

Annual Report

2015-16



Centre for Health and Social Justice

Centre for Health and Social Justice

11th Annual Report
2015-2016



Annual Report adopted by CHSJ at the 22nd Board of Trustees Meeting held on 2nd September, 2016.

Centre for Health and Social Justice

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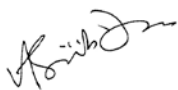
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EXECUTIVE SUMMARY

This year CHSJ completed its tenth year and started on its eleventh. It was set up in 2005 by a group of development activists who were keen to establish an organisation which promoted health rights of vulnerable communities. A small two person team began the work by trying to build critical resonance among civil society actors to various health sector reforms that were being rolled out across the country. This initiative later took root as the community monitoring approach and was adopted within the National Rural Health Mission. The small scale studies conducted by CHSJ and its partners provided critical feedback to the policy processes around health. Subsequently, we also built synergies with other practitioners across the world and today CHSJ is among the leading organisations in the world strengthening participatory health governance. CHSJ was asked to host the Global Secretariat of COPASAH (Community of Practitioners on Accountability and Social Action in Health) in recognition of its expertise in this field. Similarly, the work with men on gender justice that CHSJ had started in a small way in its early years has become the seed of a much larger collaborative network on this issue across the world. CHSJ was selected by MenEngage Alliance to host the 2nd MenEngage Global Symposium in 2014, and subsequently elected as the Co Chair of this global network. Thus the work of CHSJ today is not only to act as a bridge between community aspirations for social change and the public policy process in India, it is also linking communities of practice across states within India and sharing experiences with other countries of the Global South to influence processes at the global level. Using both face to face and Internet based communication technologies, CHSJ has been strengthening social justice approaches through a process of bottom up sharing, learning and solidarity, which we think is necessary in a world which is otherwise inter-connected in so many ways.

Promoting social justice continues to remain at the core of CHSJ's work. We have been trying to promote this through multiple strategies. At one level we are stimulating 'state' action through strengthening the processes of evidence based advocacy primarily in the field of health. At the same time we are actively engaged in solidarity and collective action with other civil society organisations. Finally we at CHSJ are also trying to stimulate social justice by engaging with men; building greater sensitivity to gender and social inequity and promoting personal and collective action for change. This year the work of CHSJ was consolidated under two broad themes – Men and Gender Equality and Health Governance and Accountability. Violence against women and gender discrimination especially with regard to women's sexual and reproductive health and rights continued to be the key focus of our work with men. Health rights of marginalised communities, strengthening of bottom up accountability processes and sexual and reproductive health and rights were the key areas of intervention in the Health Governance and Accountability theme. As before CHSJ continued to work with partners in different states, strengthening their capacities as well as facilitating collective action. In the last couple of years CHSJ has also strengthened its work on Men and Gender Justice in Delhi city, and today it is not only a national organization which is headquartered in the national capital but very much an organization working in Delhi as well.

On the occasion of our 10th Anniversary we organized an Invitational Round Table on the topic of 'Role and Sustainability of Indigenous Human Rights Focused CSOs in Times of SDGs'. This event brought together many leading lights of the civil society sector in India to debate the role and relevance of civil society for bringing about social justice. The deliberations dwelled on contemporary challenges and opportunities and also threw up many new ideas. We also commissioned a governance review of CHSJ by a well-known OD specialist and it is expected that the ideas generated through the round table and the review will help us craft a relevant role for CHSJ in future.



Abhijit Das

Managing Trustee and Director

ACKNOWLEDGEMENTS

A journey of more than ten years would not be possible without the support and cooperation; lessons, advice and suggestions from a myriad of advisors, friends and well-wishers. CHSJ expresses its deepest gratitude to all those who made this journey possible. We thank all our partners, colleagues, co-travellers and advisors for working with us, for showing us the way, for staying with us in good times and the not so good. We wish to thank the numerous women and men from marginalized communities who allowed us into their lives and shared their struggles, for us to learn and to take inspiration. The consolidation and growth of the work of Centre for Health and Social Justice (CHSJ) is a testimony to your support.



Centre for Health and Social Justice

ORGANISATIONAL PROFILE

Centre for Health and Social Justice (CHSJ) is a civil society institution working on issues related to health and social justice. CHSJ seeks to strengthen accountability of public health systems and health governance through research, resource support and advocacy. CHSJ also seeks to develop ways through which men can engage in gender equality and social justice. It is a registered charitable trust headquartered in New Delhi.

MISSION

To support the creation of equitable, gender-just and accountable health systems in India where:

- Mechanisms are established for identifying rights violations inclusive of those based on gender, caste, and race-and for identifying denial of quality services at all levels;
- Citizens/citizen groups, especially the marginalised, are part of planning and feedback mechanisms that are operational (they address rights violations and denial of quality services for public health programmes at all levels); and
- State/public and social accountability mechanisms and processes are developed and are in use.

STRATEGIC GOALS

In order to fulfill its Mission CHSJ's operational strategy includes these four strategic pillars

- Create a shared understanding- backed by rigorous

evidence- among concerned stakeholders (the affected and citizens' groups) on critical issues related to health.

- Enable citizens' groups to engage with the state and among themselves to improve accountability.
- Establish mechanisms and develop capacities within the system to engage with the community for effective and accountable service delivery.
- Develop and share methodologies for involving men as responsible individuals and citizens to ensure gender justice.

CHSJ's WORK DURING THE YEAR

This year the work of CHSJ was operationally consolidated into two thematic and two strategic areas. In addition to these approaches, CHSJ also consolidated its work through a new approach it calls "CHSJ Global Connect" which is aimed at strengthening the work around social justice through a bottom-up approach which links community reality in India with global policy and practice. Details of CHSJ's activities during the year are given below.

Theme: Men and Gender Equality

CHSJ contributed as an important resource organization as many groups started to recognize the importance of working with men in the quest for bringing about gender equality. CHSJ continued its innovative learning experiments with men and boys in different states. It also promoted learning and sharing as it developed resource materials from the discussions of the 2nd MenEngage Global Symposium hosted earlier New Delhi and these were translated into different languages and made freely available.

COMMUNITY BASED INTERVENTIONS WITH MEN

Enabling Men As Responsible Partners And Caring Father: Working With Men And Boys For Gender Equality And Securing Child Rights In Jharkhand

With the support of FEM Jharkhand network, CHSJ consolidated its work in Jharkhand to mobilise men to become more supportive partners and caring partners. This project builds upon CHSJ's past work in Jharkhand with the 'Fathercare Campaign' which sought to address the role of men in 'care work' especially vis a vis children in the household, as well as the 'Samjdar Jodidar' project in Maharashtra which enabled CHSJ to work closely with men to foster transformative change. This project envisages a field intervention that seeks to systematically engage men in communities to recognize

and reflect on their relationships within the family, make personal changes and affect community social norms vis a vis gender equality and children's rights. At another level it seeks to strengthen the network of organizations working on men and masculinities in Jharkhand, and work with institutions particularly educational institutions and the media, for making more visible women's and child rights issues, with a focus on men's accountability towards them. In the first year of this project CHSJ conducted an extensive review process to select its project partners, and Chhotanagpur Sanskritik Sangh (CCS) in Gumla, Srijan Foundation in Ranchi and Sahayogini in Bokaro were selected.

Working With Adolescents And Young Men For Introducing New Gender Norms In Rural Rajasthan

CHSJ had been working with local partners, Manjari Sansthan and Vikalp Sansthan in Bundi and Udaipur districts to address gender based discrimination among adolescent boys and youth. As a result of this work adolescent boys and young men have started discussions in their family and community on gender based discrimination, equal opportunity for girls and boys, issues of early marriage and sexualities. Communities are raising their voice on issues like mobility of girls and women, education of girls, gender based work division in the family and home.

This year the work was supplemented by a mobile phone (Interactive Voice Response System- IVRS) based educational curriculum which allowed CHSJ to reach out to adolescent boys and girls in Nainwa Block of Bundi district. This intervention, called Kishor Varta consists of a series of original audio stories in Hindi around body literacy, gender discrimination, masculinity, reproductive health, consent and age at marriage and so on. It has been a unique model for reaching out to adolescents and discussing issues of gender



STORY OF CHANGE

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Earlier, I used to feel ashamed about doing household work but now I am no more ashamed and I help my mother and also wash my own clothes.

An Ear for Equality

The Kishor Varta stories and group discussions have affected teenagers deeply. Satish from Nainwa block in Rajasthan's Bundi district started to contribute to household chores and stopped scolding his younger sister. He has realised his sister is his equal and not a subordinate. Bunt Kumar Bairagi of Kolaheda village says, "Earlier, I used to feel ashamed about doing household work but now I am no more ashamed and I help my mother and also wash my own clothes." Gudiya from Jajawar village called up on the Kishor Varta toll free number to say that there had been a marked improvement in the past 4-5 months in the behaviour of her brother who studies in Class 9. He now assists her in all the household work, which till now was earlier completely her responsibility. Earlier she used to wash his clothes, but now he washes them himself and brings water for the house. Gudiya said her brother has also now stopped accompanying her to her friends' houses which he said he earlier did to 'protect her.' A 16 year girl of Jajawar block who wanted to continue her studies and did not want to go to her in-laws home called up the police and administrative officers of the district and they acted quickly in the matter.

and sexual health by combining traditional techniques of story-telling with mobile phone-based digital technology. The pilot intervention has been accepted as a useful life skills training tool by school teachers and the district government which has given permission for the Kishor Varta programme to be introduced in all higher secondary schools in the district. CHSJ is currently seeking funds to expand this pilot.

Setting New Norms For Men And Boys In Maharashtra

Repositioning of Family Planning: Arogya Mitra Project: The Arogya Mitra project is being implemented through partners in 30 villages of three districts of Maharashtra. Men in these villages have started assuming a supportive role in planning families, ensuring reproductive health, new born care and accessing health care services. Workshops were held with health service providers, PRIs and village level committees formed under NRHM. Regular advocacy meetings were conducted with health officials. Regular mentorship was provided to the facilitators and Arogya Mitras for smooth functioning and documentation of the intervention.

Sustaining Male Involvement in Improving Gender Equality (Samajdar Jodidar project): The Samajdar Jodidar project had been implemented till December 2014 in 100 villages in three districts of Maharashtra. CHSJ's local partners have continued to take ahead the project's objectives even in the absence of regular interventions. In order to keep the interest of the people in the community alive, CHSJ with support from UNFPA organized an annual conference in which nearly 300 community group members, animators, mentors, facilitators, heads of organisations and activists from various organisations participated. The conference provided space to group members and animators to reflect on their journey after completion of the project and share their efforts towards social norm-change in other areas and also how they are maintaining the energy generated during the project period. The 'Samajdar Jodidar' quarterly newsletter is also being brought out to showcase the changes that are continuing even after the formal project is complete. Through its partnership with CHSJ the Hero Project of Independent Television Services (ITVS) conducted a series of film screenings cum discussions in 40 Samajdar Jodidar villages.

The project area has now emerged as a global and national learning site and a team from Institute of Development Studies, Sussex conducted a documentation visit to develop

a case study as part of the Engendering Men: Evidence on Routes to Gender Equality (EMERGE) project, titled, 'Transforming patriarchal institutions to enable women's political participation and influence: India, Maharashtra'. A two-day learning visit by partners of MenEngage South Asia comprising representatives from Nepal, Bangladesh and Sri Lanka as well as IPPF SARO was organised. ITVS also supported the production of a film by award-winning film maker Nishtha Jain on how working with men has been supporting the process of gender equality.

Empowering Adolescent Girls And Boys For Improving Reproductive And Sexual Health Through Convergence In Uttar Pradesh

With the support of the National Mission on the Empowerment of Women (NMEW) CHSJ implemented this project with groups of adolescent boys and girls in Bhadohi district of Uttar Pradesh. It was aimed at improving service delivery of government sponsored programmes and schemes and ensure adolescents' access to information. Under the project adolescents took part in discussions on issues of discrimination, GBV, child marriage, RSHR and life skills. Adolescent girls' support groups that were formed in the project area won the confidence of the girls' family members, ensuring increased mobility for them and participation in development activities. The project also reached out to PRI members, Anganwadi workers, and ASHAs and this has led to some increased accountability of service providers.

RESOURCE CENTRE ON MASCULINITIES AND GENDER JUSTICE

CHSJ has emerged as a Resource Centre on masculinities and gender justice. Resource persons from CHSJ were invited to participate in various meetings and platforms throughout the year. These included NGO platforms like a collaborative project between PRADAN and JAGORI as well as government institutions like the Lal Bahadur Shastri National Administrative Academy. The Resource Centre was developing a comprehensive set of materials derived from the 2nd MenEngage Global Symposium 2014. This process continued throughout the year and included preparing videos, briefs, synthesis and books which are being disseminated both



online as well as through hard copies. In order to facilitate access to these materials across the world as well as within India, much of this material has been translated into various languages like Hindi, Bangla, Tamil, Urdu and so on. The Resource Centre has developed a communications platform sharing research, resources and practices related to working with men on gender issues.

The material is widely disseminated in various advocacy platforms by CHSJ and its partners. It is also hosted on an online communications platform developed by the organisation comprising websites, other social media sites and online activities. The multidimensional communications platform developed by CHSJ is helping build a community for both offline and online interface and is leading to exchanging resources, learnings and mobilising for advocacy.

The Resource Centre is also supporting the mobilization and advocacy work being done within the country. It supported the production of a series of booklets on why men and boys should be interested in gender equality 'Aisa Kyon Hota Hai Mahashay' (Sir, Why is it like this) which looks at prevailing myths and misconceptions about gender. In partnership with FEM it produced a set of Position Papers on contemporary gender issues like marital rape, Section 377 of the IPC, Section 498A of the IPC and also the situation with respect to declining sex ratio. These position papers have been brought out in four languages. The Resource Centre also produced games, audio-drama and resource materials other to support community based interventions of CHSJ and its partners.

SUPPORTING A WIDER COMMUNITY OF PRACTICE

Capacity building and support to Forum to Engage Men (FEM) Network: FEM is a national network of individuals and organisations working with men and boys for achieving gender justice. CHSJ hosts the secretariat of FEM. In its role as secretariat, CHSJ supported a number of capacity building programmes for FEM members and partner networks. Trainings and workshops were supported in Uttar Pradesh, Madhya Pradesh, West Bengal, Uttarakhand and in the southern region. As a part of FEM's programme to reach out to male youth in educational institutions CHSJ supported FEM partners to reach out to over 7000 students in the states



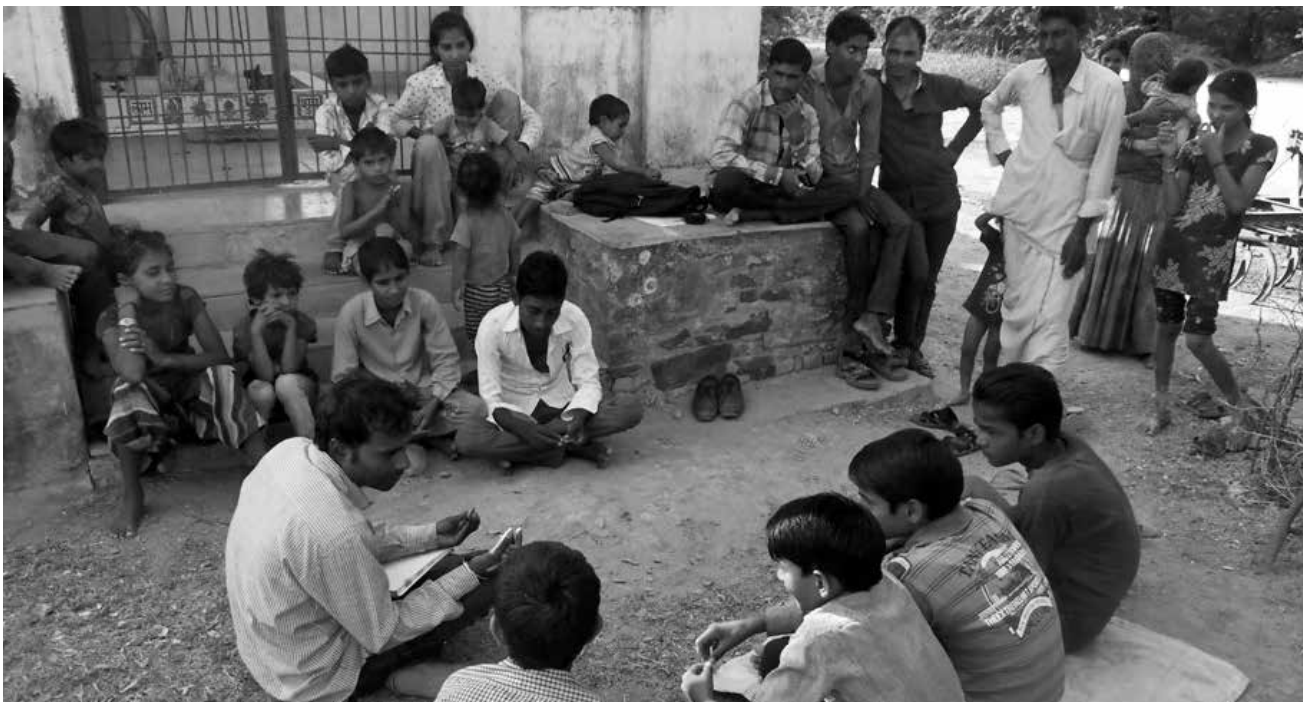
of Odisha, Madhya Pradesh, Uttar Pradesh, Uttarakhand, Tamil Nadu and Kerala.

MenEngage Delhi: MenEngage Delhi (MED) emerged as a network following the hosting of the 2nd MenEngage Global Symposium in the city. CHSJ supported the development of this network through a number of activities. A four-day workshop 'Understanding Masculinities—An analysis of rights, choices, violence and patriarchy,' was organised with 30 participants from civil society organisations, students and researchers. Programmes were held in many colleges of Delhi University as well as Jamia University highlighting the issues of aggressive masculinities and gender based violence. A two-day Gender Mela was organised by MED in collaboration with multiple partners in Delhi University's Miranda House. This led to the creation of smaller College Action Groups of young men meeting regularly to raise questions and dialogue among themselves on gender, violence and masculinities aimed at creating a wave for change.

Initiating work with men in Kolkata: In partnership with Parichiti, Kolkata, CHSJ initiated community based work in a few urban localities in the city. Working with FEM partner's a one day workshop was held with civil society organizations of the city and suburbs and this was followed up with a four day training on gender and masculinities. CHSJ also provided support to FEM partners SWAYAM and Jeevika to strengthen their intervention with men in their project areas.

South Asian Region Learning And Exchange: CHSJ is also working closely with MenEngage South Asia and during the year it collaborated with the members for the following activities:

- A two-day 'Regional Consultation on Men and SRHR: Complementing Women's Struggles' was organized in Pune, Maharashtra in August 25-26. Participants from Sri Lanka, Nepal, Bangladesh and Pakistan shared their insights and experiences. This workshop was followed by a Facilitated Learning Exchange by participants to the Samajdar Jodidar project area.



- CHSJ shared its experience on working with men on SRHR issues with MenEngage Sri Lanka and MenEngage Nepal .
- CHSJ supported FEM India partners SUTRA and SAMYAK to organize a National Conclave on working with men for gender justice.

Sharing Lessons: Acknowledging CHSJ's long work with men its Director Abhijit Das was elected Co-Chair of the MenEngage Global Alliance. Lessons from the field were shared at the 'International Meeting on Community Mobilisation To Achieve Gender Equality And Advance Health and Human Rights' in South Africa in November. CHSJ participated in the First International Conference on Gender Equality organised

in Kerala jointly by the state government and UN Women and also presented a paper. The Director of CHSJ was invited to serve on the advisory panel of the joint Promundo-SONKE-IDS study EMERGE and a case study based on CHSJ's work co-authored by IDS and CHSJ was included in the study. A second joint study by CHSJ and IDS on understanding how men in the MASVAW network continued their advocacy was also published during the year, and CHSJ was invited to share its practices at a workshop reviewing different approaches to involving men to address gender based violence. CHSJ was also invited to share its lessons around transforming interventions with men at an Asia Pacific Forum on addressing VAW hosted by UN Women.



Theme: Health Governance and Accountability

REPRODUCTIVE HEALTH, RIGHTS AND ACCOUNTABILITY

Maternal Health Rights Campaign: CHSJ facilitated the development of Maternal Health Rights Campaign (MHRC) in Madhya Pradesh and currently supports its secretariat. This year attention was given to strengthening the internal governance of the network by ensuring larger representation from districts and streamlining the work of coordination and communication. Improved communication through MHRCs blog and listserv has helped initiate a two-way process of exchange of relevant information, news and articles amongst the partners thereby creating an avenue for peer learning. The MHRC has also started a quarterly newsletter titled 'Matrutv Swaasthya Samvad' (Maternal Health News Dialogue) to establish communication with the partners and also to provide them with a platform to read and write on issues related to maternal health. MHRC has also developed relationships with other alliances and networks in the country.

In order to build capacity of MHRC members CHSJ organised two trainings on *Maternal Death Review & Documentation and on Data Collection and Documentation through Community Based Monitoring*. These trainings helped to orient the participants on issues of maternal health care, health rights violations, government health care programmes and schemes, while also equipping them with documentation skills. Using these skills MHRC partners conducted community level enquiry on the state of maternal health services in the state. Facility level documentation was conducted at sub health centres, primary health centre and the community health centres in selected areas of 14 districts to evaluate the preparedness of these facilities. They also conducted group discussions and individual interviews with women beneficiaries, observed sterilisation camps and Village Health and Nutrition days to assess the quality of care being provided to the community. Report cards were prepared for each district highlighting the gaps and key problematic areas which were used by the partners for advocacy at their local level.

Apart from the forum of public hearings, MHRC members devised other ways to seek accountability for maternal health

from the state. Using its extensive network of partners they tracked maternal health care violations and filed complaints to the National Health Mission (NHM) and the State Human Rights Commission (SHRC), demanding enquiry into the matter and seeking compensation for the aggrieved. In some cases, MHRC members also conducted independent fact finding visits and submitted reports to the NHM and NHRC.

Securing Maternal Health and Rights: CHSJ's continues to support National Alliance on Maternal Health and Human Rights (NAMHHR), of which it is a steering committee member. This year CHSJ conducted an ethnographic study on maternal health of tribal women in Rayagada district of Odisha. The report published was published in collaboration with NAMHHR. The report was released at a Policy Dialogue on Tribal Maternal Health, organized by NAMHHR in August 2015, which was attended by health department officials, parliamentarians, activists and academics. The study was also presented at a conference on "Unpacking the Ghosts of the MDGs" at the Institute of Social Studies, the Hague, Netherlands in November 2015. The study shows that even after 10 years of the Janani Suraksha Yojana, home births continue to take place in tribal areas. It also highlights the mismatch between traditional birthing practices and the formal health system. The study calls for a reorienting of maternal health services, to be responsive to the needs of tribal women, cater to their cultural needs, provide support to domiciliary deliveries, invest in building trust with the community, and preserve beneficial traditional practices. Drawing on this study and earlier NAMHHR experiences, a paper was presented as a part of a panel on new directions on evaluation at the Global Maternal Newborn Health Conference in Mexico. The Director was also invited speak at a European Commission conference on identifying new priorities and approaches to research on maternal and newborn health. The Director, who is also a member of the Core Group on Health of the National Human Rights Commission, was invited to serve as a panel member of the Western Region Public Hearing on The Right to Health organized by the Commission.

During the course of the year CHSJ also facilitated an Organizational Development process within NAMHHR, to



STORY OF CHANGE

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Women who were earlier reluctant have now started taking initiative for using family planning methods while also motivating their peers for the same.

Impact of Community Enquiry

The community based monitoring process undertaken in the 5 districts has contributed positively by creating greater awareness about the entitlements of women with respect to family planning thereby enabling them to bring issues of violation to the forefront and take action. In Pahadi block of Chitrakoot District the women raised concerns with respect to the non-issuance of the certificate post sterilization operation. A group of women along with the leadership of the partner organization met with the MOIC to get the issues resolved. Similarly, 2 cases of failed tubectomy were identified by the women, and supported to get compensation. In Naugarh block of Chandauli district, women complained against the violation of norms at the sterilisation camp and remedial actions were taken by the authorities and proper services were ensured.

Women who were earlier reluctant have now started taking initiative for using family planning methods while also motivating their peers for the same. The active participation of the women in the entire process is noteworthy as they are the ones who take the responsibility of family planning but are the least informed about their rights while availing the services. These vulnerable women are easily convinced or coerced by the healthcare workers to opt for specific kinds of family planning methods without being told about the critical information related to the method.

look back at its achievements, and challenges of sustaining the network. As a transition in leadership within the network is taking place, CHSJ will be taking on the secretariat of the network from the coming year.

Community Based Monitoring of Informed Choice and Quality of Care in Family Planning: CHSJ had started an initiative to introduce social accountability practices to address issues of quality of care and informed choice in the family planning programme last year. This year we conducted a second round of community based monitoring in five districts in Uttar Pradesh. Score cards were prepared for each district to rate on parameters like knowledge of the healthcare providers, quality of counseling and clinical services being provided, awareness in the community, presence of targets and coercion and facility preparedness amongst other things. The exercise showed that women had become increasingly aware of family planning related entitlements and were demanding range of contraceptive services from the ASHA, asking certificates, as well as compensation in case of failures. The findings of the second round of social audit were shared

with officials at the district level through public hearings, which were attended by key health officials. This also indicates the interest of providers and the system, and their willingness to engage with the community.

CHSJ has entered into a partnership with EngenderHealth to use a similar model to integrate user feedback and community perspectives into their quality assurance program. This model will be piloted in five districts in 2016-17.

Sharing Information on Reproductive Rights: CHSJ continues to facilitate exchange of information and linking grassroots reality to national policy making through the ReproHealth listserv and the fortnightly Health News Update. This year the listserv has received stories of reproductive rights violations from grassroots practitioners, as well as fostered discussion on various issues and shared updates on important developments in the reproductive health field in India such as newly published academic articles, updates on reproductive rights litigation and so on. The Reproductive Health Observatory is currently being reorganized.





STRENGTHENING GLOBAL LOCAL LINKAGES ON HEALTH ACTION AND ACCOUNTABILITY

Community of Practitioners on Accountability and Social Action in Health (COPASAH): CHSJ assumed the responsibility of Secretariat of COPASAH in addition to being the Communication Hub during the year.

Functioning as the Communication Hub of COPASAH, CHSJ facilitated the sharing of practice and lessons across regions. The hub used different internet based platforms and social media to facilitate learning exchange, share stories like through, blogs, COPASAH Communiqué (e Newsletter), Facebook, Twitter and so on. As a result there was substantial growth in membership of COPASAH, which is now at 283. Over 150 new subscribers were added to the listserv, following which there are 645 subscribers. In order to facilitate communication across regions the website incorporated a Spanish site. The Spanish website can be accessed at <http://www.copasah.net/home2.html>. The earlier issue papers and case studies were revised and printed and the COPASAH blog posts continued to be a significant medium of disseminating stories of practice this year also.

As the regional node of COPASAH, we were able to deepen and to expand the work considerably. A Hindi language listserv ComAct4Health_India was effective in activating communication among practitioners and nearly 450 practitioners from various states in India are sharing lessons and news through this group. The CHSJ communication team supported COPASAH to organize training on use of ICT methods to strengthen social accountability. This has enabled grassroots practitioners to use low-cost audio- video technology like mobile phone cameras, digital cameras and that has become increasingly available to strengthen their documentation processes towards accountability as well as knowledge production and use the evidences for negotiation of health rights.

The work of COPASAH was also represented at various global platforms such as the World Bank coordinated Global Partnership on Social Accountability, Transparency and Accountability Initiative (TAI), Institute of Development Studies (IDS), Sussex.

STORY OF CHANGE

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After sustained advocacy with use of this Photostory, the concerned municipality have taken cognizance of her application for refund of the surgery cost undertaken in a private hospital.

Photostory initiative helps to negotiate for rights of manual scavenger community

After ICT training through COPASAH we developed Photostories, documenting the neglect of health services and denial of health rights of marginalised women. The photostory of 50 year old B. Gangamma from Tumkur district was shown to the civic body authorities. Gangamma is contract worker cleaning and maintaining toilets. The Photostory showed how she is made to work without any protective gear. She was also not provided any sick leave, or financial support by the civic body authorities for a surgery for a gynecological problem and the public health service providers refused to conduct her surgery. After sustained advocacy with use of this Photostory, the concerned municipality have taken cognizance of her application for refund of the surgery cost undertaken in a private hospital. Gangamma will get the refund soon. Inspired by the success of the Photostory of Gangamma, other manual scavenging workers have come forward to undergo the medical checkups and have started negotiating for their health rights. The Local government general hospital officials have also assured that the medical treatment of manual scavenging community will be the priority now.

K B. Obalesh – Health Rights activist THAMATE, member of COPASAH.

Strategic Support Services

Research and Information Management are key support functions that allow CHSJ to strengthen its thematic work. Research allows us to understand the impact of government policy and programming as well as the ongoing process/changes that CHSJ tries to bring in through its own interventions. Information management which includes communication is the major thread that runs through our work related to empowerment, knowledge sharing and advocacy.

RESEARCH

Research is a key function to support Evidence Based Advocacy. CHSJ conducts and supports research as well builds capacity to conduct different kinds of research and documentation. During the year the research division provided support to CHSJ's projects across all themes through ongoing documentation as well as supporting communities to do participatory research. In the ongoing work with adolescents in Rajasthan, an enquiry was done using PRA methods to understand the status of gender norms like early marriage, dowry/brideprice, educational status of adolescents and work distribution at the household level. Gender mapping was conducted to identify gendered access to space. Support was also provided to the MAGE team to understand the reach and impact of its IVRS intervention through the Kishor Varta intervention.

Ongoing documentation and review is important to understand the progress of a particular project especially with respect to the anticipated theory of change. The research team has been providing support to "Repositioning Family Planning-Men Who Care" project to collect stories of change on men's involvement in pregnancy and child care and also in the changing role of men in use of contraceptives. The team also conducted a midterm review in all the three districts of Ratnagiri, Osmanabad and Solapur to understand the changes and challenges. The findings of these processes were fed back to the project management team.

In addition to providing operations research support, the team also undertook independent research on nutrition among a tribal community in Sidhi district of Madhya Pradesh. The objective of the study is to understand the nutrition status among the tribal community in Kusumi Block in Sidhi District. Data was collected on the current status of nutrition intake

among the tribals, the change in food and food practices over time especially related to pregnancy and puerperium, quality of food and nutrition services provided by the Government and the socio-cultural-policy factors affecting food security of the tribals in that region. The field work has been completed and report writing is in progress.

The research team provided ongoing support to SAHAYOG for collaborative study with NAMHR on community based maternal death review. The research team prepared papers and supported the programme team to make presentations which were shared as presentations at different national and international conferences.

Paper and Presentations

The following is a list of papers and presentations prepared by the CHSJ team during the year.

Papers and Articles

- Abhijit Das "Strengthening the Citizen's Role in Governance through Social Accountability- A short report of the Global Partners Forum 2015". COPASAH Communiqué (11), June 2015. Available at: http://www.copasah.net/uploads/1/2/6/4/12642634/copasah_communique_edition_11.pdf
- SurekhaDhaleta and Deepak Kumar "Employing ICT for Social Accountability: COPASAH South Asia Initiative". COPASAH Communiqué (11), June 2015. Available at: http://www.copasah.net/uploads/1/2/6/4/12642634/copasah_communique_edition_11.pdf
- E. Premdas Pinto "The Eclipse of State Accountability in the Global Reference List of 100 Core Indicators by World Health Organisation". COPASAH Communiqué (11), June 2015. Available at: <http://www.copasah.net/>



uploads/1/2/6/4/12642634/copasah_communique_edition_11.pdf

- SurekhaDhaleta "Strengthening Grassroots Practitioners through Contact and Distance Learning on Health System Accountability". COPASAH Communiqué (13), January 2016. Available at: http://www.copasah.net/uploads/1/2/6/4/12642634/newsletter_13.pdf
- Ajay Lal "MatrutvaSwasthyaHakdaariAviyanKaParichay" MatrutvaSwasthyaSamvad, June 2015. Available at: <https://mhrcblog.files.wordpress.com/2016/01/mhrc-newsletter-june-20151.pdf>
- Mahendra Kumar "PrasavPurvDegbhal Main Ourushon Ki Bhumika" MatrutvaSwasthyaSamvad, June 2015. Available at: <https://mhrcblog.files.wordpress.com/2016/01/mhrc-newsletter-june-20151.pdf>
- Ajay Lal "ICT- SamudayikNigraniHetuEkShasaktJariya", MatrutvaSwasthyaSamvad, September 2015. Available at: <https://mhrcblog.files.wordpress.com/2016/01/mhrc-newsletter-september-20152.pdf>
- Mahendra Kumar "PrasavPaschatDegbhal Main Purshon Ki Jimmedari", MatrutvaSwasthyaSamvad, September 2015. Available at: <https://mhrcblog.files.wordpress.com/2016/01/mhrc-newsletter-september-20152.pdf>
- Mahendra Kumar "Family Planning and Responsible Fatherhood". MatrutvaSwasthyaSamvad, December 2015. Available at: <https://mhrcblog.files.wordpress.com/2016/01/newsletter-31.pdf>
- Jerker Edström, TheaShahrokh and Satish Kumar Singh "The new 'MASVAW men': strategies, dynamics and deepening engagements. A case study of a networked approach to challenging patriarchy across institutions in Uttar Pradesh". Brief supporting Evidence Report 143, Institute of Developing Studies, August 2015

Presentations and Posters

- Contractor S, Das A, Rautaray B, YK Sandhya, "Does

one-size- fit-all?: Re-evaluating the approach to address Maternal Health of Tribal Communities in India". Presented at the 13th Development Dialogue at the Institute of Social Studies, the Hague, 4 and 5 November 2015.

- Singh Satish Kumar "Possibilities and Challenges in dealing with Masculinity: The Praxis View..." oral presentation at The First International Conference on Gender Equality, organised by the Gender Park, Department of Social Justice, Government of Kerala, 12-14 November 2015, Kerala
- Pinto, E. P. "Rays of Hope and Clouds of Despair: Experiences of petitioners on processing health care litigations in the Supreme Court of India", oral presentation at the International conference on the Supreme Court of India and Progressive Social Change, organised by the AzimPremji University, Bengaluru and the University of Chicago 12th December, 2015 at the University of Chicago Center, Delhi, India.
- Pinto, E.P. "Mobilising Men's Agency as 'duty bearers' for Maternal Health Rights", Oral presentation at the National Consultation on Community-based Interventions for promoting Maternal Health, 12th February 2016, Ahmedabad, India.
- Contractor S, Singh S, Kumar M "Engaging Men to Improve Maternal Health" Oral presentation at the International Conference on Male Involvement in Improving Women's Sexual and Reproductive Health: Evidences, Actions & Possibilities, 28th February - 2nd March, 2016. Mumbai, India.
- Das A "What Next?" A presentation in the panel on 'What can research do differently to improve the translation of results into policy and practice' at EC Meeting on 'Together for the Next Generation: Research and Innovation for Maternal and Newborn Health' held 8 December 2015 at Brussels

INFORMATION MANAGEMENT

Information management and communication have emerged as lynchpins in CHSJ's efforts to promote bottom up, participatory processes to strengthen social justice. During this year CHSJ implemented many innovative communication initiatives to engage practitioners working with marginalized and vulnerable population working in different states and countries and in different languages using multiple communication platforms like social media including WhatsApp, Facebook and Twitter; through the mobile phone using Interactive Voice Response System (IVRS) as well as sound files transferred through memory cards as well Listserv, Blogs and Websites. The use of mobile phone technology for implementing an adolescent gender and SRH project and easily accessible digital photo and video technology for documentation to support community monitoring were two innovations that were successfully tried out during the year. Through these innovations we aim to reduce the digital divide and harness the power of modern ICT to empower and for social justice.

Multiple e-platforms: The CHSJ team managed multiple

e-platforms to support the information sharing, capacity building, networking and advocacy. These included :

- COPASAH platform which included a website (copasah.net), a listserv, a blog and an e Newsletter (COPASAH Communiqué)
- Support for Reproductive and Sexual Health and Rights related work included supporting the Reproductive Health Observatory (rhobservatory.net), a listserv (ReproHealth_India) as well preparing periodic aggregates for the HealthNews Update
- eLearn-Health CBM (<http://www.copasah.org/e-learn-cbm.html>), an interactive e-resource for grassroots human rights practitioners on health in Hindi.
- For networking on men and gender equality it provided support to maintain the FEM website (femindia.net) as well as the MenEngage Delhi Facebook page
- MenEngage Delhi (menengagedelhi.net) was redesigned as the portal to host all the material prepared from the discussions during the 2nd MenEngage Global Symposium



Newsletters: CHSJ supports the sharing of grounded evidence, information, good practices from the community on issues related to men and gender equality and health governance and accountability with different groups at global, national and sub national level. The newsletters are:

- COPASAH Communiqué - This is a quarterly newsletter and a repository of case stories, articles, reports, organisational profiles from the various regions of the globe. The newsletter is published electronically.
- Matrutva Swasthya Samvad - This is a quarterly newsletter published in Hindi, focusing on issues related to maternal health in Madhya Pradesh. It encourages partners and readers to highlight case stories from the field through community-based reporting.
- Samjhdar Jodidar – This quarterly Marathi newsletter shares stories of change at the personal and community level of how men are engaging on gender issues.

Innovations in Use of ICT for better health and social justice: Two innovative uses of ICT that were experimented successfully during the year included the training of COPASAH members in the use ICT for Social Accountability and the Kishor Varta. The Information Management team had already started training grassroots practitioners on shooting photos and videos and editing the same to create powerful grounded evidence. Four regional workshops were organized to impart skills on pre-production, production and post-production for film making. The products developed by the practitioners were used during public hearings in Madhya Pradesh and Gujarat.

In the Kishor Varta pilot intervention the Information Management team prepared stories based on problems faced by adolescent boys and girls. These stories were converted into audio plays and shared through a toll free number. This intervention proved very popular among adolescents and was also considered very useful by parents and teachers, as it allowed a confidential and non-threatening manner of discussing crucial issues. It also allowed CHSJ to reach a very large number of adolescents using scarce resources. There are plans to convert these audio stories into digital interactive games/films.

Some of the Publications that were brought out during the year include the following:

- Maternal Health In Tribal Communities: A Qualitative Enquiry into Local Practices and Interactions with

the Health System in Rayagada District, Odisha”, NAMHHR 2015. Available at: http://www.chsj.org/uploads/1/0/2/1/10215849/odisha_report_final_for_web.pdf

- Series of Position Papers by FEM on contemporary gender issues. Published in Hindi and English and available at: <http://www.femindia.net/position-papers-english.html> ; <http://www.femindia.net/position-papers.html>
- A set of booklets in Hindi on gender and masculinities “Aisa kyun hai Mahashay”. Available at: <http://www.femindia.net/aisa-keyon-hai-mahasay.html>
- Resoure book for Adolescent Gender and SRH educators Kishor Varta: Gender Samanta Ebam Kishor Prajanan Swasthya Par Sahajikar Pustika, Available at: http://www.chsj.org/uploads/1/0/2/1/10215849/kishor_varta.pdf
- Series ‘Challenging Masculinities and Creating New Realities’, Synthesis Papers of Discussions from 20 Sessions of the 2nd MenEngage Global Symposium 2014. Available in Hindi, English, Bangla, Urdu, French, Spanish and Portuguese at: <http://www.menengagedilli2014.net/knowledge-products-link-page.html>
- Windows to Working with Men and Boys: Compendium of Interventions and Research from the 2nd MenEngage Global Symposium 2014 - Men and Boys for Gender Justice New Delhi. Available at: http://www.menengagedilli2014.net/uploads/2/4/5/3/24534141/windows_to_working_with_men_26-2-16.pdf
- Discussion Papers: Engaging Men and Media; Globalisation and Gender; Legal Invisibility of Other Dalits. Available at: <http://www.menengagedilli2014.net/discussion-paper.html>
- Das A, Understanding Patriarchy and Masculinities in Policy Conclave on Gender Equality and Child Rights at LBSNAA, Mussourie, 28 - 30 January 2016
- Das A, Exploring Transformative Change : Working with Men and Masculinties in India at Asia Pacific Forum on Preventing Violence Against Women : Evidence and Tools for Social Norm Change 1 – 2 December 2015 , Bangkok
- Das A, “Ensuring Equity and Human rights of Marginalised Communities in Maternal Health Programming”, at Global Maternal and Newborn Health Conference, October 18 – 21, Mexico City.
- Das A, Transformative Change: From Masculinity to Humanity? Presentation made at ‘Framing Men and Boys in Policy for Gender Equality: An EMERGE International Workshop’ at IDS, Sussex October 27 – 30, 2015

Operational Mechanisms

ORGANISATIONAL EFFECTIVENESS

The organisational development processes continued to shape CHSJ's institution policies and practice. While CHSJ's focus on capacity building continued, it took feedback from all staff members and also undertook staff appraisal. The mentorship process which has been initiated earlier to support individual growth was continued. A gender expert was engaged to provide mentorship and develop perspective on issues related feminist movement in India. A five member internal complaints committee has been constituted under the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 to enquire complaints on sexual harassment in the organization.

Child Rights activists from HAQ were invited on June 29, 2015 to orient CHSJ staffs on Juvenile Justice Act. It helped the participants to build perspective on legalities of the Juvenile Justice (Care and Protection of Children) Act 2000 and the roles and responsibilities of the Child Welfare Committee, Juvenile Justice Court and Rehabilitation Centers.

An invitational roundtable 'Role and Sustainability of Indigenous Human Rights focused CSOs in times of SDG' was organized by CHSJ on the occasion of the organization's 10th Anniversary at India International Centre, Annex on 21 March, 2016. Eminent personalities associated with the development sector participated and shared their expert thoughts and experiences of growth and future of indigenous CSOs.

Capacity Building

- Staff members participated in a five day training of trainers (TOT) workshop organised by SAHAYOG from June 14-18 at Bhimtal, Uttarakhand, on Participatory training methods.
- Staff members participated in a five day training organised by Indian Institute of Public Health from August 10-14 at New Delhi on Qualitative Research Methods and Data Analysis.
- Staff member participated in a five day youth workshop organised by Institute for Studies in Industrial Development (ISID), Peoples Health Movement (PHM) and Prayas from December 14-22 at New Delhi on Intellectual Property, Public Health and Access to Medicines and Global Congress on Intellectual Property & the Public Interest.
- Staff members participated in a five day advocacy workshop organised by SAHAYOG from December 20-24 at New Delhi on Reproductive Health and Sexual Health and Rights.
- Staff capacity building and understanding of core issues was also built through discussions during the weekly meetings.

PARTNERSHIPS

The long-term sustainability of CHSJ's initiatives is only possible through relationships, partnerships and alliances. Some key partners of CHSJ are:

International

- Community of Practitioners on Accountability and Social Action in Health (COPASAH); Institute for Development Studies, Sussex, UK; MenEngage South Asia; MenEngage Global Alliance; South Asian Network to Address Masculinities (SANAM); Uganda National Health Users/Consumers Organization (UNHCO); Association for Emancipation Solidarity and Equality of Women (ESE)

Macedonia; Transparency and Accountability International; Sonke Gender Justice, South Africa

National

- Astitva Samaj Vikas and Sanshodhan Sanstha, Maharashtra; Centre for Environment and Rural Technology, Uttar Pradesh; Chotanagpur Sanskritik Sangh, Jharkhand; Dharti Gramotthan Evam Sahbhagi Gramin Vikas Samiti, Morena, Madhya Pradesh; Engender health; Gram Sudhar Samiti, Madhya Pradesh; Grameen Punarnirman Sansthan, Uttar Pradesh; Human Rights Law Network, New Delhi; Halo Medical Foundation,



Maharashtra; Independent Television Service, New Delhi; JAGORI, New Delhi; Jeevika West Bengal; Kamdhenu, Kolkata Rishta; Maharashtra; MANJARI, Rajasthan; Mittika Delhi; Nari Samta Manch, Maharashtra; Parchiti West Bengal; PRAYAS, Uttarakhand; Prerna Bharti, Jharkhand; SAHAYOG, Uttar Pradesh; Sahayogini, Jharkhand; SAMYAK, Maharashtra; SANGAT; Sanwad, Maharashtra; Sathiya Welfare Society; Savitri Bai Phule Mahila Mandal, Maharashtra; SAHAJ, Society for Health Alternatives, Gujarat; SPARK, Jharkhand; Support for Advocacy And Training To Health Initiatives (SATHI), Maharashtra; Srijan Foundation, Jharkhand; SUTRA, Himachal Pradesh; SWAYAM West Bengal; Tarun Chetna Sansthan, Uttar Pradesh; VIKALP, Rajasthan; Yuva Gram Vikas Mandal, Maharashtra;

Networks

- Advisory Group on Community Action (AGCA), a standing committee in the NRHM, Ministry of Health and Family Welfare; CommonHealth; Forum to Engage Men (FEM); Healthwatch Forum; India Alliance for Child Rights; Jan Adhikar Manch, Bihar; Jan Swasthya Abhiyan; Mahila

Swasthya Adhikar Manch, Uttar Pradesh; Men's Action for Stopping Violence Against Women (MASVAW), Uttar Pradesh; National Alliance for Maternal Health and Human Rights (NAMHHR); National Campaign on Dalit Human Rights (NCDHR); National Coalition against Two-Child Norm and Coercive Population Policies; Wada Na Todo Abhiyan; We Men for Equality; Maternal Health Rights Campaign (MHRC), Madhya Pradesh; Medico Friend Circle (MFC); Men's Action for Equity (MAE), Madhya Pradesh; Right to Food Campaign; And many other state level organisations across India

Donors:

- American Jewish World Service (AJWS), New York; Center for the Study of Equity and Governance in Health Systems (CEGSS), Guatemala; DFID; Ford Foundation; John D. and Catherine T. MacArthur Foundation, USA; Oak Foundation, Geneva, Switzerland; Narotam Sekhsaria Foundation, Maharashtra; National Foundation of India; National Mission for Empowerment of Women (NMEW), Ministry of Women and Child Development, New Delhi; Reliance Foundation; Swiss Aid; UNFPA, India

Annexures

Annexure 1:

CHSJ Staff as on 31st March 2016

- **Abhijit Das**, Director
- **Ahmad Faraz**, Programme Associate
- **Ajay Kumar**, Finance Officer
- **Ajay Lal**, Programme Officer
- **Deepak Kumar**, Programme Associate
- **Dheeraj Giri Goswami**, Programme Associate
- **E Premdas Pinto**, Research and Advocacy Director
- **Ishu Das**, Office Assistant
- **Jagdish Lal**, Programme Officer
- **Mahendra Kumar**, Programme Manager
- **Rimjhim Jain**, Programme Manager
- **Rudrakshina Banerjee**, Programme Officer
- **Sambit Kumar Mohanty**, Programme Manager
- **Sana Contractor**, Programme Manager
- **Satish Kumar Singh**, Additional Director
- **Shakti Suresh Jamdade**, Programme Manager
- **Shreeti Shakya**, Programme Officer
- **Surekha Dhaleta**, Programme Officer
- **Sushil Kumar**, Finance Assistant
- **Tulsi Manimuthu**, Administrative Associate

Interns

- Prachi Sharma; Bidisha Das; Siddhi Sharma; Sukanya Grover; SurbhiSrivastava; Swati Agarwal;

Staff who left CHSJ during the year

- Lavanya Mehra, Nibedita Phukan, MD Dastagir Ali Azam, Taruna Pal, Raja Rabbi Hussain,

Consultant

Adil Ali; Anchita Ghatak; B M Tripathi; Chitra Gopal Krishan; DaiwshalaGiri; DevikaBiswas; Dinesh Chandra Sharma; Dhruv Visvanath; Devasish Chattarji; Durva Ghosh; Ganesh Chandra Dey; Kedar Prasad Rajak; K B Obalesha; Lavanya Devdas; Mangesh Kulkarni; Milind Chavan; Nasuriddin Haidar Khan; Prabindra Rai; Radha Khan; Rajdev Charturvedi; Ramayan Yadav; R K Sharda; Runu Chakraborty; Santosh Kanwar; Sinci Joseph; Sumit Baudh; Suridhi Sharma; Tejinder Bhogal; Shishupal Uadav; Urmila; Usha Choudhary; Vijay Kumar S.: Vinod Kumar

Annexure 2:

CHSJ Board of Trustees

Abhijit Das

Managing Trustee and Director, CHSJ, New Delhi and Clinical Assistant Professor, Department of Global Health, University of Washington, Seattle (USA)

A. R. Nanda

Former Executive Director, Population Foundation of India; Former Secretary, Family Welfare, Ministry of Health and Family Welfare, Government of India

Renu Khanna

Public Health Professional

Subhash Mendhapurkar

Development Professional

Suneeta Dhar

Gender Specialist

Usha Rai

Senior Journalist and Communication Consultant

Vijay Kumar Aruldas

Development Sector Consultant

In addition to our Trustees, we acknowledge the following persons for their contributions and technical inputs in enhancing CHSJ's work:

- Amitabh Behar; Amitrajit Saha; Anand Pawar; Anjali Sen; Enakshi Ganguly Thukral; Imrana Qadeer; Jashodhara Dasgupta; Jaya Velankar; Jerker Edström; Mira Shiva; Nandita Shah; Paul Divakar; Ramakant Rai; Ravi Verma; S Srinivasan; Sanjay Srivastava; Sanjeev Sridharan; Santosh Giri; Shib Shankar Dasgupta; Sonali Khan; Sundari Ravindran; Vrinda Grover

Annexure 3:

Distribution of CHSJ's activities and partnerships in different states

- ★ Learning and evidence project on working with men and boys in Maharashtra.
- Advocacy against forced sterilization in Uttar Pradesh.
- Consolidating the community accountability initiative for maternal health in Madhya Pradesh.
- ✂ Consolidating the Community of Practitioners in Accountability and Social Action in Health (COPASAH) as knowledge- generation and dissemination platform.
- Empowering adolescent girls and boys for improving reproductive and sexual health through convergence in Uttar Pradesh.
- # Enabling men as responsible partners and caring fathers in West Bengal and Jharkhand.
- ✂ Engaging men and boys through community mobilisation and advocacy for gender equality.
- ⚙ Enhancing male participation to improve gender equality in Maharashtra.
- ✂ Sustaining regional level advocacy and expanding agenda in masculinities and gender justice.
- ✂ Networking on men and gender equality.
- ✂ Redeveloped 'eLearn-Health CBM' an interactive e-resource on community monitoring in health.
- ☾ Repositioning family planning project, Maharashtra.
- ⚙ Social audit for quality improvement in family planning services in Uttar Pradesh.
- ✂ Support to developing a platform for sharing resources on men and gender equality.
- ✂ Support to One Billion Rising Campaign.
- ◇ Working with young men and boys for introducing new gender related social norms in Rajasthan.
- ✂ Building a communication platform and developing knowledge products on masculinity.



Annexure 4:

Financial Summary 2015-2016

Balance Sheet as on 31 March 2016

| Liabilities | Rupees | Assets | Rupees |
|---------------------------|-----------------------|-------------------------------|-----------------------|
| Corpus Fund | 5,000.00 | Fixed Assets | |
| General Fund (FC) | 1,42,917.00 | Fixed Asset (General) | 23,20,589.00 |
| General Fund (General) | 17,91,104.37 | Fixed Asset (FC) | 1,42,917.00 |
| Reserve Fund | 91,00,000.00 | | |
| Reserve Fund-Fixed Assets | 19,43,644.00 | Loan And Advances | |
| | | FCRA | (30,84,805.00) |
| | | General | 35,43,501.00 |
| Restricted Fund | | | |
| Foreign Grants unutilised | 95,58,227.62 | Current Assets | |
| Indian Grants Unutilised | 45,56,822.33 | Security Deposit | 2,02,000.00 |
| Other Programme | 35,93,774.27 | Cash & Bank Balance (FC) | 1,26,43,032.62 |
| Committed Liabilities | 1,18,055.00 | Cash & Bank Balance (General) | 1,50,42,309.97 |
| Total | 3,08,09,544.59 | Total | 3,08,09,544.59 |

Income & Expenditure

| Expenses | Rupees | Income | Rupees |
|--|--------------|--------------------------|----------------|
| General Fund | | General Fund | |
| UNFPA | 45,70,993.00 | Project Fund | 1,65,05,508.67 |
| Reliance Foundation | 53,38,194.67 | Bank Interest | 14,03,197.00 |
| WCD | 10,80,574.00 | Donation | 8,100.00 |
| NSF | 24,05,641.00 | Project Contribution | 9,82,453.00 |
| Capacity Building of PACS CSOs | 27,02,385.00 | Contribution for Vehicle | 1,78,423.00 |
| CBM in Family Planning | 83,634.00 | Interest on Tax refund | 8,915.00 |
| Social Audit for Quality Improvement in Family Planning Services | 3,24,087.00 | Other Income | 1,756.99 |
| Administrative Expenses | 1,73,542.19 | | |
| Depreciation | 2,56,563.00 | | |
| Transfer to Reserve Fund | 19,50,000.00 | | |
| Transfer to Vehicle Fund | 1,78,423.00 | | |
| Excess of Income over Expenditure | 24,316.80 | | |

| FC Fund | | FC Fund | |
|-------------------------------|-----------------------|-------------------|-----------------------|
| AJWS | 11,51,582.00 | Project Fund (FC) | 1,83,74,007.39 |
| CEGSS | 72,69,669.67 | Bank interest | 3,57,300.00 |
| DFID | 28,29,297.00 | | |
| Ford Foundation | 2,86,897.00 | | |
| IDS | 11,90,776.45 | | |
| MacArthur Foundation | 17,73,632.05 | | |
| OAK Foundation | 7,42,022.25 | | |
| SONKE Gender Justice | 30,00,053.08 | | |
| SWISSAID | 1,30,077.89 | | |
| Other Administrative Expenses | 3,57,300.00 | | |
| Total | 3,78,19,661.05 | Total | 3,78,19,661.05 |

Receipts and Payment

| Receipts | Rupees | Payment | Rupees |
|--------------------------------------|-----------------------|--|-----------------------|
| Opening Balance | | Foreign Grants Utilised | |
| Foreign Contribution (Cash & Bank) | 6,71,546.46 | AJWS | 11,51,582.00 |
| General (Cash & Bank) | 2,08,51,048.54 | CEGSS | 72,69,669.67 |
| General - Advances & Impreset (Net) | 1,95,741.30 | DFID | 28,29,297.00 |
| FC - Advances & Impreset (Net) | 69,935.00 | Ford Foundation | 2,86,897.00 |
| | | IDS | 11,90,776.45 |
| Foreign Grants Received | | MacArthur Foundation | 17,73,632.05 |
| AJWS | 6,49,600.00 | OAK Foundation | 7,42,022.25 |
| CEGSS | 1,26,31,642.00 | SONKE Gender Justice | 30,00,053.08 |
| American Centre | 3,51,304.55 | SWISSAID | 1,30,077.89 |
| DFID | 0.00 | Other Administrative Expenses (FC) | 3,57,300.00 |
| Ford Foundation | 0.00 | | |
| IDS | 7,29,064.00 | | |
| MacArthur Foundation | 32,49,876.00 | Indian Grants Utilised | |
| OAK Foundation | 65,54,790.00 | UNFPA | 45,70,993.00 |
| SONKE | 27,93,159.00 | Reliance Foundation | 53,38,194.67 |
| NFI | 2,00,000.00 | WCD | 10,80,574.00 |
| | | NSF | 24,05,641.00 |
| Indian Grants Received | | | |
| UNFPA | 48,16,756.00 | Other Programme fund Utilized | |
| Reliance Foundation | 0.00 | Social Audit for Quality Improvement in Family Planning Services | 3,24,087.00 |
| WCD | 7,50,000.00 | Capacity Building of PACS CSOs | 27,02,385.00 |
| NSF | 20,13,145.00 | CBM in Family Planning | 83,634.00 |
| UNWomen | 26,33,399.00 | | |
| | | Fixed Asset | |
| Other Programme fund received | | (During the Year 2015-16) | 33,102.00 |
| EngenderHealth | 13,26,974.00 | Other Administrative Expense (General) | 1,73,542.19 |
| | | | |
| Other Income | | Closing Balance | |
| Other Income | 1,756.99 | Foreign Contribution (Cash & Bank) | 1,26,43,032.62 |
| Donation | 8,100.00 | General (Cash & Bank) | 1,50,42,309.97 |
| Project Contribution | 9,82,453.00 | General - Advances & Impreset (Net) | 34,25,446.00 |
| Contribution for Vehicle | 1,78,423.00 | FC - Advances & Impreset (Net) | (30,84,805.00) |
| TDS Interest Received (FY 13-14) | 8,915.00 | | |
| | | | |
| Bank interest | | | |
| FC Fund | 3,88,618.00 | | |
| General Fund | 14,03,197.00 | | |
| | | | |
| Refund Security | 10,000.00 | | |
| Total | 6,34,69,443.84 | Total | 6,34,69,443.84 |



Centre for Health and Social Justice
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