को एक समग्र दृष्टिकोण से देखती हूँ, जिसमें सामाजिक, आर्थिक और पर्यावरणीय कारणों

का भी विशेष महत्व शामिल है।

CHLP पाठ्यक्रम ने मुझे अपने काम में अधिक प्रभावी ढंग से काम करने और समुदाय की जरूरतों को बेहतर ढंग से समझने में मदद की है। समुदाय की जरूरतों को देखने का मेरा नजरिया भी बदला मैं इसके लिए SOCHARA टीम, पीरामल फाउंडेशन एवं नीरज भाई का तहे दिल से आभार व्यक्त करती हूँ और मुझे विश्वास है कि यह मुझे अपने भविष्य के काम में और भी अधिक प्रभावी ढंग से काम करने में मदद मिलेगी। धन्यवाद मैं नाजनी परवीन वर्तमान में बेगूसराय जिला के पीरामल फाउंडेशन के अंतर्गत करुणा फेलो के रूप में कार्य कर रही हूँ। करुणा फेलो के तौर पर दिए गए निर्देश एवं गाइड लाईन के अनुसार मैं सरकारी अस्पतालों की महिला एवं पुरुष चिकित्सकों/पदाधिकारियों तथा कर्मियों से मोबाईल फोन तथा वर्चुअल संवाद के माध्यम से व्यवहार परिवर्तन कार्यशाला की उपयोगिता/कार्यशाला में प्राप्त की गयी और दी गयी जानकारी से स्टेक होल्डर के दिए गये सुझाव को विनम्रता पूर्वक शालीनता के साथ प्राप्त करना एवं जननी बाल सुरक्षा योजना के अंतर्गत आने वाली लाभार्थी का फीडबैक लेना सम्बन्धित विभाग को प्रतिवेदन समर्पित करती हूँ। चूँकि हमें समय का उपयोग दैनिक उर्दू समाचार पत्र "कौमी तंजीम" के बेगूसराय कार्यालय में समाचार कंपोजिटर के तौर पर भी कार्य कर रही हूँ। अगस्त 2024 से CHLP से जुड़ी जिसके बाद मुझे सामाजिक क्षेत्रों के विकास कार्यों, सामाजिक पिछड़ेपन के शिकार लोगों को बुनयादी स्वास्थ्य, चिकित्सा शिक्षा, सुविधा मुहैया कराने के साथ-साथ आर्थिक संकट को दूर कैसे करना है दी गयी प्रशिक्षण के माध्यम से सीखने का अवसर मिला। CHLP के पाठ्यक्रम में मैं एक प्रतिभगी होने के साथ साथ CHLP के उद्देश्य पर खड़ा उतरने की हर सम्भव कोशिश कर रही हूँ जिस में मुझे सफलता भी मिल रही है। क्योंकि मैं गरीब व असहाय लोगों की कठिनाई को जानने और मदद कैसे करनी है CHLP के द्वारा दी गयी प्रशिक्षण व अपने अनुभव को लाभुकों को साझा कर रही हूँ।

I, Nazni Parveen resident of Begusarai, Bihar is currently working as Karuna fellow under the Piramal Foundation in Begusarai district. According to the instructions given as Karuna Fellow, I interact with doctors, nurses and other workers of government hospital virtually/telephonically to follow activities of leadership workshops. I compile all feedbacks and submit to main team. I also report to the HR department after taking feedback of the beneficiary under Janani suraksha yojna Scheme. I am also working as a news composer in the Begusarai office of the daily Urdu newspaper "Qaumi Tanjim" daily. Since August 1, 2024, through CHLP, I have had the opportunity to learn about the development work in social fields, including the social backwardness of various sectors, and how to provide weaving health, medical education, and facilities, as well as how to overcome economic crises. I am making every effort to stand on the purpose of CHLP, in which I am getting some success also as now I know methods to help the difficulties of poor and helpless people. Also, I am sharing the training and my experience given by CHLP to the beneficiaries. My name is Jyoti Kumari, and I am from Sitamarhi district of Bihar. I am currently working as Karuna Fellow in the Piramal Foundation. My job in this fellowship is to support the stakeholder of the district hospital and talk to them with some questions on their leadership and behavior, taking the feedback of the beneficiary under Janani Shishu Suraksha Yojna and I have been supporting the HR team of Piramal Foundation SOH (School of Health) for 3 months, which has gave me a lot of information. CHLP course has deeply affected my work and thinking approach. This course gave me an opportunity to deeply understand about various aspects of community health, including the impact of climate change and the importance of effective communication skills. Now I have got better information about health and community health. Prior to CHLP, my understanding about health was limited as I mainly focused on health services. But after the CHLP course, my understanding increased about health and now

I look at health from a holistic perspective, including special importance of social, economic and environmental causes. The CHLP course has helped me to work more effectively in my work and understand the needs of the community better. My perspective of seeing the needs of the community also changed, I express my heartfelt gratitude to the Sochara team, Piramal Foundation and Neeraj Bhai for this. And I am confident that it will help me to work even more effectively in my future work. Thank you.

Dr Viraj Gite



Dr Viraj Gite is an Ayurvedic Physician based in Nagpur. He runs a successful business model of medical practice. In addition to this he runs a communitised comprehensive health Practice in Gadchiroli. He through his socially committed CSO by the name Anandalok Health Foundation is working the village communities in the domain of child nutrition and Mothers health. The model he has adopted here is praiseworthy. The nutritional needs are Met by enhancing the knowledge of the community and resourcing the food locally.

The aim of the participant to engage in CHLP and further in his plan to enroll for MPH CH is Not to find an alternative career path, but to equip him with the knowledge in communitised health and research.

Dr Viraj has done exceedingly well in his action project. Although his continued attendance in the Online sessions were less, he has followed up with the recorded live sessions. The understanding Dr Viarj has on communitised public health is commendable.

Ms. Rekha I

I'm Rekha from Chitradurga. I am currently working with Khushi Baby, and previously, I worked at Noora Health as a Monitoring Associate in the Data Team. I have always been interested in working with the community and learning more about their needs. That's why I joined CHLP 2024.

CHLP helped me understand how to identify community gaps and needs. It also taught me how, as a community worker, I can engage with people and support them effectively. For example, in some areas, people face social issues like lack of food and medicine. Many are also unaware of the benefits available from the government or other organizations, and how to access them. As a community worker, it is important to interact with them, understand their problems, and help connect them to the right support.

My experience with SOCHARA through the CHLP was very meaningful. For the past two years, I had mainly worked with data, but CHLP gave me a deeper understanding of people's health and the social determinants that affect their lives.

Now, I am working closely with ASHAs, and I am able to better understand the challenges they face in their work. CHLP has helped me learn how to support them more effectively and view society from a new perspective

Anjali Daimari



Anjali Daimari is from Udalguri, Assam, with a heart full of dreams and a desire to bring change in community. Life has brought many challenges emotionally, mentally, and socially to her. She has not only faced struggles herself, but also have observed people around her suffer in silence.

Anjali is also concerned about environmental degradation and climate change and have been actively involved in counter measures. She is concerned not just the loss of nature but also the quiet suffering of people. These changes, along with the struggles she saw and felt, taught her how deeply health, environment, and inner well-being are connected.

These experiences shaped her compassion and deepened my purpose.

Anjali works with YuMetta Foundation who is working with the youth of Northeast India. Along with Yumetta she explore values, strengths, challenges and a ways to build a meaningful life that gives back to society.

“The Community Health Learning Program (CHLP) was a turning point. It helped me open my heart and mind to see the world more clearly. One of the most important lessons I learned is that true change begins when we live with people, understand their struggles and experiences and truly listen and understand what they really need, not from the outside, but from within.

CHLP gave me more than knowledge. It gave me clarity, courage, and a family of like-minded friends. Looking ahead, I hope to continue working for the overall health and well-being of communities combining what I’ve learned with my passion for documentary and filmmaking.

CHLP taught me that even the smallest step, when taken with truth and care, can lead to meaningful change. With compassion, connection and purpose we can truly make a difference.”

Anjali Daimari

MPH CH

Dr Nandaris Marwein

Assistant professor MLCU Public Health Social Work Department



Facilitating discussion on millet cultivation

“MPH-CH is an enormous investment, pursuing the course enriches my interdisciplinary background from Social work into the realm of Public Health. I strongly believe this course equips me with academic foundation, research work and community engagement-for addressing public health issues. It was really an immersive journey because it shapes my personal and professional growth. Despite “zoom hurdles”, digital learning enabled me to refine my digital etiquettes as well as enhance my capacity for self -directed learning. Throughout the course, SOCHARA’s support networks -comprising teaching & non-teaching staff, mentor, and batchmates helped me feel confident to complete the course. I'm sincerely and deeply grateful.”

Vinay kumar vishwakarma

Vinay Kumar works with Jan Swasthya Sahyog Anuppur as a district coordinator in the health system strengthening program.

“I am writing to express my heartfelt gratitude for the Chlp and Mph programs, which have been instrumental in shaping my career in public health. The comprehensive curriculum, expert faculty, and hands-on experiences have equipped me with the knowledge, skills, and confidence to make a meaningful impact in this field.

The CHLP and MPH programs have given me a deep understanding of public health principles and practices. The faculty's expertise and guidance have been invaluable. I have gained practical skills through hands-on experiences and research projects. The network has opened up new opportunities and collaborations.

Completing my MPH has enabled me to excel in my role, and my organization has entrusted

me with new responsibilities as a District Coordinator. Furthermore, it has broadened my understanding of public health initiatives across various states.

I am grateful for the opportunities provided by these programs, which have enabled me to work effectively in my organization and take on new responsibilities.”



Discussion about ground level health facility issue with Block program manager and Medical officer

Meeting with PHC staff



SHC -HWC visit Dydhmaniya, Anuppur

Community Health Learning Program (CHLP)

Phase V of the CHLP has the following 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 concert with their theoretical learnings through their field-based projects.

In its 5th Phase, the CHLP continued in hybrid mode as a 12-month programme delivered in two semesters (inclusive of holidays).

The year saw the conclusion of its first batch 2023-24 in April 2024. Preparations for the second batch of this phase, i.e. CHLP 2024-25 began in March, with the circulation of the poster announcement, FAQs and admission form being circulated widely among SOCHARA's extended network in the 3rd week of April 2024 and the closure of applications and the last date of applications being 03 June 2024. 37 candidates of the 49 applications received were interviewed

by a panel constituted of resource persons from among SOCHARA's associates; and 35 candidates were shortlisted. A scholarship committee was initiated to support the planning and management of course fee waivers and scholarships for the academic year 2024-25.

Program Overview of CHLP Phase V - batch 2 (CHLP 2024-25)

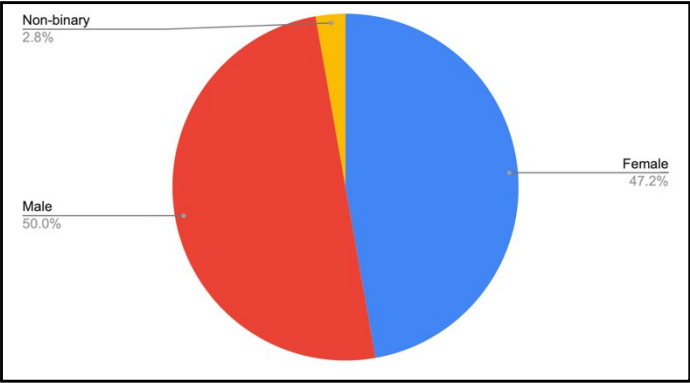
The CHLP 2024-25 Batch began with an online prelaunch session where the course participants and team got to know each other, were given an overview of the programme and together planned the agenda for the formal launch of the course year. The course was formally launched on 01 August during an online live session that was joined by SOCHARA's President, Dr. Pruthvish Sreekantaiah, Prafulla, Secretary - Coordinator, Thelma Narayan, Director of Academics, Ravi Narayan, Archivist and Advisor, Mohankumar Thambad - CHLP alumni, Ms. Janelle, Ms. Ranjitha and Dr. Karun SOPHEA core team members. Semester 1 (from 29th July 2024 to 01st August 2024) included two weeks of orientation, 17 online learning modules and an in-person Community Health Changemakers Confluence that was hosted at SOCHARA, Bengaluru from 02nd September 2024 to 06th September 2024. Semester 2 (from 18th February 2025 to 23rd February 2025) began with a second CHCC hosted by SOCHARA, Bhopal and further included the facilitation of 12 online modules and a three-month community health action project. During this year participants were assigned team buddies and mentors. During their module learning, participants were given a total of 13 experiential/written assignments; were encouraged to co-facilitate some learning sessions. In order to be eligible for the postgraduate diploma accreditation, participants are required to complete a total of 1200 learning hours and 40 credits.

The CHLP is unique in its intake of participants; with participants from across India representing diverse languages, regions, educational backgrounds, age, etc. as is evident from the figures below for CHLP 2024-25.

The profile of the participants are shown through the graphs below

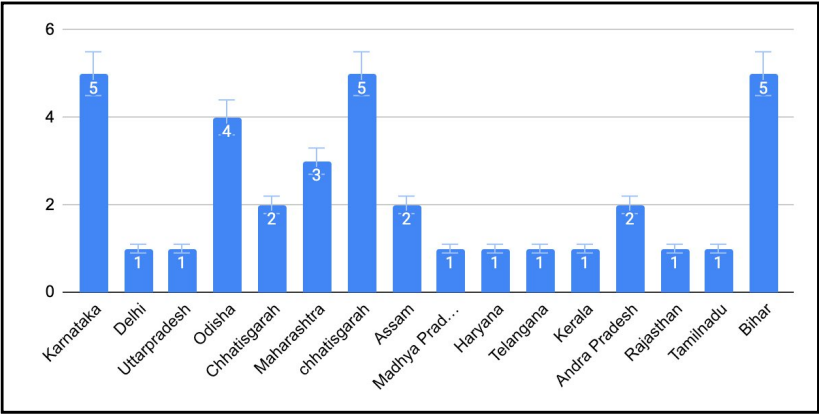
1. Age

Minimum age	Maximum age
24	53

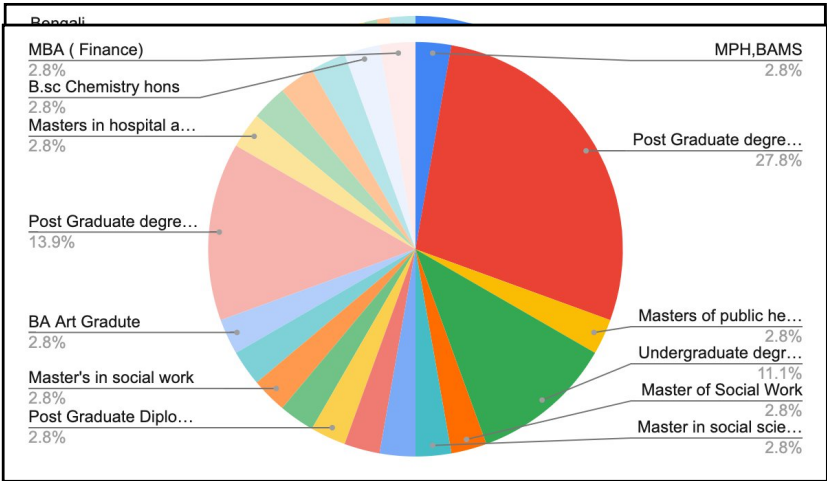


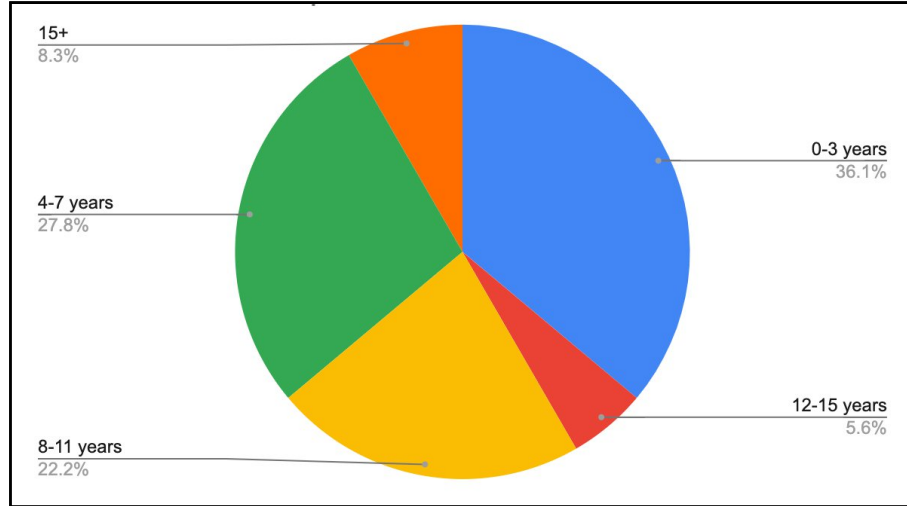
2. Gender State

3. Languages known

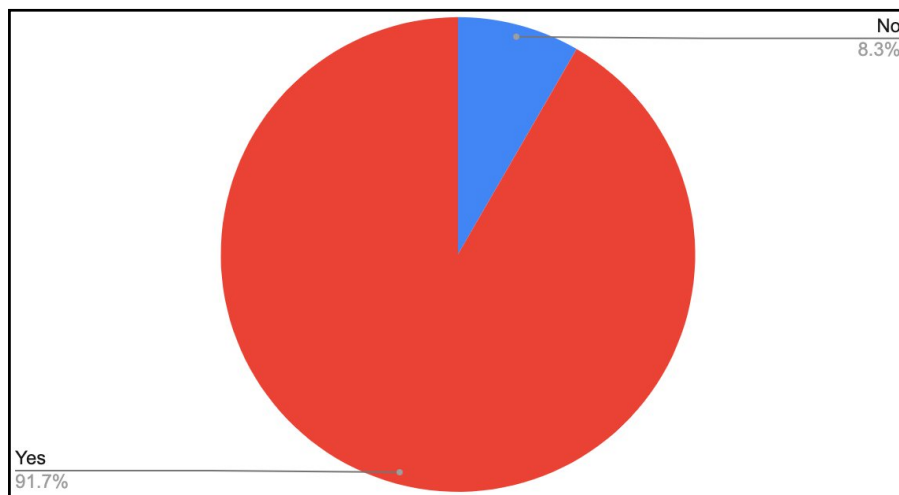


4. Educational background





Currently
working



5. Years of work experience

Mode of facilitation

Learning Management System (LMS)

The online learning modules continued to be facilitated and managed via the learning management system (LMS) hosted by MOODLE. The LMS is used for the dissemination of course material such as pre-recorded sessions, recordings of live sessions, presentation slides and alternative learning material, assignment and reflective note uploads by participants as well as feedback. Participants were able to access the LMS via their laptops as well as via their smartphone mobile application.

Mentor and Buddy Support

The CHLP included a structured mentorship process involving 17 external mentors and 08 internal mentors. To foster a social learning environment, each participant was supported by an external mentor from SOCHARA's resource network and a buddy. Mentors were matched with participants based on their area of interest in health, language preference, and level of understanding to ensure meaningful and effective guidance. Formal Mentor Connect meetings were held throughout the year to provide orientation, facilitate dialogue, and gather feedback on the mentorship process.

In addition to the mentorship process, a buddy support system was implemented to enhance participant engagement and learning. Each participant was assigned a buddy from the SOPHEA or SOCHARA team, in addition to their designated mentor. Buddies maintained regular contact with participants to understand their learning journey, provide guidance during challenges, support the completion of assignments, and act as a bridge between the participant and their mentor. This informal, peer-like support contributed to a more approachable and responsive learning environment.

The buddy system played a key role in improving the quality of reports and assignments submitted by participants. It also contributed to a significant reduction in dropout rates, ensuring greater continuity and completion of the programme.

Community Health Action Projects

A core component of the CHLP is the Community Health Action Project, undertaken by participants in the second semester. At the start of the semester, participants were introduced to the project process through a detailed orientation. Each participant was supported by their respective mentor through the project journey.

Participants of the CHLP 2023-24 batch had been offered a choice between undertaking a community health action project and a research project. 13 participants successfully completed and submitted Community Health Action Projects and 4 participants completed and submitted Research Projects in April 2024. 4 participants from this batch expressed interest in continuing their public health education and have been successfully enrolled into the MPH-CH programme (2024-25) through lateral entry.

Participants of the CHLP2024-25 batch prepared their project idea drafts under the guidance of

their mentors and presented the same through hybrid sessions during live sessions and during the CHCC in Bhopal in February 2025.

Post Graduate Diploma (PGD) accreditation

The Community Health Learning Programme (CHLP), a flagship initiative of SOCHARA since 2002, reached a significant academic milestone in 2022. The programme was formally recognised and accredited by Martin Luther Christian University (MLCU), Shillong as a Postgraduate Diploma in Community Health.

Under this accreditation, all previous CHLP participants (since 2002) became eligible to apply for the PGD certificate through MLCU and from 2024 onwards, the course has been officially offered and advertised as CHLP – A Postgraduate Diploma Programme in Community Health. We have since processed and facilitated the issuance of transcripts and PGD certificates for eligible participants from both earlier and current CHLP batches.

A total of 22 PGD transcripts have been processed and issued as of this academic year.

Master of Public Health with Specialisation in Community Health (MPH-CH)

SOCHARA, in collaboration with Martin Luther Christian University (MLCU), Shillong, Meghalaya, launched the Master of Public Health with specialisation in Community Health (MPH-CH) through the School of Public Health, Equity and Action (SOPHEA) in January 2023. Two pilot batches were initiated in 2023 (one in January 2023 and the second in August 2023). Participants accepted into the course either have a Post Graduate Diploma in Community Health (CHLP-PGD) or any postgraduate diploma or degree in related health or social sciences; which serve as year one (Semester 1 & 2), while this course serves as year two (Semester 3 & 4) of the MPH-CH. The programme has a hybrid curriculum with a total of 12 modules that include online learning modules, in-person experiential learning modules with SOCHARA-CHCC and MLCU; and a six-month dissertation project.

The Financial year from April 2024 to March 2025 saw the conclusion and graduation of the first two pilot batches MPH-CH 2022-23 (Batch 1) and MPH-CH 2023-24 (Batch 2) ; and the launch of the third batch MPH-CH 2024-25 (Batch 3). SOCHARA organised an in-person CHCC for the pilot phase batches 1 and 2 in April 2024. During the CHCC, participants from both batches came together to share their learnings, and the first batch participants presented their capstone projects. The MPH-CH assessment criteria and evaluation processes for the module learning and thesis projects were established through a consultative process involving the SOPHEA Director of Academics, Associate Director, SOCHARA's Academic Research Council and Board of Studies members, the MLCU Chancellor and team during the six-month period preceding this reporting period. During the reporting period, Batch 1 participants completed their six-month projects (4th semester) and external evaluation in March 2024 and submitted their final reports in May 2024. Their coursework and evaluation scores were submitted to MLCU for review and finalization. Batch 2 participants completed their six-month projects (4th semester), external evaluation, and submitted their final reports in August 2024. Their final coursework and evaluation scores, grades and reports were submitted to the university for finalisation. Final reports entail their six-month thesis, module learning journey and extracurricular participation in

public health and community health related programmes and events. All 10 MPH-CH participants (batches 1 & 2) were awarded and graduated with the degree of Master of Public Health by MLCU during their formal convocation on 20 September 2024. One participant chose to receive his degree in person in Shillong while the remaining participants received their degrees in absentia. SOCHARA also felicitated the new postgraduates online during the Annual General Body (AGBM) meeting held on the same day.

Batch 3 of the MPH-CH was launched in August 2024 with an intake of 5 participants, 4 of whom hold a CHLP PGD, SOCHARA and 1 hold a PGD in Healthcare Management. Drawing from the developing experience of facilitating the first two pilot batches of the MPH-CH, the SOPHEA team focussed efforts on streamlining programme processes. A poster announcement, FAQs about the programme were disseminated through SOCHARA's network, interviews were conducted and successful candidates registered with MLCU to conclude the admissions process. The course commenced online on August 1, 2024, covering modules on orientation and community health approaches to public health issues. Semester 3 of Batch 3 included 5 learning modules by SOCHARA and 1 module by MLCU. 1 participant of Batch 3 participated in in-person class-room and experiential module learning facilitated by MLCU in Shillong from 12th to 31st August. It was negotiated with the university to permit the remaining participants to complete this module the following year (August 2025) owing to difficulties faced by participants in meeting the required costs. Recognising and responding to this need, senior SOCHARA members were able to raise scholarship funds through '*Friends of SOCHARA*' and a Scholarship Committee was set up as a formal institutional mechanism to manage SOPHEA programme course fee waivers and scholarships. Mentors (2 SOCHARA-SOPHEA faculty and 3 adjunct faculty) were identified to guide participants in their respective six-month project and the mentorship spanning 9 months commenced in October 2024. Two mentorship connects were held on 17 Oct 2024 and 26th March respectively. A third is planned after the completion of the Batch.

The in-person CHCC for Batch 3 took place from 09 December to 13 December 2025 at SOCHARA, Bengaluru. This CHCC was facilitated as a research process workshop that focussed on hands-on learning of research methodology aimed at developing a community health-oriented research study proposal for scientific and ethical review. All five participants prepared and presented their idea drafts to an expert panel for review and guidance prior to preparing their final research proposals. Participants prepared and presented their final research proposals (under the guidance of their respective mentors) for scientific and ethical review by SISEC on 03 Feb 2025. All 5 applicants received SISEC approvals further to resubmitting their proposals with recommended changes. Participants began their research project implementation as part of Semester 4. Semester 3 results and grading was discussed and finalised in consultation with the Academic Directors and submitted in January 2025. Results were declared by the university on 17th February. Semester 4 consisted of research project implementation and overlapped with 3 online modules. The last online module concluded on 24th Feb 2025. Learning through research project implementation was supported by two online project updates by participants in which mentors and the SOPHEA team participated to provide further encouragement and guidance. The final dissertation report submissions and assessments are scheduled in June 2025.

The SOPHEA team participated in the faculty training and development workshop facilitated by MLCU, online on November 12 and 13. The workshop focussed on MLCU philosophy in academics and assessment of students.

Institutional Mechanisms:

Scholarship Committee: The scholarship committee that was initiated this academic year to take collective decisions regarding scholarships, fee waivers for participants of the postgraduate programmes, held its third meeting on 23 Oct 2024. The agenda for the meeting was to plan for the assignment of scholarship funds to programme participants. Deliberations were minuted and are available in the Scholarship file. SOCHARA is financially supporting selected participants from the MPH-CH 3rd batch through scholarship. Scholarship amount of Rupees 50,000/- each was transferred to four participants from the MPH-CH 3rd batch. Twenty-four participants of the CHLP 2024-25 batch were supported by Rupees 25,000/- each. Donor funds also supported two doctors who curated resource materials for the SUDHA relating to Disaster response, Workplace Violence in Healthcare and documenting the journeys through rural India, of young visitors of SARAI. One of the Friends of SOCHARA Dr. Palaniappan visited SOCHARA on 17 Mar 2025 to meet with the SOCHARA team and get to know more about the work being taken up by the organisation and the SOPHEA programmes. A six-month report on the programmes' progress was prepared and shared with scholarship donors.

Academic and Research Council (ARC): The 14th ARC meeting was held on 28th March, 2025 in hybrid mode. The SOPHEA team provided an update on the developments in the CHLP and MPH-CH programmes. Following discussions of the key agenda items ARC encouraged SOCHARA to proceed with the development of a short course (3-5 days), also considering this possibility in Hindi for participants in the Northern belt, change and health. The ARC recommended the team consider the possibility to appropriately utilise AI applications to enhance team capacity and skills particularly in developing assignments and assessments. It was also recommended that local buddies / mentors be identified to support CHLP participants, that learning resource materials be collated in Hindi and other regional languages where possible. The ARC recommended that the SOPHEA team develop a proposal for the CHLP PGD and get the approval of ARC for the same. The next ARC is scheduled for July 2025.

CHCC - Community Health Changemakers Confluence

The Community Health Change Makers Confluence (CHCC) is an in-person gathering of participants from the Community Health Learning Programme (CHLP) and the Master of Public Health in Community Health (MPH-CH). As an integral part of their curriculum, CHCC provides a dedicated space for participants to engage in discussions around *communitised public health* and its various dimensions. CHCC serves as a vibrant platform for building a networked community of public health practitioners united by a shared passion and commitment towards '*Health for All*'. It nurtures connections, collaborations, and solidarity among change makers working towards equitable, people-centred health systems.

The CHCC for the MPH-CH 2022-23 and 2023-24 were hosted at SOCHARA from 15th April to 19th April 2024. During this CHCC, participants of Batch 1 presented their final dissertation

projects and were felicitated.

The CHCC for MPH-CH 2024-25 was hosted at SOCHARA as a learning workshop on Research process. Over the course of this confluence, topics ranging from personal journeys in community health and public health research to in-depth explorations of research methodologies were shared and deliberated upon. Sessions are facilitated by a diverse group of resource persons — experienced practitioners, public health professionals, and academicians from different backgrounds, alongside members of SOCHARA.

Masters in Public Health with specialisation in Community Health (MPH-CH)

1. MPH CH (2022-23 and 2023-24 Batch) CHCC

Dates: Monday, 15th April 2024 to Friday, 19th April 2024

Venue: SOCHARA, Bengaluru

CHCC Goals:

- To further equip oneself with the necessary knowledge, skills, attitudes and values to become life-long learners through study, action, reflection as Community Health and Public Health practitioners.
- To revitalise one's commitment to working towards Health for All based on shared learning and life experiences of fellow travellers in Community Health and Public Health.
- To engage with a conversational methodology during the CHCC, actively sharing one's thoughts, and utilising the opportunity to deepen one's inner learning.
- To celebrate the near completion of the first pioneer batch of the MPH-CH

Learning objectives of CHCC:

1. To strengthen the sense of 'community' and 'life-long learning' among participants for the purpose of community health and public health.
2. Getting to know each other better and to understand oneself through strengthening self-awareness and a practice of self-care.
3. To revisit and reflect on knowledge, skills, values and attitudes developed during the MPH-CH course and to explore what lies ahead.
4. To widen one's engagement in critical issues of current and future public health significance through discussion and debate.
5. To forge new bonds and relationships and strengthen the network of community health practitioners in public health.

No: of participants: 9 participants from the 1st and 2nd Batches of MPH-CH

Topics covered:

- 40 years of SOCHARA journey- Experiential learning
- Indian Constitution and its intersection with Health
- Court simulation on certain events from the news
- Right to health with a focus on vulnerable communities
- Understanding the process of passing of Right to Health Act
- Life Journey- Working with HIV infected people
- Life Journey- Indigenous development organisation
- Project presentations
- Felicitation of MPH Ch 2022-23 Batch

- Inner learning: on intrapersonal and interpersonal conflict
- Understanding community needs in conflict situation
- Wetland ecosystem
- Climate change and health, One health



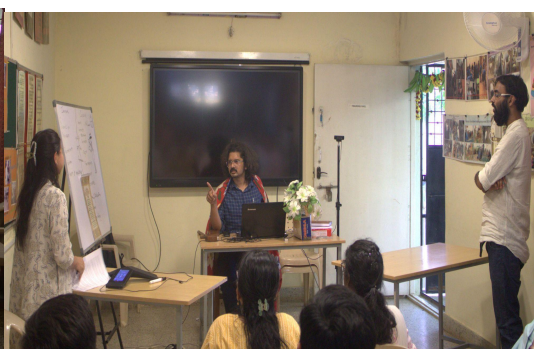
Dr Vanitha sharing her MPH CH experience through a poem



MPH CH participant being felicitated



MPH CH participants with SOCHARA team



Courtroom simulation

2. MPH CH (2024-25 Batch) CHCC

Date: 9th December to 13th December 2024

Venue: SOCHARA, Bengaluru office

Facilitated by: SOPHEA

Goals

- To further equip oneself with the necessary knowledge, skills, attitudes and values to become life-long learners through study, action, reflection as Community Health and Public Health practitioners.
- To revitalise one's commitment to working towards Health for All based on shared learning and life experiences of fellow travellers in Community Health and Public Health.
- To engage with a conversational methodology during the CHCC, actively sharing one's thoughts, and utilising the opportunity to deepen one's inner learning.

Learning objectives

1. To strengthen the sense of ‘community’ and ‘life-long learning’ among participants for the purpose of community health and public health.
2. To get to know each other better and to understand oneself through strengthening self-awareness and a practice of self-care.
3. To revisit and reflect on knowledge, skills, values and attitudes developed during the MPH-CH course and to explore what lies ahead.
4. To widen one’s engagement in critical issues of current and future public health significance through discussion and debate.
5. To forge new bonds and relationships and strengthen the network of community health practitioners in public health.
6. To develop an understanding of research and publication ethics in community health research and action studies.
7. To develop a community health-oriented research study proposal for scientific and ethical review.

No: of participants: All the five participants from the MPH CH 2024-25 Batch. A volunteer who was working with SOCHARA also participated in the CHCC.

Topics covered:

- Participants life journey
- Literature review workshop
- Introduction to SOCHARA extensive learning facilities
- Research story and challenges
- Developing research questions and research design
- Practicals on quantitative research methods
- Project Idea draft presentation
- Report writing



Practicals on Research by Dr Akshay Dinesh



PH CH participants with SOCHARA Bengaluru team

Community Health Learning Programme

(CHLP) - CHCC

1.CHLP (2024-25 Batch)

Date: Monday, 2nd to Friday, 6th September 2024

Venue: SOCHARA, Bengaluru

Facilitated by: SOPHEA

Goals

1. To equip oneself with necessary knowledge, skills, attitudes and values to become community health providers for health action in the COVID -19 pandemic and beyond with a specific focus to improve the health of the marginalised population
2. To strengthen the community health movement in India to work towards the goal of 'Health For All'.

Learning objectives

1. Building a sense of community of learners for the purpose of community health.
2. Learn the story of SOCHARA, key milestones and activities.
3. Understand community health and develop a personal plan to gain knowledge and skills and reflect on values and attitudes.
4. Understand the social determinants of health.
5. Getting to know each other better and to understand oneself through inner learning.
6. Develop communication skills to work with communities.
7. To forge new bonds and relationships and strengthen the network of community health practitioners.

No: of participants: 20 participants from the CHLP 2024-25 attended the confluence

Topics covered:

- Understanding Community Health through SOCHARA story
- Introduction by CHLP participants
- Session by Thanal: On Wayanad disaster
- Monsoon simulation game
- Community Health stories
- Session on communitisation of public health system
- Visit to Mayabazar: To understand the work C WASH Bengaluru
- Inside Learning session
- Prevention of sexual harassment and child protection policies
- Communication for community health workshop



CHLP 2024-25 Batch with SOCHARA Team



Dr Thelma Narayan (Co- Initiator of SOCHARA) taking the session



Dr. John Clarence- In charge of DAP taking session on SOCHARA extensive learning facilities



Dr Ravi Narayan (Co- Initiator of SOCHARA) addressing the participants



Field visit : Mayabazaar SOCHARA C WASH action area



Cultural Night: Participants in ethnic wear

2. CHLP 2024-25 (Batch)

Dates: 18th to 23rd Feb 2025

Venue: Bhopal, Pastoral Center and SOCHARA office

Facilitated by: SOPHEA, SOCHARA Bhopal team

Goals of CHLP

1. To equip oneself with necessary knowledge, skills, attitudes and values to become community health providers for health action in the COVID -19 pandemic and beyond with a specific focus to improve the health of the marginalised population
2. To strengthen the community health movement in India to work towards the goal of 'Health For All'.

Learning objectives of 2nd CHCC for CHLP 2024-25 batch

1. Building a sense of community of learners for community health.
2. Learn the story of SOCHARA MP-CPHE, key milestones and activities.
3. Understand community health and develop a personal plan to gain knowledge and skills and reflect on values and attitudes.
4. Understanding the Bhopal gas tragedy and its long-term consequences in the community with a visit to Sambhavana Trust and Chingari Trust.
5. Understanding the social determinants of health in human-induced disasters through participation in the 51st annual meeting of the medico friends circle (mfc).
6. To forge new bonds and relationships and strengthen the network of community health practitioners and activists.

Topics covered:

- CHLP experience and way forward: Participant driven session
- SOCHARA Bhopal story- CPHE
- Introduction to Sambhavan Trust, Chingari Trust and mfc
- Visit to Sambhavana Trust and Chinagari Trust
- Idea draft presentations
- Attending the mfc



Dr Viraj doing idea draft presentation on his project



Participants doing the field visit



Visit to Sambahava Trust

Internships, Volunteer ships and Orientation Visits

SOCHARA accepts volunteers and internship students who are interested in Public Health. Each of these participants are given an introduction to SOCHARA philosophy and communities public health. The participant is assigned a mentor and is asked to actively engage with the different team members.

Further to this the participants are asked to visit the field work areas and can work on their internship objectives. Interns and volunteers take part in the weekly meeting and are encouraged to take part in the discussions.

At the end of the volunteership or internship the participant are required to make a presentation on their work and experience with the SOCHARA team.

The internship duration ranges from one month to 6 months depending on the institutional or organisational requirements. The volunteership are more flexible and are based on the time availability of the participant.

During the internship participants are exposed to the SEPCE determinants of health, paradigm shift in health and also to the axioms based on which community actions are initiated by SOCHARA.

Internship:

SOCHARA accepted 10 interns during the period of March 2024- April 2025. The internships were part of their master's program.

The participants from MSW, MPH from institutions such as TISS Mumbai, Central University

of Kasargod, Christ Bengaluru, Kristu Jayanti College Bengaluru, SRM College Chennai, Symbiosis Pune.

Volunteership: The participants who volunteered were due to their personal interests. This cohort included both students who are still pursuing their course and also those who are working or in their career transition stages.

Orientation Visit: RV Dental College - 10th February 2025 to 12th February 2025

In February 2025, SOCHARA hosted a three-day educational exposure visit for six members—undergraduate and postgraduate students, along with faculty—from the Department of Public Health Dentistry, DAPM RV Dental College, Bengaluru. The visit was coordinated following a recommendation from Dr. Rajeev, an alumnus of the college, to deepen understanding of community-oriented public health approaches.

Key Objectives of the Visit Included:

- Understanding community-based approaches in public health with a focus on oral health
- Learning from SOCHARA's engagement in health policy processes
- Exploring integration of oral health in community health initiatives
- Introducing participants to community health research methodologies

Visit Highlights:

- Orientation sessions on SOCHARA's approach, history, and initiatives
- Field visit to Mayabazaar to understand C-WASH interventions and interact with community volunteers
- Peer learning and case discussions on oral health and social determinants
- Knowledge sharing by SOCHARA teams from Bengaluru, Bhopal, Vijayawada, and Chennai
- Collaborative dialogue on potential future partnerships between SOCHARA and RVDC

The exposure visit facilitated rich cross-learning, strengthened academic-public health engagement, and opened up new possibilities for collaboration in community-based oral health promotion and research.

Building Financial Sustainability

Sustainability has long been a challenge and a strategic priority for the CHLP programme as it has been entirely reliant on donor funding. Significant developments over the recent years enabled more concrete steps towards enhancing financial sustainability for the SOPHEA programmes. These key developments include university partnership, a formal accreditation of the CHLP programme as a Postgraduate Diploma, the development of the MPH-CH lateral entry Degree programme and the growth of SOPHEA, SOCHARA as a resource centre. These initiatives are collectively a step towards strengthening the long-term viability of the SOPHEA postgraduate programmes. The organisation raised financial participant contributions towards partly supporting their one-year CHLP course including the in-person component, the CHCCs. Additional support has come through MPH-CH facilitation, as a resource centre partner with MLCU; scholarship funding from Friends of SOCHARA and also from supporting internships, volunteers and orientation requests.

Action Project for Climate Change

Participatory mapping and design of behaviour change communication tools and initiating youth club for climate action

SOCHARA with the support from Restless development initiated a youth action club, to seed the idea of Climate change, its impact among youth and lead them to action.

Major focus of the project was participatory mapping and building behavior change collaterals which would encourage the youth to take action towards mitigation and adaptation for climate change induced water and health issues.

SOCHARA was able to implement some of the community health action tools in this project. SOCHARA is planning to continue working in the area based on the inputs from this project.



Rally organised on Earth Day
Social Innovation Studio



Engaging with the community along with



Yuva café, Anjanapura: Suma- SOCHARA field coordinator with Sahajan- Project lead, Yuva café Anjanapura taking session on Climate Change.

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

- On 7th April 2024 we also released Urban Health Manifesto 2024 at TNSF office, Gopalapuram, Chennai.
- 4th and 6th May 2024 Meeting with South Chennai volunteer on follow-up of Manifesto
- On 05th December 2024 we have convened a meeting in Tiruchy with the honourable education minister for Tamil Nadu Mr. Anbil Magesh Poyyamozi to unveil logo of 25th year of MNI and poster and handed over people's health demands 2024.
- We had meeting with key stake holders promoting Community participation in health in India including former director of National Health System Resource center Prof. Sundararaman, special officer to Tamil Nadu chief minister cell Dr. Darez Ahamed, I.A.S, representatives of NCHO, Thailand, representatives from George Institute of Public health and representatives from three more states on 05th September in IIM, Bangalore.
- **Release of Health manifesto 2024** – JSA prepared peoples' health manifesto for the general election of the country and released it in the month of March 2024. We had followed up the demands in manifesto with various political and social leaders till the general elections are held.
- For every general election of Parliament and Tamil Nadu state assembly MNI prepare the Peoples health manifesto in line with the national and state specific issues. For the 2024 general election MNI collected demands through district MNI meetings and District health assemblies and released it in a meeting on 03rd April in Chennai. The demands were shared with print and visual media for more reach.
- **Jan Swasthya Abhiyan (JSA)** – The National Coordination Committee (NCC) of JSA met on 24–25 August 2024 at Nagpur. The meeting brought together 54 participants from 17 states and 18 national networks, representing a wide spectrum of organisations, activists, and health rights advocates. The gathering opened with state-level and network reports, where members highlighted the wide range of activities undertaken over the past year, from grassroots health campaigns to policy advocacy. A major focus of the discussions was on organisational strengthening. The two-day deliberation ended with a collective spirit of unity and renewal, acknowledging the contributions of senior members while entrusting a new leadership with the responsibility of steering JSA forward. As the organisation prepares to mark its 25th anniversary, the meeting reaffirmed JSA's commitment to building a strong, inclusive, and people-driven health movement in India.
- Meetings with local NGOs and organisations – Madhya Pradesh Samaj Seva Sanstha (MPSS), Antara and Yumetta.
- Capacity building and training of field staff of SPARC in Mumbai – a three day workshop which covered the basics of nutrition and malnutrition.
- **Medico Friend Circle (MFC)** – SOCHARA was one of the hosts of the 51st Annual Meet of the MFC in Bhopal in February 2025. The theme of the meet was 'From Wayanad to Bhopal: Climate Change, Disasters and Health.' There were 218 participants from 50 organisations all over India, including activists, students, academics, grassroot level workers and survivors of the Bhopal gas accident.

The meeting confirmed that environment and health are inseparable, highlighted the centrality of survivor voices, and emphasized the importance of community-led and justice-oriented public health responses to the twin crises of climate change and industrial disasters.

- **Fellows' Collective** is a network of Fellows and team mentors that helps members stay connected. A WhatsApp group was created on 24 January 2015, where members share information on public health, meetings, workshops, vacancy announcements, events, personal updates, news, politics, programmes, schemes, topics etc. Health education and IEC materials are also shared regularly. This year, the network expanded from Madhya Pradesh to include Fellows from other Hindi-speaking regions. Some online meetings were also conducted to strengthen connections. Fellows' Collective was started as a space for fellows to introduce themselves and explore ways of staying connected. In addition, meetings were held with Fellows to discuss coordination and future activities, which helped in building stronger collaboration among members.

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

Community Health Library and Information Centre (CLIC) report

CLIC has a huge collection on community health and public health related information and also NGOs developmental work. It has been built over a period of 40 years to help SOCHARA activities and other partners who are involved in social work and health education. It has taken a huge task to digitize its information from April 2023 to disseminate its information online. It has been helping to build a Library and Information Centre in its branches – CEU, Chennai; CPHE, Bhopal and C-WASH, Vijayawada.

132 books were received in CLIC last year. As of 31st March 2025, the collection in CLIC as follow:

Sl. No.	Particular	Numbers
1	Books	17179
2	Journals/Magazines	15
3	Newsletters	16
4	Posters	1325
5	Videos	534

From April 2023, in collaboration with Sanchi Foundation we have scanned 4793 books scanned and uploaded online

- https://archive.org/details/ServantsOfKnowledge?query=sochara*&sort=-adddate&tab=collection and 3451 books scanned for our in-house use. In SOCHARA, we scanned 2788 (books, reports, resource files, slides and OHPs) and uploaded online - <https://archives.sochara.org/s/communityhealth/item>

Eleven issues of Health Round-up were published last year and sent to SOCHARA friends

and partners via Google group – socharacommunications@gmail.com. It is a selected article on health related from the journals/magazines/newspapers last month in CLIC. It helps readers to get information online or they can write to us for hardcopy.

As per Dr. D K Srinivasa's invitation and on SOCHARA President – Dr. Pruthvish's request Dr. Akshay and Mr. Mahadeva Swamy visited Dr. D.K.Srinivasa's house to select books/reports/papers for SOCHARA and Sankara Cancer Hospital. Dr. Pruthvish took the lead in selecting books for SOCHARA and Sankara Cancer Hospital. Dr. Srinivasa wanted to give his materials to where those can be utilized utmost. This collection was on Medical Education. We received books as a donation from others also – Dr. Malavika Kapur, Dr. Ravi D'Souza, Ms. Lavanya Devdas, Dr. Eddie Premdas. Dr. Sr. Aquinas, and NGO – Alternative Law Forum.

Posters displayed and books kept for sale and free distribution during the Community Health Change-makers Confluence (CHCC) from 9th December to 13th December 2024 for MPH participants, SOPHEA – SOCHARA programme at SOCHARA and helped SOPHEA team in collecting information for the programme.



Digital Archives Project (DAP) Report

The Digital Archives Project has conceptually evolved over this year into a larger and more ambitious idea of digital humanities and the name “SUDHA” was coined by Dr John Clarence (standing for SOCHARA's Unit of Digital Humanities and Archives). SUDHA conceptually builds on SJ-MAP (Silver Jubilee Museum Archives Project) and takes the Health-for-All Learning Center to the new and exciting realm of extensive learning through the internet.

The Digital Archives Project has become fully operational with a strong partnership developed with Sanchi Foundation through Omshivaprakash H L. A pipeline for digitising resources has been operationalised. We also have in-house capacity built at the Bengaluru office with two operational scanning and digitisation devices.

Progress and process of digitization

The digitization process includes a) cataloguing/metadata creation b) scanning c) OCR/indexing d) storage and retrieval. The exact process followed varies depending on the material.

In CLIC, Mahadeva Swamy has maintained an extensive catalogue of books in a spreadsheet format for years. When our partners at Sanchi foundation scan a book, they use the metadata from this sheet to annotate the item. Optical character recognition and further storage and retrieval are facilitated by the platform of archive.org

On the other hand resource files, spiral bound materials, and other such resources not accessioned in CLIC are first scanned by Vijay Kumar and metadata is captured by him when the item is being uploaded to archives.sochara.org. The OCR is done by the scanning units automatically and the storage and retrieval is on the Omeka S software deployed by SOCHARA.

Other items like OHP sheets and microslides have to be catalogued carefully and digitised with their own process. These are done in a workshop format with Sanchi foundation.

Total number of items digitised and available in public domain on archive.org	1756
Total number of items digitised and available in public domain on archives.sochara.org	1469

Under John Clarence's leadership the OHP collections and microslides collections have been catalogued extensively and awaiting digitization. John is also working closely with Ravi on the HFA archives and with partners at St John's archives. Vijay Kumar has been concentrating on in-house digitization of resource files, spiral bound books, and other resources under the guidance of Mahadevaswamy. Mahadevaswamy also handles the partnership with Sanchi foundation and ensures the smooth and continuous operation of digitization. Akshay provides the technical leadership and maintenance of software infrastructure.

On this foundation, various volunteers are able to curate and organize information into digital learning pathways and digital learning experiences for the consumption of a large pool of potential community health champions.

Various people have volunteered their time with the digital archives project over this time, including Rajeev BR, Arjun Cherian Kovoov (APU), Nitin S (APU), Roshan Joseph, Vaishnavi C, Priyanka Kalliath, Shreyas Patil, Ajay Anand S, Surya Ravi. An online group desirous of contributing to the effort has been formed and includes contributions from Vaishnavi Mangal, Pavani P, Randall Sequeira, Akshay GN, Hrishikesh Barman, Gayatri Sharma, Judah Pereira, and Mathivanan S. A couple of people from PES Engineering college expressed interest in doing internship, but failed to get onboarded.

Projects completed

- On June 13, a team from SOCHARA visited the Archives at NCBS, and had discussion about archiving with Venkat Srinivasan who is an archivist at NCBS.
- On July 11, Padmini Ray Murray, the founder of Design Beku and a digital humanities scholar, had an interaction with the team at SOCHARA and started working together on digital technologies.
- On July 19, Carl Malamud, an American technologist, author, and public domain advocate, known for his foundation Public.Resource.Org, visited the archives along with Omshivaprakash H L, co-founder of Sanchi Foundation. They heartily extended their full support towards the digital archives project.
- On September 13, a digitization workshop was held at the Sanchi foundation office. A collection of 100 microslides were digitised during this workshop. The feasibility of digitising audio cassettes were evaluated. All the digitization machines at the office were studied and explored.
- On September 20, Vijay Kumar joined as a team member in SOCHARA towards digitising resources.
- On October 18, John did an onboarding workshop for Ruth, Precilla, Surya, and Shilpa.

Towards the end of October Akshay worked with Indic Archive Foundation towards digitization of a unique 4-language dictionary in Malayalam.

- After evaluating Koha and Senayan Library Management System (SLiMS), Koha has been chosen as the library management system for cataloguing and tracking of CLIC. This is being hosted at clic.sochara.org. After evaluating dSPACE and Omeka S, Omeka S has been chosen as the in-house archive management system. It is hosted at archives.sochara.org.
- The mfc collection was taken up as a pilot project. Various learnings from this collection have guided the formation of standard operating procedures for the digital archives project. The mfc collection was finalized by Rajeev and Akshay. This was presented in the 50th year celebration of mfc at Sewagram in February 2024. QR codes allowed people to visit the digital version of the exhibits.



- Several more dimensions of mfc's work exist (Medical education, Bhopal gas disaster response, etc). These are waiting for volunteers to help in curating them for wider circulation.
- The whole collection of Socialist Health Review & Radical Journal of Health has been made available online. This was possible through the combined effort of CEHAT (who sent us their bound volumes) and HEaL institute who also digitised volumes. Further discussion with CEHAT is ongoing for collaboration on digitising their entire collection.

- The website for Sarvatrika Arogya Andolana - Karnataka was set up in Nov 2023 at saakarnataka.org by using WordPress based stack by our team.
- In November, a proposal was submitted to India Health Fund - Digital Innovations To Address Gaps at Primary Health Care Level collaborating with the team at Ekta Niketan on Remote TB management. This proposal did not get funded.
- In December, a proposal was submitted to Grand Challenges India in the CFP for a responsible approach to the use of AI and specifically Large Language Models (LLMs) in LMICs. A community health chatbot was proposed. This proposal did not get funded either.
- The video CDs of People's Health Assembly - II available at SOCHARA was digitized and uploaded to YouTube in preparation for PHA-V. This can be viewed on [SOCHARA SIMS Youtube Channel](#). A workflow based on open-source tools were developed for this archival process.
- SOCHARA website was migrated from the old custom PHP codebase to a modern website stack built on WordPress. This allows any staff to update the website. The website will be an entry point for the archives, focusing on telling a narrative that is centered around SOCHARA as an organization.
- Dr Ajay Anand S volunteered from December till March to migrate content to the new website platform.
- On December 18, 2023 a roundtable discussion on unwanted hysterectomies was conducted in Bangalore. The team enabled digital/hybrid conduct of this event and the archive of the event is [available online](#). Networked with Dr Balu of Association of Public Health Technologists during this event and popularized SOCHARA archives in APT circles.
- CHLP Stories - an interview series with alumni of SOPHEA - was finalized and [uploaded to YouTube](#). This serves as a reference for new fellows in community health.
- For the new year, Gayatri Sharma made a creative video that captures the values of community health. This has also been used in learning sessions afterwards.
- In January, the LMS was migrated to a new server cutting costs of running the server. A bespoke solution was devised for adding transcripts in various Indian languages to the videos on the LMS. This involves uploading videos to YouTube and using the transcripts generated from YouTube to display on the LMS (in Vimeo). The LMS was also upgraded to version 4 allowing new features.
- In January, the CHLP module on appropriate technology in health was facilitated. In March, the MPH-CH module on appropriate technology in health was facilitated. This module was expanded with new content related to Ayushman Bharat Digital Mission and digital skills for public health.
- From October '23 to Feb '24 Dr Priyanka Kalliath volunteered with the team to work on curating a archival collection related to preparedness for disaster response. [This curation is available on SOCHARA website](#). Priyanka's engagement formed the template for future curators to engage on a short term basis to build niche/specific collections within the archives.

Our team worked with St John's Medical College and helped in the launch of "Spirit of St John's" Website and also the institutional archive of SJMC.

Ongoing projects

GLAMWW volunteer Shreyas Patil has started a transcription project to get the interview of Ravi Narayan on Malur story into a blog post.

With DifiNative Technologies Private Limited a community health AI chatbot is being built. This project started in January 2024. This chatbot is trained on the content uploaded to archives and is envisioned to answer questions related to those. Akshay is mentoring two interns (Aparna and Deepika) hosted at DifiNative to develop this. A retrieval augmented generation (RAG) technique is being used.

With St. John's Medical College, the Ross Institute Occupational Health Archives is being built by our team to support a project by Dhruv Kasturi, a researcher in the Dept. of History & Humanities. This occupational health unit was the inspiration for further work in SOCHARA on agricultural medicine, pesticides, vector borne diseases and finally environmental health and ecology. We are trying to find volunteers to consider curating archives of our work and collection in these themes.

Through the learnings, partnerships, and further experiments, we look forward to a fruitful future of an extensive, online learning strategy for community health.

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:

A. Learning initiatives and placements

B. Learning facilitation sessions and interactions :

Journal Club

C. Participation in Seminars, Panels and Meetings:

D. Solidarity support to other organisations

Objective VII: *Networking and Solidarity with Civil Society organizations*

Hosting Jan Swasthya Abhiyan (JSA) national secretariat: As a national resource centre SOCHARA continued its support to health networks and movements in the country. Due to the important role played by the health networks SOCHARA extended its support to JSA. We are hosting the JSA national secretariat since mid-2023. During this reporting period SOCHARA as coordinator of the secretariat has facilitated the following activities. SOCHARA primarily involved in coordinating various decision-making bodies of JSA including its secretariat, National coconvenors group, National Coordination committee (NCC) and 6 thematic groups including public health system strengthening, regulation of private sector, drugs, health data digitalisation, social determination etc.,

- We have facilitated long process of selection and participation of 10 Indian delegates in the 5th International Peoples Health Assembly held in Mar del Plato, Argentina from 7th April to 11th April 2024 in which more than 600 activists took part.
- We convened and facilitated four national coordination committee meetings of JSA, an physical meeting in Nagpur on 24th and 25th of August in which 18 national networks and 17 states presented and decided to launch national level campaign on Right to health care.
- We convened and facilitated an online NCC meeting on 26th April to share and adopt the PHA5 charter.
- On 14th June we have conducted an online NCC meeting to discuss the thematic group agenda and program along with discussion on legal case filed by JSA on establishing patients' rights.
- We have conducted at least 10 national co-conveners and more than 15 national secretariat meetings in the period April 2024- March 2025.
- A webinar on looking back and moving forward – role of Health movements in India at current context was organised on 15th December in which founders, senior members of JSA along with current active members of more than 100 activists participated.
- SOCHARA is part of two thematic groups viz., public health system strengthening and private sector regulation, patients' rights. We contributed to both thematic groups in the reporting period via drafting note, conducting meeting etc.,
- On 01st January 2025 JSA secretariat and NAPM national leaders had joint meeting on strengthening tie up between both institutions.
- An online meeting was also convened on the 04th February 2025 to decide series of activities on commemoration of 25th year of JSA. NCC members discussed action including State level meetings, capacity building for JSA activists and national level gathering at the end of the year.

During the reporting period we have conducted various meetings among MNI members at various levels including districts, regional and state level meetings in order to strengthen the movement and build people campaign on Right to Health in Tamil Nadu. Few major meetings are.,

- On 4th and 6th May 2024 we convened MNI volunteers meeting for south Chennai.
- On 21-05-2024, we have convened an online MNI core committee meeting to discuss social media strategies.
- On 27-06-2024, MNI volunteers meeting of Dharmapuri district held and get orientation on newly developed health and wellness centres. As a followup the team visited to few centres in the districts in the following months.
- On 2-7-2024, we convened MNI Regional meeting at Thirupattur covering 6 districts including Vellore, Tirupattur, Tiruvannamalai, Dharmapuri, Krishnagiri and Viluppuram.
- On 10-07-2024, we have convened MNI Regional meeting at Thanjavur covering 5 districts including Tiruchy, Perambalur, Ariyalur, Tanjore and Pudukottai. These regional meetings are aimed at developing localised actions by the districts.
- 17-07-2024, we convened a State level extended steering committee meeting on Right to Health campaign interim planning meeting in Salem.
- On 7-1-2025, we have convened a State level MNI meeting in Trichy to facilitate 25th year of MNI through strengthening campaign in Tamil Nadu.
- We have conducted various district MNI meetings including Thiruvannamalai on 08th, Dharmapuri on 09th and Krishnagiri on 10th January 2025.

Memberships

1. Ameerkhan and Thelma Narayan are members of part of the Tamil Nadu Government's state working group for 'Health assemblies in Tamil Nadu'
2. SOCHARA is continuing part of the national coordinating committee of the Jan Swasthya Abhiyan and also one of the hosting organisations of the national secretariat. Currently Ameerkhan and Nidhi Sukhla representing SOCHARA.
3. Ameerkhan is one of the National Coconvenors of JSA.
4. CEU is hosting the secretariat of MNI Tamil Nadu and Suresh is part of the steering group of MNI.
5. Ameerkhan Continuing as general body member of the Rural Women Social Education Centre (RUWSEC) Tamil Nadu.
6. Amerkhan and Suresh are members of RUWSEC-Scientific Ethics Committee.
7. Ameerkhan is one of the trustees of Anusandhan trust, Mumbai
8. Ameerkhan is mentoring DHWANI foundation on women workers rights in Tamil Nadu.

Major management and admin related involvements

- One of the team member has attended all the EC meetings of SOCHARA.
- One of the team members has attended all the Finance and Management Committee meetings of SOCHARA.
- One of the team members is a member of Project Management Unit of SOCHARA and attended all the meetings of PMU.
- Both the team members attended most of the weekly team meetings of the organisation.

- Both the team members are mentors of CHLP program of SOCHARA and mentor the fellows of the program.
- One of the team members is a co-convenor of the organisation and fulfilling its own responsibilities including various activities to run the organisations, discussion with funders and part of many committees of the organisation.
- Both the team members attended Introduction meeting with Prafulla on 20th and 21st November, Chennai.
- SOCHARA – CEU team Successfully wrote proposal for Community Action for Health work in Tamil Nadu to KZE during the first and second half of the year and secured the project.
- SOCHARA CEU team Successfully wrote a joint project on researching Community Action for Health initiatives in India with specific reference to Tamil Nadu. This is along with George Institute of global Health.

Strengthening JSA National Secretariat:

Solidarity through membership in committees/governance of other groups

Memberships

- 1) Ameerkhan and Thelma Narayan are members of part of the Tamil Nadu Government's state working group for 'Health assemblies in Tamil Nadu.
- 2) Dr. Thelma continues to be the Commissioner in the Lancet Citizen's Commission on Reimagining India's Health System.
- 3) SOCHARA is continuing part of the national coordinating committee of the Jan Swasthya Abhiyan and also one of the hosting organisations of the national secretariat. Currently Ameerkhan and Nidhi Sukhla representing SOCHARA.
- 4) Ameerkhan is one of the National Coconvenors of JSA.
- 5) CEU is hosting the secretariat of MNI Tamil Nadu and Suresh is part of the steering group of MNI.

Human Resources

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 supported the activities during this reporting period.

TECHNICAL TEAM -

Ms. Prafulla. S	:	Secretary and Coordinator
Dr. Thelma Narayan	:	Director (Academics) – SOCHARA-SOPHEA
Dr. Ravi Narayan	:	Senior Consultant
Dr. Ravi D’Souza	:	Senior Consultant and Co-Coordinator, MP-CPHE
Mr. Ameer Khan	:	Co-Coordinator-SOCHARA, Training & Research Associate and Coordinator CEU, Tamil Nadu.
Mr. Prahlad I.M	:	Co-Coordinator and Training and Research Associate
Ms. Nidhi Shukla	:	Training and Research Assistant
Mr. Dharendra Arya	:	Training and Research Associate
Mr. Suresh. D	:	Communication Officer and SIMS Manager
Mr. Azam Khan	:	Training and Research Assistant
Ms. Janelle Fernandes	:	Associate Director – CHLP
Ms. Ranjitha L	:	Programme Coordinator- CHLP
Dr. Karun Nair	:	Training & Research Assistant – CHLP
Mr. Alfred Raju	:	Project Manager (WASH)
Ms. Shabana. M	:	Training and Research Assistant (WASH)
Mr. H.R. Mahadeva Swamy	:	Information Officer
Ms. Jyothi	:	Program Assistant
Ms. Prema	:	Field Coordinator
Ms. Rajani	:	Field Coordinator
Ms. Rohini Rathakrishnan	:	Training and Research Assistant (WASH-Chennai)
Mr. Mathivanan	:	Training and Research Assistant (WASH-Chennai)
Mr. Kudiyaarasu	:	Program Assistant (WASH-Chennai)
Mr. Jayaprakash Daniel	:	Training & Research Assistant (WASH-Chennai)
Mr. Sesatti Chandrasekhar	:	Programme Manager (WASH Vijayawada)
Mr. Uday Kiran Pothuraju	:	Training & Research Assistant (WASH Vijayawada)
Ms. Ms.Julapalli Vineela	:	Training & Research Assistant (WASH Vijayawada)
Nutrition workers, Madhya Pradesh		
Ms. Jyoti		
Ms. Benibai		
Ms. Sunita		
Ms. Rukmani Ahirwar		
Ms. Neha		
Ms. Rina		
Ms. Sevanti		
Ms. Chanda Sen		
Ms. Veer Singh		
Ms. Sushila		

Ms. Rabita		
Ms. Pinki		
Ms. Puja		
Ms. Roshani		
Ms. Gayatri		
Ms. Seema Dhurve		
Ms. Mamta Yadav		
Ms. Anita Dhurve		
Ms. Sudha		

ADMINISTRATIVE TEAM – (Bengaluru - HQ)

1. Mr. V.N. Nagaraja Rao – Administrative Officer
2. Mr. Mathew Alex: Accounts Officer
3. Ms. Maria Dorothy Stella : Office Supervisor
4. Ms. Precilla Lewis – Accounts Assistant

SOCHARA has additional support staff in Bengaluru.

1. Mr. M.S. Joseph – Office Assistant, SOCHARA Bangalore
2. Mr. Tulsi Chetri – Office Assistant, SOCHARA Bangalore
3. Ms. Vijaya – Bangalore
4. Ms. Sangeetha - Bhopal

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

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

- The Executive Committee met five (5) times during this year - 8-8-2024; 13-09-2024; 04-10-2024; 08-11-2024 and 11-2-2025.
- The Finance & Management Committee (FMC) met six (6) times – 23-04-2024; 08-08-2024; 10-10-2024; 14-11-2024; 10-12-2024 and 22-01-2025.

Executive Committee

- | | | | |
|----|-----------------------|---|-----------------------------|
| 1. | Dr. Pruthvish. S | - | President |
| 2. | Dr. Denis Xavier | - | Vice President |
| 3. | Dr. Maya Mascarenhas | - | Treasurer (till 20-9-2024) |
| 4. | Ms. Prafulla S | - | Secretary |
| 5. | Dr. Ganthimathi.J | - | Member |
| 6. | Dr. Susanta Ghosh | - | Member |
| 7. | Dr. Adithya Pradyumna | - | Member (till 19-09-2024) |
| 8. | Dr. Adithya Pradyumna | - | Treasurer (from 20-09-2024) |
| 9. | Dr. A S G R Rahul | - | Member (from 20-09-2024) |

Finance & Management Committee (FMC)

1. Mr. As Mohammad – Chair (till 20-09-2024)
2. Dr. Maya Mascarenhas – Member (till 20-09-2024)
3. Dr. Maya Mascarenhas – Chair (from 21-09-2024)
4. Ms. Prafulla S – Member

General Body Members

1.	Dr. Ravi Narayan (till 21-09-2024)	2.	Dr. Thelma Narayan
3.	Dr. P. Chandra	4.	Dr. Mohan Isaac
5.	Ms. Valli Seshan	6.	Mr. Sam Joseph
7.	Mr. Abhijit Sengupta, IAS (Retd.)	8.	Dr. Mani Kalliath
9.	Dr. Sunil Kaul	10.	Mr. Gurumoorthy. M
11.	Dr. H. Sudarshan	12.	Mr. K. Gopinathan
13.	Mr. As Mohammad	14.	Dr. M.K. Vasundhra
15.	Dr. N. Devadasan	16.	Dr. Ravi D’Souza
17.	Dr. Edward Premdas Pinto	18.	Dr. Anand Zachariah
19.	Dr. Neela Patel	20.	Rev. Sr. Aquinas Edassery
21.	Prof. Shanmuga Velayudhyan	22.	Dr. Arvind Kasturi
23.	Dr. K. Ravi Kumar	24.	Dr. Kishore Murthy
25.	Dr. Ramani Atkuri	26.	Ms. Anjali Noronha
27.	Mr. Prasanna Saligram	28.	Dr. Lalit Narayan
29.	Mr. Ameer Khan	30.	Dr. Priyadarsh Ture
31.	Mr. Prahlad I.M.	32.	Dr. Muraleedharan V.R

Honorary Members

1. Rev. Fr. John Vattamattam – Honorary Member
2. Dr. D.K. Srinivasa- Honorary Member
3. Mr. A. Arumugham – Honorary Member.
4. Dr. Ravi Narayan – Honorary Member (from 22-09-2024)

: : Our partners : :

Thank you

MISEREOR
● IHR HILFSWERK

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**RESTLESS
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Samhita
 **CGF**

Acknowledgements

We thank all our partners, network organisations and state Government machinery

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