We are now Swasti Health Catalyst, moving beyond providing services or technical support, to catalysing change on the ground through partnerships with various domain experts across sectors. Our logo – with a circle of dots that can be seen as converging, as well as exploding – represents that our ideas and efforts will expand into creating impact. We have made new promises and set fresh goals to convene ideas, people, entities and solutions for advancing human dignity through health.
Dear Friends,

Good health comes from the simple impact of good practices and need not be expensive or elaborate. It is about helping others to understand that good practices lead to improved health. Swasti has always emphasised simple, practical and inexpensive means to improve the well-being of the communities.

We also believe that just doing is not always an effective way to fulfil this objective. It is also about educating, energising, and enabling communities to be responsible for themselves, and therefore, for their health as well. We have, thus, moved on from merely implementing projects to evolving a platform that would enable communities to work with others, as well as within themselves, to gain improved health.

Our system innovation in primary healthcare, “Invest for Wellness” or “i4We” evolved from this belief. As i4We expanded to work with urban and rural poor, factory workers, and women in sex work, we benefitted from our years of working with these communities. In each of these contexts, i4We addresses the unique vulnerabilities of those whom we reach. New partnerships with corporate as well as nonprofit sectors – excited by the possibilities of change i4We offered – strengthened our resolve and efforts to impact change. We have expanded the scope with preventive measures under the umbrella of water, sanitation and hygiene in communities and schools. We are grateful for them.

New solutions mandate a rebirth and new identities which are representative of who we are. In the past year, we moved from being a Resource Centre to being a Health Catalyst, galvanising cross-sectoral efforts and partnerships to provide comprehensive and integrated solutions to community health and well-being. We made new promises and set fresh goals as we launched our strategic plan for 2017-2022. We committed to deepening our i4We model and transforming ourselves into a springboard to support others in scaling their work.

In our new identity as a Health Catalyst, we will join the dots by bringing together ideas, people, entities and solutions for health impact. As a springboard for innovations, we have strengthened our work with the Taaras Coalition, started work on the Worker Well-being Coalition, and partnered with Soapy, CHROMagar, and others.

In 2017-’18, we reached 2,54,652 people with our innovations to improve their health and well-being. Our work this year has been gratifying and special. We received consultative status with the UN Economic and Social Council.

To all our supporters: Your generosity and partnership has enabled us to deliver on our mission of empowering people and communities to make the right choices to lead healthy lives. As we move forward, we are committed to caring for the health of the poorest, and innovating solutions to transform their lives.

Nandlal Narayanan
Chairperson
Shama Karkal
Secretary and CEO

Annual Report 2017-2018
Our People

We believe that people are an integral part of the growth of an organisation. They are the flag-bearers of the vision of the organisation. Our team brings a diverse set of skills and experience, and is dedicated to innovating solutions for transformative health impact. More than 34 percent of our staff have been a part of the Swasti family for three or more years.

The Swasti tagline: ‘We Care.Innovate.Transform’ – which came into being in January 2018 – was also the beginning of a new inward journey for each one of us. The entire employee journey from onboarding to separation was aligned to it. To improve professional development credentials, foster better communication, and recognise high-potential employees by developing a leadership pipeline, five new employee-driven and employee-owned caucuses were introduced in this year. This has helped in fostering a collaborative and inclusive work culture.

In 2017-18, 70 employees, 45 consultants on the ground, and 29 fellows, interns and volunteers, worked together to create health impact. Our fellows, interns and volunteers came from top universities such as Boston University, Columbia University, Institute of Rural Management, Anand (IRMA), Maastricht University, National Yang-Ming University, Oregon State University and Yale University, to name a few. Our continued partnerships with organisations such as IDEX Global Fellowship and Crossfields helped us in hosting these bright minds.

Communities We Work With

Communities are at the centre of our work. Combining research and practice, we enable the most hard-to-reach populations to make the right choices to lead healthy lives. We primarily work with:

- Rural & Urban Poor Families
- Factory Workers
- Women in Sex Work
- Men who have Sex with Men
- Transgender People

We respect communities’ deep knowledge of their context, recognise their influence and value them as agents of change. They are instrumental in bringing about every transformation we envision.

In India, we have worked in 21 States and 3 Union Territories

States: Andhra Pradesh, Assam, Chhattisgarh, Delhi NCR, Gujarat, Haryana, Jharkhand, Karnataka, Kerala, Madhya Pradesh, Maharashtra, Manipur, Mukom, Nagaland, Odisha, Punjab, Rajasthan, Tamil Nadu, Telangana, Uttar Pradesh, West Bengal.

UTs: Andaman, Lakshadweep, Dam.

Our Presence

We have reached communities, governments and partners in 30 countries

In 2017-'18, we launched our flagship innovation in primary healthcare “Invest for Wellness” (i4We). The programme combines health and wealth interventions, and focusses on wellness for the poor in an affordable, quality assured and scalable way. i4We ensures primary care of members (locally), navigates them through a range of existing secondary and tertiary providers (where required), and uses a blended financing model. For every 5000 families, a team of 20 Health Facilitators (HFs), one Nurse and one Programme Manager, and a dial-in Doctor deliver preventive, promotive, and curative aspects of primary health care, and help navigate secondary and tertiary care. The model combines medical, behavioural and social science with an appropriate mix of technology and health financing. Water, Sanitation and Hygiene (WaSH) constitutes a major part of the preventive and behavioural science aspects.

In any setting, a household becomes a member of the programme by saving a minimum of 0.8-1 USD per week in a local health group. When a family member is ill, they get free, prompt, convenient, and empathetic care in the local clinic by a nurse and a dial-in doctor. Every cluster of 5,000 families has about 500-600 local health groups called Swasth Groups and one Health Trust, where SHG leaders and local community leaders govern the programme. When they are well, they are screened systematically for 10 high-burden conditions.

By 2020, we aim to scale the model to 100 intervention sites preventing/treating over 1.25 million episodes of high-burden health conditions, including Anaemia, Diabetes, Hypertension, and Thyroid disease.

By 2022, we seek to impact 2.5 million people to “get well, stay well.”

In the past year, Swathi Jyothi mobilised savings worth INR 161 lakhs. A total of 673 members availed loans amounting to INR 174 lakhs. With a Share Capital of INR 39,23,700 and 9,404 shareholders, Swathi Jyothi recorded a net surplus of INR 7,69,418.

i4We is currently operational in five locations in India, covering 36,000 people, and delivered in four settings – urban, rural, factories, and within women in sex work collectives.

**i4We: Impact at a glance**

- **6,222** Households covered
- **25,631** People reached at least once
- **5,562** Clinical consultations by HFs
- **7,120** Risk assessments by HFs
- **2,188** People screened for Vision
- **161** People treated for Vision
- **129** People safeguarded from preventable blindness
- **2** Wellness centres
- **12.8** Million INR saved towards health expenses

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**Sexual and Reproductive Health and Rights**

Promoting access to information, services and rights to sexual and reproductive health:

In the past year, we successfully concluded Phase III of the Avahan India AIDS initiative, equipped gender nonconforming youth with life skills to combat challenges to mental and physical well-being through the GenY programme, created theatre-based platforms for solidarity among women in sex work through Amplify Change, and developed a community- based HIV counselling and testing service-delivery model – MITHR.
Avahan III: Sustaining progress in the fight against HIV

We implemented Phase III of Avahan India AIDS Initiative along with our sister organisations, Vrutti and Catalyst Management Services, from April 2014 to December 2017.

Avahan III aimed to ensure that the decline in HIV prevalence rates were maintained at the same level at which they were during the previous two phases of the initiative.

Avahan III: Impact at a glance

Avahan’s strategy of decreasing risk of violence and increasing access to social protection and financial security reduced the risk to HIV and sustained the impact of HIV prevention among Women in Sex Work.

- Consistent condom use increased from 72% to 90%
- STI symptoms reduced from 13% to 8%
- Members most vulnerable to HIV reduced from 27% to 7%
- New members reached increased from 6,367 to 11,330

The programme was delivered at the cost of only USD 19 against the benchmark of USD 100 per person per year.
Strengthening of violence prevention and redressal systems during the initial years of the programme, led to a decline in the incidence of violence, and increased reporting and resolution. Over the three-year period of the programme, the number of members facing violence in the last 6 months decreased by 30%.

Having formal civic identity proofs and citizenship documents helped Women in Sex Work, Men who have Sex with Men, and Transgender People to be able to demand for their citizen rights and entitlements.

Access to at least one civic identity increased from 89% to 98%

Access to two civic identities increased from 84% to 94%

The percentage of members with a functional savings account increased from 55% to 95% by the end of the programme.

GenY delivers life-skills training through a lens that is personal, with an understanding of the unique vulnerabilities of LGBTQAI+ youth.

Supported by The Canada Fund for Local Initiatives, GenY created a series of communiques - comic books, zines, videos, and e-posters, and shared them through social media to address queries on gender identity and sexual orientation among gender nonconforming youth. The initiative reached close to 4,000 people. In recognition of the programme benefit, the Department of Social Welfare in Tamil Nadu supported life-skills and communication workshops on gender across 10 colleges.

“The modules are built so beautifully and are very relevant to us. I cannot wrap my head around how they were able to do this. I have learned a lot during the workshops. I know myself better and am confident that I will be able to help others as well.” Arun, GenY Champion
Life Skills for All

Empowering workers, impacting businesses:

Various initiatives under our Life Skills for All (LSA) thematic area continued to advance efforts towards worker well-being, while enhancing business outcomes, and empowering the women workforce.

The worker well-being model accelerated the personal and professional growth, and improved health, financial security, and respect for women workers. This has led to a manifold return on investment for businesses. Recognising the importance of ecosystem-level intervention to create an enabling environment for women’s empowerment, the initiatives strategically engaged men, family, factories, and communities.

Building capacities of the factory management and institutionalising them paved the way towards sustainability and impact.

LSA: Impact at a glance

40,744 Women
27,698 Men

A Tufts University Study on the impact of Women in Factories (WiF) programme, found positive impacts of the training on productivity, and on reducing absenteeism and late days:

- A 39% increase in productivity among women
- Absent days dropped from 0.97 to 0.69 days per worker per month
- Late days reduced from 0.44 to 0.10 days per worker per month

Multi-stakeholder partnerships enabled implementation of models, thereby creating outcomes that are good for both workers and businesses.

MITHR

The MITHR model aims to reach the currently unreached key population (KP) members and their partners with HIV counselling and testing services. It will work with trained ancillary healthcare workers to screen people in their own communities for HIV. MITHR will take screening out of the healthcare facilities to the hotspots, houses, brothels, bars, and lodges where KPs live and work. We, along with St. John’s Research Institute, developed the model design in the past year.
Women in Factories
The Women in Factories (WiF) programme focuses on enhancing capacities of women workers to attain their full potential in all spheres of life, by strategically engaging women, men, family, factories, and communities. Launched in 2014, the second phase of WiF reached 10,807 women and 2,385 men during the last year. Supported by Walmart Foundation, WiF was implemented in 16 factories across Karnataka, Gujarat, Tamil Nadu and the Union Territory of Daman.

HERprojects
In partnership with Business for Social Responsibility (BSR), Swasti has been implementing the HERprojects to enable women to be agents of change in workplaces. The workplace-based interventions focus, on the three pillars of health (HERhealth), financial inclusion (HERfinance), and gender equality (HERrespect), and work to build capacities of the workers and strengthen management systems. In the past year, we have reached a total of 37,931 workers and 1,923 community members – with the support of over 10 leading brands – through these projects.

Life Skills for Empowering Women
The Life Skills for Empowering Women (LIFE) project aims to empower workers in the global supply chains of Debenhams and zLabels, to better handle challenges in their personal and professional lives, as well as to enable access to services and products that improve their well-being. Last year, we reached over 4,890 workers from seven factories in Karnataka and Tamil Nadu, and developed 288 Peer Educators as change makers on health, financial literacy, and gender equity.

Levis WWB
Levi Strauss Foundation’s initiative aims to improve Worker Wellbeing (WWB) within the factories of Levis supply chain in India and Sri Lanka. The WWB programme empowers workers through awareness and capacity building on life skills to enable them to lead a healthy life, strengthens and/or develops policies, systems and facilities in the factory to address the needs of workers, and strengthens worker representation committees with knowledge and skills for effective functioning. We implemented the programme in 7 factories in Sri Lanka, reaching a total of 10,004 workers in the past year.

My Life
My Life project aims to improve the welfare of vulnerable workers – particularly young and migrant women – working in Primark’s supply chain, by strengthening their life skills through play-based training methodology. Games are used to train workers on communication, assertive skills, rights & responsibilities, personal hygiene, menstrual health, and occupational health and safety. Launched in June 2017, the project has already reached 502 workers in five factories of Tirupur, in Tamil Nadu, India.
+ Life Skills for Women in Sex Work

Swasti's life skills programme for Women in Sex Work (WSW) aims to improve the welfare of the poor and marginalised community of WSW, by strengthening their life skills through a 15-hour training. A total of 130 members and staff of a WSW collective, Swathi Mahila Sangha, were trained in communication, assertive skills, rights & responsibilities, personal hygiene, menstrual health, and occupational health and safety.

+ Sakhi Worker Well-being

Inditex’s Sakhi project aims to create a safe workplace for women through system strengthening, particularly the Internal Complaints Committee (ICC), and capacity building of workers, management and the ICC committee members. Its code of conduct for the suppliers and manufacturers include zero tolerance of discriminatory practices.

We designed a worker well-being model for Inditex’s suppliers that strengthens worker representation in committees, creates an effective grievance redressal mechanism, recommends upgradation of facilities and systems for workers, and empowers them through life skills. We have developed 13 master trainers to impart knowledge and skills.

+ Water, Sanitation and Hygiene

Addressing barriers to health:

In the past year, we focussed on developing standard operating procedures for executing Water, Sanitation and Hygiene (WaSH) initiatives in rural villages, urban slums, and factories.

We worked to ensure drinking water security and set up water governance committees, reaching 6500 people. Supporting infrastructure upgradation, we promoted behaviour change in 22 schools across 10 villages in Rehati village of Madhya Pradesh.

Through advocacy with local government, we put in place mechanisms for solid waste collection in an urban slum, Mohammadpur, in Gurugram, Delhi NCR, India. We have reached this communities with messages to improve WASH behaviour such as handwashing, menstrual hygiene, safe drinking water and use of toilets.

+ Our WaSH Initiatives

- Identifying and augmenting drinking water sources
- Water filters at source to prevent contamination
- Setting up Pani Samitis in villages
- Setting up Bal Samitis in schools
- Awareness on personal hygiene and cleanliness
- Soak pits to tackle overflowing drains
- Managing solid waste
- Construction of hand and vessel washing places in schools
- Rainwater harvesting
- Renovation of toilets

18 19

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Our innovations on the ground showed promise:

+ **CHROMagir**

We embarked on an ambitious behaviour change programme using a water-quality-testing tool called CHROMagir, in the urban slums of Bommanahalli, Kamakshipalya, Chikkaballapur, and Kenchanahalli, in Karnataka, India. A French company’s product, CHROMagir provides a visual depiction of water quality that can be used to influence behaviour around drinking safe water. The chromogenic culture media used, changes to green if the water has faecal coliform. Our health facilitators used this successfully in a pilot to inform people about their water quality and nudge behaviour change – boil the water, if the colour changes to green. We have extended the pilot to understand how water quality changes through the year, and craft a long-term communication strategy on safe water-handling.

2,627 children reached through 24 training sessions on WaSH and health in 15 schools.

Infrastructure interventions like toilet renovation, construction of hand-washing facilities done in four schools.

Rainwater harvesting systems established in three schools.

---

+ **Soapy**

We partnered with Soapy, a technology firm from Israel, to adopt their automated, independent hygiene station in a school in Bagepalli, in rural Karnataka, India. The device generates water from the atmosphere and dispenses soap capsules to wash hands according to the standards set by the World Health Organization. After the initial pilot, an improved version with an electronic module that can track hand-washing behaviour of children is being worked on. Data from this will help us to establish the link between hand-washing behaviour and health of the children, measured through school absenteeism.

28,520 individuals from Jigani, Kenchanahalli, Bommanahalli and Kamakshipalya reached through one-on-one/group behavioural change communication/trainings on WaSH and health.

2,627 children reached through 24 training sessions on WaSH and health in 15 schools.

Infrastructure interventions like toilet renovation, construction of hand-washing facilities done in four schools.

Rainwater harvesting systems established in three schools.

---

+ **TamRas**

We tied up with The University of Trans-Disciplinary Health Sciences and Technology (TDU), a programme of the Foundation for Revitalisation of Local Health Traditions (FRLHT), Bengaluru, to pilot its first product, TamRas at Bommanahalli. TamRas is a scientifically validated drinking water purifier that uses the property of copper ions to destroy the deadly diarrhoea, typhoid- and cholera-causing pathogens like rotavirus, E. coli, Vibrio cholerae and Salmonella Typhi that contaminate drinking water. TamRas also controls recontamination of purified water.

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+ **Water Plants in Chikkaballapur**

We set up 3 new water plants in Chikkaballapur, Karnataka. Chikkaballapur has excessive amounts of fluoride and arsenic in groundwater leading to multiple health problems. Swasti has been working in Chikkaballapur for the last 10 years, setting up 11 water plants in 11 different villages. The work focusses on improving access to safe drinking water. The team creates awareness and disseminates knowledge on the importance of safe water, effects of excessive fluoride on health and appropriate methods to store safe water. The programme empowers people to make right choices and informed decisions, thus influencing behaviour change.

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Cross-Cutting Areas

Social Protection & Prevention of Gender-based Violence

**Delivering Social Protection**

We enabled communities to access programmes and schemes of government and private entities – which provide food and nutritional security, housing, employment, income, and insurance – critical for the poor and marginalised to achieve good health and well-being.

**Social Protection: Impact at a glance**

- INR 1,37,69,527 raised in the hands of the community
- 1,12,592 people linked to schemes

**Communities benefitted:**
- Women in Sex Work
- Factory Workers
- Rural and Urban Poor across 5 States in India

**Communities get access to:**
- 500+ social entitlements such as housing schemes
- 100+ financial security services such as pension, insurance or a bank account
- 15+ civic identity proofs including Aadhar, Voter ID, Ration Card
- 35+ other services such as scholarship or legal support

**Social Protection & Prevention of Gender-based Violence**

Ensuring access to civic identities and social protection schemes was an important strategy of Avahan III. Over the three-year period (2014-17), access to at least one civic identity increased from 89% to 98%, and to two civic identities increased from 84% to 94%. Members’ access to schemes increased from 37% to 81%. There was a 20 times increase in access to insurance.

As of December 2017, the percentage of members with a functional savings account had increased from 55% to 95%. Members availed insurance worth INR 7,975 Million (USD 122 Million) during the same period. Economic benefit worth INR 3,150 Million (USD 48.5 Million) was raised in the hands of community.

Rasika, a transgender person, applied for a loan of INR five lakhs to the Salem Cooperative Bank with the help of her Community Organisation, Salem Thirunangaiyal Nala Sangam (STNS). “With the loan, I was able to build a dream house for my parents. I told the bank that I will repay the loan by renting the house. STNS helped me in getting all the documents ready for a successful loan application.”

**Women in Sex Work, Men who have Sex with Men, and Transgender People demand their citizen rights and entitlements:**

Ensuring access to civic identities and social protection schemes was an important strategy of Avahan III. Over the three-year period (2014-17), access to at least one civic identity increased from 89% to 98%, and to two civic identities increased from 84% to 94%. Members’ access to schemes increased from 37% to 81%. There was a 20 times increase in access to insurance.

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**Preventing Gender-based Violence**

We recognise and work to mitigate the negative impact of gender-based violence, so as to ensure the autonomy of women and sexual minorities in making decisions about their health. Our Prevention of Gender-based Violence (PGBV) interventions are integrated into our work with Women in Sex Work and Factory Workers. We have trained 517 functional Para Legal Volunteers to address incidences of gender-based violence.

In our work with Women in Sex Work as part of Avahan III, an innovative reporting module on a mobile application not only captured information about an incident of violence but also generated a severity index. This allowed for tracking of an escalating experience, and focussing on prevention and mitigation of violence.
We participated in national & international forums advocating gender rights & prevention of gender-based violence. These forums are participated in by agencies such as UNWomen, non-profit organisations working in the National and International space, brands and corporates, human rights activists, and academic institutions including universities. As panelists and participants, we have been invited to share our experience, and input into global action against gender-based violence, and have pushed PGBV and safeguarding of human rights as key agenda nationally.

Our PGBV work with factories enabled creation of a gender-inclusive work environment, through sensitisation of workers, supervisors and management on women’s rights. It provided linkages with legal and counselling services for violence redressal and prevention at workplace and home, and strengthened or established POSH policies and commitments.

Technology for Health
Leveraging technology to accelerate impact:

We continued to use technology to drive change and spur swift health impact.

We developed applications for operational insights in our flagship programmes, used telemedicine to improve patient care, and explored the use of machine learning and Artificial Intelligence (AI) to further our work outcomes.

We are most excited about the development and use of the i4We App. In partnership with Conversib Technologies, we developed an android app integrated with web platform, to be used by frontline workers, nurses, and managers. The application provides an integrated decision support system with a user-friendly interface for primary and promotive healthcare. It will allow frontline workers to register people as members of the programme, and then guide and enable them to collect relevant information on real-time basis from households and individuals, and provide appropriate health messages. It would also advise on home-based management of the condition (if possible) and referrals to the wellness centre or referral providers. These will be done using the in-built algorithm based on national clinical guidelines.

Enabling health managers to have real-time information on the health status of the community, track outbreaks, or improvements in health, and measure the impact of the programme, it will support decision making, and supervise and monitor frontline workers (health facilitators and nurses). The solution will be further enhanced through other features like machine learning, artificial intelligence, and integration with point-of-care diagnostics. This will facilitate greater accuracy, better monitoring of data, efficiency, and faster pathway to outcomes. We use the telemedicine solution from World Health Partners to make expert medical help available to the traditionally unreached communities that we serve through i4We. We have partnered with Treeni to create interactive dashboards that visually represent on-the-ground impact.

We continue to partner with top technology firms for solutions to support our efforts in addressing health challenges. With Microsoft Research, we are exploring the use of machine learning and AI in our programmes. JPMorgan Chase & Co., through their Force For Good programme, is helping us build various platforms.

\[\text{PGBV: Impact at a glance}\]

- 484 supervisors and 18,000 workers trained on gender, rights and laws.
- POSH policies drafted for 20 factories
- Capacity building done on POSH implementation in 10 factories
Our Partnerships

Partnerships are central to our success in driving innovations for change and delivering outcomes in each of our programmes. We have always built sustained partnerships with community organisations, donors and brands; academia, technology firms and venture networks; and media and cross-sectoral experts. Leveraging these collaborations have ensured that donor investments are effective, programmes are evidence-informed and technology-driven, and platforms are built for cross-sectoral convergence.

We have worked with:

- Aidsfonds
- Avian Limited
- Asian Venture
- Philanthropy Network (AVPN)
- Bill and Melinda Gates Foundation (BMGF)
- Business for Social Responsibility (BSR)
- C&A
- Canadair India
- Catalyst Foundation
- Catalysts Management Services Pvt. Ltd. (CMS)
- CHRI/Magor
- Converiz Technologies
- Deibenahns
- Fair Trade USA
- Federation of Indian Chambers of Commerce & Industry (FICCI)
- Fossil
- Foundation for Mother and Child Health (FMCH)
- Foundation for Revitalisation of Local Health Tradition (FRLHT)
- Gap Inc.
- Good Business Lab
- H&M
- Hivos
- Hivos SEA
- India Sanitation Coalition
- ITX Services Indiext
- Levi Strauss
- LifeStraw
- Marks & Spencer
- Microsoft Research Foundation
- Ministry of Health and Family Welfare, India
- Morgan Stanley
- Muscular Dystrophy National AIDS Control Organisation (NACO)
- Ongon State University
- Page Industries
- Partha/Houston University
- Primark
- Snap
- Social Venture Partners (SVP)
- St. John’s Research Institute (SRI)
- Swathi Mahila Sangha (SMS)
- Tata Trusts
- Teach for India
- UNAIDS Asia Pacific
- UNAIDS India
- UNDP India
- UNICEF India
- VF Corporation
- Vietti Livelihood Resource Centre
- Walmart Foundation
- Welquon Group
- WHO India
- WHO SEARO
- Women Win
- World Bank
- ZLabels
- And many more

Financial Statements

3.1 We have audited the accompanying Consolidated (General section & Foreign offices) Financial Statements of BRVE, for the year ended on 31 March 2018, in the Statement of Income & Expenditure for the year then ended, the Receipts and Payments Account for the year then ended and a statement of Financial position at the end of the financial year.

3.2 Management’s Responsibility for the Financial Statements

Management is responsible for the preparation of these Financial Statements that give a true and fair view of the financial position, results of operations, and cash flows of the entity and includes the accompanying notes. Management is also responsible for maintaining proper accounting records which have been regularly audited by the Statutory Auditors and ensuring the safeguarding of the assets of the entity and timely preparation of financial statements in accordance with prescribed guidelines as approved by it.

3.3 Author’s Responsibility

3.3.1 Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with standards on auditing the Standards of Auditing of India. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

3.3.2 We have obtained all the information and explanation which to the best of our knowledge and belief were necessary for the purpose of our audit.

3.3.3 In our opinion, proper books of account have been maintained by the said organisation as required by law and agreement with the Statutory Auditors as evident from our examination of these books.
### 6. Current Income, Expenditure and Balance

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<thead>
<tr>
<th>Description</th>
<th>Amount</th>
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<tbody>
<tr>
<td>6.1. Revenue (Balance Sheet)</td>
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<tr>
<td>Cash received from operations</td>
<td></td>
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<tr>
<td>Sales</td>
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<td>Services</td>
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<td>Other Income</td>
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<td>Total Revenue</td>
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<td>6.2. Expenditure (Balance Sheet)</td>
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<tr>
<td>Salaries</td>
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<td>Rent</td>
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<td>Other expenses</td>
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<tr>
<td>Total Expenditure</td>
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<td>6.3. Balance at the end of the financial year</td>
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<tr>
<td>Cash in hand</td>
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<tr>
<td>Accrued liabilities</td>
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<tr>
<td>Total Balance</td>
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### 8. 15. Accounts Receivable, Payable - (Secondary)

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
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<tbody>
<tr>
<td>8.1. Accounts Receivable (Balance Sheet)</td>
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<tr>
<td>Trade receivables</td>
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<td>Other receivables</td>
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<td>Total Accounts Receivable</td>
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<td>8.2. Accounts Payable (Balance Sheet)</td>
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<td>Trade payables</td>
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<td>Other payables</td>
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<tr>
<td>Total Accounts Payable</td>
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</tbody>
</table>

### Annual Report 2017-2018

Total Current Income: $X
Total Current Expenditure: $Y
Net Current Income: $X - $Y
### Annual Report 2017-2018

#### Current Liabilities and Provisions

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Notes payable for wages</td>
<td>31,60,916</td>
</tr>
<tr>
<td>Balance due from government</td>
<td>25,99,394</td>
</tr>
<tr>
<td>Demand draft bank</td>
<td>19,95,212</td>
</tr>
<tr>
<td>Total</td>
<td>77,55,522</td>
</tr>
</tbody>
</table>

### Notes

- Notes 7: [Link to Note 7]
We thank our General Body:

- Nandlal Narayanan - Chairperson
- J.V.R. Prasada Rao - Vice Chairperson
- Hemanth Kumar - Treasurer
- Shama Karkal - Secretary
- Members
  - Dr. Angela Chaudhuri
  - Dr. Jacob John
  - R. Mohan*
  - Joseph Julian K. G.
  - M.R.C. Ravi
  - N. Raghunathan
  - P. Rajarethinam
  - Revathi Narayanan
  - Shiv Kumar
  - Siddhi Mankad
  - Thangavelu R

* till September, 2017

We also thank our founders, Shiv Kumar and N. Raghunathan, who continue to guide us as our chief mentor and mentor, respectively.

Staying true to our belief in the power of partnerships, we have advanced to being a springboard. We are no longer only a programme or service delivery organisation, but also an incubation platform for ideas that generates and crowdsources high-impact public health and wellness ideas. We innovate on solutions, incubate and aggregate ideas, and support working models inside or outside Swasti.

If you have a creative solution to incubate, or are looking for an innovation partner in health, write to us at hello@swasti.org

Thank you for being part of our journey. Follow us on social media and stay connected with our story as it unfolds.

Twitter: @SwastiHC
Facebook: @Swasti-HealthCatalyst
LinkedIn: @Swasti Health Catalyst
Instagram: @swastihc
A not-for-profit society, Swasti is registered under the Karnataka Societies Registration Act 1960 (17th Section/ Registration No.134/2004-05). Swasti has the following regulatory approvals - Section 12A and 80G of Income Tax Act, 1961 and the Foreign Contribution (Regulation) Act, 1976 - which allows it to accept and utilise foreign contributions. The FCRA registration has been renewed and is valid till 31 October, 2021.