





Annual Report 2017





#### The Catholic Health Association of India (CHAI)

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### Vision

The Catholic Health Association of India (CHAI) upholds its commitment to bring 'Health to All'. It views health as a state of complete physical, mental, social and spiritual well-being, and not merely the absence of sickness. Accordingly, CHAI envisions an India wherein people,

Are assured of clean air, water and environment

Do not suffer from any preventable disease

Are able to manage their health needs

Are able to control the forces which cause ill health

Enjoy dignity and equality and are partners in

decisions that affect them, irrespective of caste,

creed, religion or economic status, and

Respect human life and hold and nurture it to grow

### Mission

into its fullness.

In order to realize the vision, CHAI endeavours to:

Promote community health, understood as a process of enabling the people, especially the poor and the marginalized, to be collectively responsible to attain and maintain their health and demand health as a right, and ensure availability of quality health care at reasonable cost.

Prevent and control communicable and noncommunicable diseases as they cause a huge public health burden as well as take a heavy toll of human life in the country.

Provide relief to disaster victims in the country and bring the affected to normal level of functioning.

Ensure relief and rehabilitation to persons with disabilities.

Sustain advocacy for the cause of poor and needy.





Servant of God, Founder, CHA1

Born on June 23<sup>rd</sup>, 1887, in Australia.

Graduated with MBBS Degree from the Melbourne University in 1910.

The first medical woman-doctor at the Christ Church Hospital, New Zealand.

The first General President of the Catholic Women's Social Guild, Melbourne in 1916.

M.D. in Gynaecology, Obstetrics and Ophthalmology in 1919.

Reached India on 11<sup>th</sup> February 1920.

Joined JMJ on 28<sup>th</sup> November, 1920.

The first nun-doctor missionary in India.

Founded Catholic Hospitals' Association on 29<sup>th</sup> July, 1943 and became its first president.

Sr. Dr. Mary Glowrey dies on May 5<sup>th</sup>, 1957, in Bangalore.





66

Personnel who carry out healthcare are ministers of life and participants in the affectionate love of God the creator. Each day their hands touch the suffering body of Christ, and this is a great honor and a great responsibility.

### **Pope Francis**



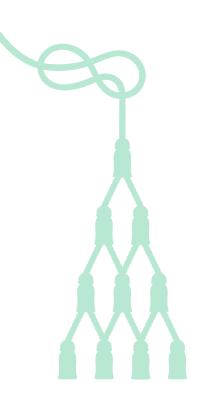


His Excellency, Most Reverend Vincenzo Paglia
President of the Pontifical Academy for Life

# The Good News of Jesus: the Foundation for a Culture of Life

The theme chosen for the National Health Convention (NHC) 2017 -"Identify, Synergize, Optimize - RESOURCES" - is an invitation for you representatives of the Catholic Health Association of India (CHAI), and for all who will be working together during these days, to examine an issue that is one of the most important in healthcare organization - providing adequate care to all who need it - but that is also one of the most urgent ethical and anthropological challenges in a growing number of countries—that is, ensuring social justice in the allocation of resources, with the personal dignity of each human being a primary goal. This will require the provision of exceptionally good training for healthcare professionals, healthcare managers and all other professionals who work in today's complex healthcare system. Equal energy, however, must be applied to the development of human qualities and ethical virtues. These resources— training, human qualities and virtues—are the ones that each community—smaller ones, such as a hospital team, or larger ones such as a whole country must "identify, synergize, optimize." These are the intangible resources that are crucial to the development of each individual and every society.

To develop this human approach in a concrete way, each and every one of us needs to put into action "The Gospel of Jesus," the true "Magna Carta of Humanized, Affordable, Rational and Quality Care." This is the "strategy" that will keep us from falling into the "throwaway culture" that Pope Francis keeps warning us about. The worth of the person and of society is measured only by its Gospel-inspired service to life and human dignity, especially when either is threatened or weakened.



#### The PAL-LIFE Project

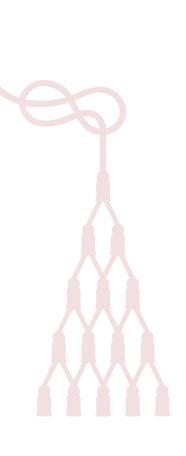
With our demographics weakened, and economic conditions more precarious, issues related to chronic illness and end of life have come to affect not only clinical practice but also society in general. The Magisterium of the Catholic Church has intervened several times in recent years to emphasize the dignity and preciousness of each human being, even of those who are afflicted with a serious or terminal illness. Not long ago, Pope Francis told us how palliative care is "an expression of real humanity in our taking care of one another, especially those who are suffering. It witnesses that the human person is always precious, even if burdened by old age or illness. In fact, in every circumstance, the person is a good for him or her self and for others, and is loved by God "(Speech by Pope Francis to the Plenary Assembly of the Pontifical Academy for Life, 2015). , The Pontifical Academy for Life has been studying these issues for some time. It has recently decided to launch an international program devoted to the development of palliative care as an effective way to accompany longterm sufferers, and as a message about how to conceive of human existence as it deals with its own vulnerability to illness.

A person who dies, often dies alone, with no one close. Man is alone when most in need of accompaniment, when the moment of death approaches. Loneliness is always painful, especially in moments of weakness and ill health. Death becomes preferable to suffering alone. Palliative care is an answer to the need for acceptance and accompaniment that characterizes sickness and frailty, whether in the young or the old. It makes possible a "happy death" by overcoming the fear of abandonment at the moment of unbearable suffering. It should be remembered, however, that the theme of the dignity of the human person is relevant throughout all of life, from beginning to end and in every life circumstance. Speaking about "death with dignity" is one aspect of that theme, and it enhances the culture of life and strengthens relationships.

As an aspect of its strategy, the PAL-LIFE project urges national Catholic health associations to make an alliance with local palliative care societies, in order to give wider and deeper promotion of palliative care locally. CHAI is pioneering this hoped partnership through the drafting of a MOU with the Pallium India. The aim is to enhance specialist palliative care assistance in the Catholic health care facilities of India.

The culture of life—which is able to support and accompany every human's existence, especially those who are weak and marginalized—is what we are all called to practice every day, in our work and in our witness. This is what I wish today, especially for all the participants at this important national conference and for every Indian healthcare professional.

Vatican City, August 26, 2017







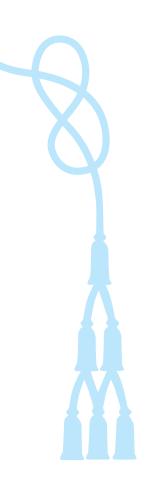
I am extremely glad to know that CHAI is organizing a National Health Convention 2017 and its 74th Annual General Body Meeting on 23rd and 24th September 2017 at Kochi with the theme "Identify, Synergize, Optimize - Resources". I am sure that this relevant theme will add more value in accomplishing CHAI's long term plan - Action 2020: 'Repositioning for the future'.

CHAI, the largest health care network in India, which reaches about twenty one million people in a year through its vast network of more than 3500 member institutions, is a hallmark of quality health care provided in India and the Catholic Church in India is proud of the momentous growth of this celebrated Catholic medical association.

CHAI has carved out a unique space in the healthcare map of India especially in offering value based approaches in healthcare. It has offered a very healthy blend of innovations and initiatives to serve the healthcare needs of the country in the best way possible, while affirming its commitment to reach out to the poor and the needy, especially of the villages.

CHAI ultimately disseminates the love and concern of Jesus Christ, who is the source of inspiration as well as the corner stone of unrelenting support to every fibre of CHAI. I am happy to recall the wonderful collaboration of CHAI with all the Catholic Bishops in India, in offering a caring and curing touch to those in need. I whole-heartily congratulate all the doctors, nurses, staff, students and beneficiaries who always support and encourage CHAI to be a living testimony in the field of healthcare.

## + Baselios Cardinal Cleemis President, Catholic Bishops' Conference of India







Annual Report of any institution or organization is an account of all that had happened during the course of the year with a special mention of the success stories and accomplishments. It gives an opportunity to become aware of the set goals and targets and to know if they are achieved. For CHAI also there are set targets and goals, both at the level of administration and at the level of the ground realities. I am glad that this Annual Report is presented at this year's AGBM. It is not only a record of information and data but it is the voice of CHAI speaking proudly about its achievements and acknowledging in humility its short comings and failures in reaching the targets and goals! CHAI means not the office headquarters but all the stake holders. And there are so many of them! The success and the failures are to be shared by all the members of CHAI! That is why, the acceptance of the Annual Report should not be a mute exercise. The members as well as others who receive it should take time to go through the details in order to appreciate the good that is accomplished and to help to overcome the failures or disappointments in the forthcoming years!

I take this opportunity to place on record my sincere appreciation of all that is being done by and through all the health care centers of the members of CHAI, big or small. In spite of all the challenges, so much is being done as a continuation of the humane services of the Church in the field of Health Care! I wish and pray that the Almighty God may continue to guide all the members of CHAI and its office bearers to continue to strive with brave heart and with total trust in the Divine Providence!

United in prayer and invoking the blessings of the Almighty,

### + Prakash Mallavarapu

Archbishop of Visakhapatnam, Episcopal Adviser of CHAI Seventy-five years in the journey of an institution! The span of time is worth remembering. CHAI will be celebrating its semi-sesquicentennial anniversary next year. We proudly remember how an organization, with a humble beginning, has now grown into a large umbrella institution bringing together under its shade most of the Catholic health care institutions, organizations and individuals in the country, with the aim of facilitating and providing quality, affordable, accessible and effective health care to people, especially the underprivileged and neglected.

I am happy and feel privileged to lead this mighty organization with the support and collaboration of the Member Institutions, the Executive Board, our partners and benefactors, and well-wishers of CHAI. I would like to thank all of them for their support, encouragement, and cooperation in accomplishing the vision of CHAI in an emphatic way. I would also like to acknowledge and appreciate the efforts of individuals and institutions to make the dream of CHAI a reality amidst adverse circumstances. Kudos to each one of you!

The theme for the National Health Convention, which is part of the 74th Annual General Body Meeting, is "Identify, Synergize, Optimize – RESOURCES." The theme is chosen with the specific purpose of strategizing to synergize individual efforts so as to optimize all our resources in the field of health care. Mark Twain, the great American writer said, "Synergy is the bonus that is achieved when things work together harmoniously." We need to become aware of the fact that as Catholic health care institutions, we have enormous resources and if we optimize our resources, we could make a remarkable identity in the national scenario. I am happy to share that CHAI is prepared to initiate this process of synergizing resources.

I believe that to identify, synergize and optimize resources, we need to forego some of our individual interests and give preference to common good. Stephen Covey, an eminent American educator and author, once said, "The essence of synergy is to value differences- to respect them, to build on strengths, to compensate for weaknesses." Such pooling together of resources, for sure, will help us to grow stronger as individual institutions as well as build an ever stronger and resourceful national body. I do trust that the Lord who has called us to do his mission will accompany and show us the right path.

I wish the 74th AGBM all success!

Sr. Deena, SCN President, CHAI

## Message from the President



From the Director General's Desk

## "Identify, Synergize & Optimize **RESOURCES**"



Rev Dr Mathew Abraham CSsR Director General, CHAI

National Health Convention (NHC) Theme and Dynamics In line with our long term focus - Action 2020: Re-positioning for the Future - the theme of the NHC 2017 is "Identify, Synergize, Optimize - RESOURCES". The growing commercialisation and the tendency to exploit in the midst of sickness and suffering, coupled with the dwindling external resources, compel us today to work together in identifying, mobilizing and synergizing the scarce resources available within us and around us. It also involves making better use of, and optimizing, existing resources for the sake of the mission of reaching the unreached.

#### The Spiritual and Theological foundation

In the midst of the emerging challenges, we need leaders who can inspire and sustain the noble mission of building a healthy and caring society. Like Moses, many of us may be reluctant leaders who were forced to take up responsibility due to the circumstances and the inner call we perceived. We too might have wrestled with God, expressing our inadequacies and skill gaps. However, for reasons we often do not understand, we are called to ensure that this noble mission continues to remain faithful to its original purpose. This includes promoting healing, alleviating suffering, healthy living, rediscovering hope, joyful transition from this life, when it becomes inevitable, and so on. We are also called to ensure that people are not exploited in this process.

All through the Gospels we see Jesus identifying, synergizing and optimizing the resources around him in order to accomplish His mission in a participatory way. He 'Identified, Synergized and Optimized' his disciples, his human resources, ordinary people with human frailties, from the local community. He utilized the existing resources like the local synagogues, the boats along the lakeshore, the homes of the excluded, the communion meals, the mountainsides, and so on in order to continue his mission. He invited them to 'Come and See', his methodology - ecclesia optics. Following this example, in our efforts of resource mobilization today, it is important for us to invite the people around us to 'come and see' our work and life. If we are able to inspire them, individuals and organizations, resources will never be scarce. In this context, the ethics of resource utilization is also very important. Those who share resources with us should be able to see and understand that all our efforts are oriented towards the purpose for which they support us.

#### The increasing challenges

Many of the member institutions of CHAI, as well as many other charitable Hospitals, especially in rural areas, do not have adequate doctors, nurses and allied health professionals. Financial constraints prevent these hospitals from maintaining and upgrading its infrastructure and investing in appropriate technology as per the need of the time. They are not in a position to compete with for-profit corporate hospitals which are gradually spreading their roots from big cities to smaller towns.

Identifying, Synergizing and Optimizing the existing resources Paradoxically, on the other hand, after the Government of India., CHAI is the largest health care network reaching about 21 million people in a year through its vast network of more than 3500 Member institutions, with about 50,000 beds. Our network also has over 30,000 fulltime voluntary work force – healthcare and Social work professionals from various religious congregations and dioceses. In addition to this, we also have substantial assets in the form of land and infrastructure. The reputation, the good will, the access among the local people, and the large number of young professionals that have undergone training in our institutions, right from primary education, could also be considered as valuable resources.

The amount of Data that is available in our institutions as well as the possibility of collecting and compiling real time authentic data from the grass roots from all over the country is another important resource that has not been identified, and optimised. Managing data, both quantitative and qualitative, can also help us in Advocacy – influence policies as well as tapping resources for the sake of the vulnerable and the unreached. There are also several inspiring stories that could be unearthed, which can become valuable resource to get more professionals and volunteers to collaborate with this noble mission. It is also important for us to Identify and Synergise the services of the skilled and experienced lay people with good will, for the sake of a larger impact.

Network building projects and New forms of resource mobilization As of now CHAI directorate manages about 25 projects supported by various donors - national and international. They range from community health, communicable diseases, non-communicable diseases, disability interventions, capacity building, environmental health and so on. These projects are of some assistance for the sisters who are trying to reach the unreached. However, they are not enough to sustain and strengthen the healthcare mission that is entrusted to us. We also need initiatives that can knit us together into a strong network. Keeping this in mind, CHAI directorate is working with various congregations that are involved in healthcare, in addition to our work with the 11 regional units. During this process, we also narrowed down to 4 common projects, keeping in mind the needs of the network. These network building projects (Common Procurement, Help Desk, Data Management for Resource Mobilization and Doctors for India) were launched during NHC 2016, at Bangalore. These 4 projects are moving forward and we hope that they will gather momentum in course of time. We also need to identify and Synergise new ways of resource mobilization like Venture Capitalists, Angel Investors, Social Funding Organizations, CSR Funding, Crowd-funding and so on.

Understanding the Demographic, Epidemiological and Political trends It is important for us to read the signs of the times – understand the Demographic, Epidemiological and Political trends happening around



us. We need to re-align ourselves taking into consideration these developments. Studying the National Health Policy 2017 and acting accordingly is also crucial.

#### Striking Appropriate partnerships

No single organization is complete in itself. However, when different organizations with different strengths come together, the impact will be greater than working in isolation. Having understood our strengths and weaknesses, we need to strike partnerships with organizations that are complementary for the mission. These partnerships can be mutually beneficial. There are possibilities of partnering with organizations that have expertise in Research, Data management, Investment, Infrastructure Development, Human Resource development, Resource mobilization, Advocacy and so on. CHAI directorate is in the process of striking such strategic partnerships.

#### Conclusion

In conclusion, on behalf of the CHAI network, I would like to express my gratitude to every single person who is involved in furthering our mission. These are selfless men and women who have left everything for the sake of the mission. We see them in bigger and smaller institutions, in the local communities, spread out all over the country. They carry forward this noble mission silently and with great courage. I am grateful to the previous Presidents and Directors who laid a solid foundation for CHAI; to the partners and donors who support us generously; to the Board members for the trust and confidence they have invested in us; to the Senior Management Team, the Program managers and the team members who support us with their knowledge, skills and commitment; and to the nuns, especially Sr. Lincy, Sr. Pushpam, Sr. Celine, and Sr. Nirmala, who selflessly worked with us at CHAI directorate and Prathyasha. A special thanks to Rev. Dr. Joby Kavungal, RCJ, the Associate Director of CHAI, whose unlimited energy, creativity, and joyful companionship made possible the 'not-so-easy' journey fruitful and fulfilling in the last one year. May God continue to guide, protect and comfort us in our journey with his people, especially the vulnerable and the unreached!





## Donor Supported Projects | AT A GLANCE

#### Thematic Areas

Community Health

Communicable Diseases

Non-communicable diseases

Disability interventions

Spiritual Care

**Environmental Greening efforts** 

Disaster interventions

Health System Strengthening & Advocacy

#### **Community Health**

188844 People received Health education

75584 Children Immunised

103105 Home visits by CHV's

15713 ANC Referrals

12160 People linked with income Generation and social Security Schemes

1000 Mothers and Children Pair Provided the Nutrition

58 District officials oriented on SBCC concept

923 grid Influencers and 398 village front liners were trained on the Child rights, Adolescent Health, Nutrition, Child Marriage Prevention Act

#### Communicable Diseases

1142537 people were aware of the TB Symptoms

356 TB Groups with 9582 TB Patients

31 Axshyakiosks were established in 7 Urban Cities

12405 PLHIV's were treated for opportunistic infections

14,498 provided with Nutrition Support

8373 PLHIV's provided with treatment

14755 Patients on ART

#### Non Communicable Diseases

77082 Aware on Diabetes

373 Medical Camps

68 Diabetic Clubs are formed

172 community leaders and 129 health functionaries sensitised on

non-communicable diseases

110 received Diabetic Foot Care

17599 Aware on NCD and its Risk Factors

53 Street Plays & 57 Wall Paintings

8935 screened on Diabetes and hypertension

56 Patients Support Groups

5061 screened for Diabetes

393 served at Special Foot Care Clinics

#### Disability

21 awareness programs and health promotion held on eye care

74 Community out Reach and screening camps conducted

5363 Cataract Surgeries conducted

5844 Children Access health Care

6831 Children Access to education

840 children provided with livlihoods

2854 access to social Participation inclusion

## **Environmental Greening efforts**

67 Hospitals and Health Care Centres of remote Areas provided with Solar

Total Installations 125

Total KWP 472

Total Carbon Reduction 36,317

Total Saving Fuel Consumption 66%

#### Disaster

25 Medical Camps

3128 people were provided with medical services

4500 litres of safe drinking water were provided with the affected people

37 families provided with food and shelter

#### **Health System Strengthening**

116 Members Responding in Global vaccine Action Plan Successfully organised World immunisation week through a series of activities in 4 states UP, Jharkhand, Rajasthan and Bihar

667 Blood bank staff trained including Medical Officers, Nurses and Lab Technicians

7 lakh population reached through Massive Social Media Campaign for Telangana SACS on Voluntary Blood Donation awareness and HIV Awareness in Just 4 Days Launched Quality Management Systems modules at National Institute of Medical Sciences, Hyderabad

## Community Health



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Children Immunised

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ANC Referrals

People linked with income Generation and social Security Schemes

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District officials oriented on SBCC concept

grid Influencers and **398** village front liners were trained on the Child rights, Adolescent Health, Nutrition, Child Marriage Prevention Act

1

Project Title

Childhood Asthma Intervention & Referral (CAIR)

Supported by

**Americares India** 

Duration

Ongoing

Operational Area

Uttar Pradesh, Karnataka and Kerala

Taraet Group

Underprivileged Children (0-16 years) living in urban slums at the identified locations.

Partners

3 member institutions (MIs)

Goal

Early diagnosis of Asthma & related disorders

**Obiectives** 

To facilitate early diagnosis of Asthma & related disorders among underprivileged children through special screening and referrals.

Project Brief

CAIR is an initiative of AmeriCares India. The project targets 10,000 children aged 0-16 years in the underserved urban slum communities, aimed at screening for asthma and other respiratory ailments, prescribing medicines to overcome and control their illness, followed by education & awareness about correct knowledge and practices in asthma. During screening camps, the children were mapped/listed for further investigation, treatment or consultation. Asthma is a variable disease requiring repeated follow up and consultation to control it. In such a scenario, offering affordable treatment & consultation plays an important role for the continuous treatment of the patient/children.

#### Accomplishments

Sixty-two health camps for children were organized by 3 partnering MIs in their target areas. 5450 children got screened for asthma. Of these, 499 children were diagnosed with lung infection, and 37 children with asthma. This apart, 109 families were facilitated to obtain social support under various government schemes.



#### Proiect Title

Community Health Services and Continued Scale-up of Interventions on Communicable Diseases

Supported by Misereor, Germany

#### Duration

September 2014 - August 2017 (Phase II)

#### Operational Area

390 Villages in 9 states (Andhra Pradesh, Telangana, Madhya Pradesh, Chhattisgarh, Uttar Pradesh, Rajasthan, Orissa, Tamil Nadu and West Bengal)

#### Target Group

CHAI MIs, Women, Adolescents, Children and General Population

#### Partners

60 Member Institutions (MIs), 6 Regional units (RUs)

3



#### Project Title

Promoting Maternal and Child Health through Mothers' Clubs

#### **Objectives**

- Establishing linkages between CHAI MIs and Government Departments
- To improve quality of Health Care Services of Rural Community Health Centers in 390 Village Communities.

#### Project Brief

CHAI, with support from Misereor, Germany, has been implementing project "Provision of Community Health Services and Scale-up of Interventions on Communicable Diseases" forthe period 2014-17 in 6 Regional Units (CHAAP, CHAMP, RUPCHA, OCHA, CHAT and WBCHA). Aim to ensure that "Access to health and developmental services is improved through decreased coverage gaps in provision of health services". The project aspires to facilitate collaboration between Catholic Health Care Facilities (CHFs) and various national disease-control programmes such as, National Vector-borne Diseases Control Programme, Leprosy Programme, Blindness Programme, RNTCP, and HIV/AIDS Programme (particularly for provision of PPTCT/ICTC services through PPP mode) as well implementing health and developmental interventions in 390 villages through 60 MIs of CHAI with 390 Community Health Volunteers.

#### Accomplishments

188844 community members reached with health education through 6382 Awareness programmes.

5295 Immunization sessions were attended by the Community Health Visitors and immunization for 75584 children was ensured.

103105 Home visits were made by CHVs and 338037 community members were reached

15713 ANC cases referred for health check-ups and 2291 institutional deliveries were ensured.

- 9732 community members were linked with Income-generation programmes.
- 2428 community members were linked to Social Security Schemes.

#### Effect

- Visibility of our membership among Government authorities has increased and MIs are reaching out to unreached areas through uptake of schemes
- Increased Health Seeking Behaviour among the operational areas which resulted high referrals to health services.

#### Goal

Early diagnosis of Asthma & related disorders

#### **Objectives**

- To provide comprehensive maternal health care to 1000 pregnant women identified through CHAI member hospitals in rural areas over a period of 1000 days, upto the child's 2nd birth day.
- To extend newborn health care support to children delivered by the identified 1000 pregnant women.
- To provide nutritional support to 1000 mothers and their children for 1000 days, from the start of a woman's pregnancy until child's second birthday.

#### Project Brief

The purpose of this project is to identify and adopt 1000 poor pregnant women from below the poverty line (BPL) families through CHAI member hospitals which are located in medically under-served areas and are cater-

Supported by
Kindermissionswerk, Germany

Duration
April 2014 - Oct 2018

#### Operational Area

Jammu and Kashmir, Uttar Pradesh, Uttarakhand, Jharkhand, Madhya Pradesh and Kerala (6 States)

Target Group

Pregnant Women/Mothers and Their Children

Partners

10 Member Institutions (MIs)

4



Project Title
Social Behavior Change
Communication (SBCC) Project

Supported by UNICEF

Duration

September 2016 - December 2017

Operational Area

100 Villages in 5 Mandals of Khammam District of Telangana State, India

#### Target Group

- Primary: Adolescents (boys and girls: 10-19yrs). Parents of Adolescents, Pregnant Women and Their Husbands, Parents of Children below 2yrs of Age
- Secondary: Frontline Workers (ANM/AWW/ ASHA), Extended Family Members, Relatives, Friends, Caste, Religious, Occupational, Community leaders, Panchayati Raj Institutions, Self-Help Groups

#### Partners

1 Member Institution (MI)

ing to the poor and marginalized. The Project is open to all poor pregnant women of all ages regardless of caste and creed. The adopted pregnant women are being extended comprehensive health care support from the time of registration during the first trimester to the delivery of the child and care for the newborn up to the child's 2nd birthday. Mothers Clubs will be formed at each location and awareness classes will be conducted for the registered women at regular intervals.

#### Accomplishments

- Provided antenatal-intranatal-postnatal care and nutrition support for 1000 days to 1000 pregnant women and newborns from pregnancy upto child's second birthday.
- Formed Mother's Clubs for awareness creation and as follow-up measure.

#### **Objectives**

- To reach out to adolescents, their parents and key influencers on child rights through social behavior change communication.
- To orient key secondary stakeholders at district, mandal and village level on the importance of enhancing immunization and preventing child marriages

#### Project Brief

The project is being implemented in 100 villages covering 5 mandals -- Bonakal, Madhira, Thirumalayapalem, Singareni and Khammam Rural. The goal: to contribute towards the creation of a protective environment for children in which they can be protected against from various diseases by newborn care & immunization, and adolescents against getting married before the legal age, and to ensure that families and communities have safe and hygiene surroundings through systematically-coordinated intensive SBCC.

- 90 villages completed Social Mapping and Line-Listing
- 58 District-level officials from Health, Education and Women and Child Welfare Department were oriented on SBCC concept
- 121 Mandal-level officials from Women and Child Department were trained on SBCC concept and Child Issues
- 398 Village-level frontline staff consisting of ASHAs, ANMs, AWWs and PRI members from 100 villages were trained on SBCC concept, Child Rights and Adolescent issues
- 1000 Grid-Influencers were mapped from 100 villages. Of these, 923 were trained on Child Rights, Adolescent Health, Nutrition, and Child Marriage Prevention Act.





## Project Title Lifesaving Vitamins to Mothers and Children

Supported by Vitamin Angels (VA) India

Duration Ongoing

Operational Area
Pan India

Target Group

Children Below Five Years

11 Regional Units



#### Goa

Prevent blindness and worm infestation

#### **Objectives**

Provide lifesaving vitamins to mothers and children under five at risk of malnutrition for reducing preventable illness, blindness, worm infestation and mortality.

#### Proiect Brief

VA provides annual grants of vitamin A, albendazole and multivitamins, through CHAI MIs, to most at-risk populations, who do not have regular access to micronutrient products from government health care services. An important component of the support provided by VA is to ensure that products donated and distributed are complementary to and coordinated with the existing national health services.

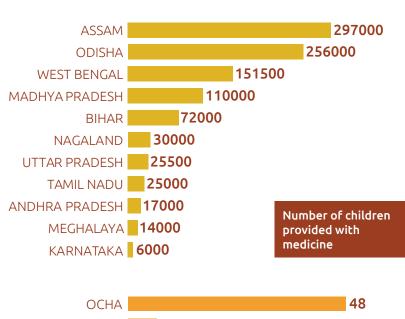
VA currently supports over 75 MIs from CHAI's 11 regional units. 123,500 Infants within the age group 6-11 months and 152,000 Children have been provided with 728,500 dosages of vitamin A and albendazole during the reporting period.

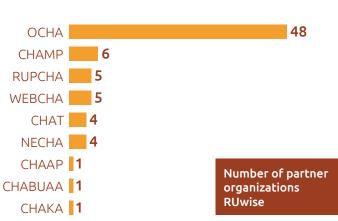
#### Accomplishments

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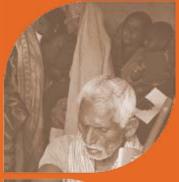
#### *Impact*

75 members from 11 Regional Units have made use of this facility to prevent blindness and worm infestations.





## Communicable Diseases





1142537

356

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people were aware of the TB Symptoms

TB Groups with 9582 TB Patients

Axshya kiosks were established in 7 Urban Cities

PLHIV's were treated for opportunistic infections

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PLHIV's provided with treatment

Patients on ART

1



#### Project Title

Axshya – Enhancing Access to Quality TB Care for Vulnerable and Marginalized Populations through innovative and Sustainable Interventions

#### Supported by

The Global Fund to Fight AIDS,
Tuberculosis and Malaria (Global Fund)
& The International Union Against
Tuberculosis and Lung Disease
(The Union)

#### Duration

October 2015 – December 2017

#### **Objectives**

To enhance access to quality TB services through community participation and engagement of all healthcare providers

#### Project Brief

Project Axshya aims to enhance access to quality-assured TB services focusing on the vulnerable and marginalized populations (also called 'most at risk' populations) and private healthcare providers in 96 districts of India and also 7 urban sites.

The project thus contributes to the overall goal of universal access to TB treatment as per the National Strategic Plan of the Revised National TB Control Programme.

#### Accomplishments

- 11,42,537 people were made aware of TB symptoms through AxshyaSamvad, covering both rural and urban households.
- 356 TB patient groups (covering 9582 TB patients) were sensitized on TB Patient Charter.
- 85 District TB Forum meetings were conducted periodically.
- 31 Axshya Kiosks were established in 7 urban cities.

#### **Effect**

The urban intervention in seven urban sites started in April 2016. Through this intervention, the project could engage 242 qualified private practitioners, 90 private hospitals and 43 private labs during this year. 3,723 TB cases were notified to Nikshay, the government notification system from the urban intervention.

#### Operational Area

- 3500 Rural Villages across 96 Districts Covering 10 States in India, including, Kerala, Tamil Nadu, Madhya Pradesh, Punjab, Uttar Pradesh, Karnataka, Nagaland, Maharashtra, Chhattisgarh and Jharkhand
- 9 Urban Cities Bilaspur, Rajnandgaon, Bhilai Nagar & Durg, Aurangabad, Nasik and Malegaon, Salem and Coimbatore

#### Target Group

Key Affected Population and TB Patients

#### Partners

13 Member Institutions (MIs), 8 Regional Units and 190 NGOs



Prison Intervention - Salem, Tamil Nadu



Sensitization of Police Personnel at Tuensang, Nagaland



Ayurveda Doctors organized World TB Day Rally at Kollam on 24th March 2017

Chest symptomatics tested 53,827

Sputum collected & transported 50,299

Referrals reached 3528

Number diagnosed 8710

Number treatment started 8275

#### Project Title

Holistic Care Centres (HCCs) for **PLHIV for Providing Comprehensive** Care to People Living with HIV/AIDS in India

Supported by Misereor, Germany

Duration April 2016 - March 2018

#### Operational Area

Bihar, Gujarat, Karnataka, Kerala, Madhya Pradesh, Nagaland and Tamil Nadu

#### Taraet Group

PLHIV and their families, belonging to the marginalized communities and those with poorest economic background, with no adequate affordability and accessibility to the required health services

#### *Partners*

18 Member Institutions and 7 Regional Units

#### **Objectives**

- Provide quality holistic care and psycho-social support to people living with HIV (PLHIV) and their families
- Establish linkages with Govt. line depts concerned and networking with likeminded organizations
- · Organize capacity-building measures for HCCs' teams

#### Project Brief

The main purpose of the project is to provide Holistic palliative care services to PLHIVs and their marginalized families. This includes treatment for Opportunistic Infections related to HIV; clinical, nutritional, psycho-social and spiritual counselling to PLHIVs and their family members; establish networking and linkages to facilitate PLHIVs to access social protection under various Govt. social welfare schemes.

#### **Accomplishments**

- 12,405 (6114 Male & 6291 Female) PLHIV were treated for opportunistic Infections. In addition, 8373 were provided treatment for other conditions such as sexually transmitted diseases, acute gastritis and anemia.
- Nutritional raw materials and powders and Multi Vitamin Tablets (MVT) were given to 13,336 clients who were on anti-retroviral treatment (ART) and 4,391 clients who were not on ART
- 14755 patients on ART and 4408 Non-ART patients were given counselling services
- 2090 patients on ART and 390 non-ART patients availed palliative care services

#### **Effect**

- Increased accessibility with self-esteem to affordable holistic care for PLHIV and their families
- Improved health for PLHIV who received holistic care from 18 HCCs







#### Project Title

Care and Support to Children
Infected and Affected with HIV/AIDS

Supported by Augustine Stewardship Fund Trust

Duration
March 2016 – August 2016

Operational Area
Across India

Target Group
Children Infected and Affected with HIV/
AIDS

Partners
36 Member Institutions (MIs),
9 Regional Units (RUs)

#### **Objectives**

Extend comprehensive care & support through institutional-based services to improve the quality of life of children infected and affected with HIV/AIDS through provision of nutritional supplements.

#### Project Brief

Children, both infected and affected, or who are orphaned by the deaths of both the parents due to HIV/AIDS are being taken care of by 40 MIs. There are over 2000 children in these centers. Even though Government takes care of the major part of medication, the Centers provide nutritious food, medicines for opportunistic infections, clothing, counselling, etc. to these children. Most of the patients/children come to the Centre in a desperate state.

#### Accomplishments

- CHAI identified 36 Centres [30 Community Care Centres (CCCs) and 6 Palliative Care Centres]from its Member Institutions
- 1162 children (675 girls and 487 boys) were provided nutritious food thereby improving their quality of life.

#### **Effect**

- All the children are healthier and have improved the quality of their life.
- Children are enabled to actively involve in various school activities curricular and extra-curricular.
- Balanced diet helped the children to cope with the medicinal intake in an effective manner, with improved CD4 count.



## Non-communicable Diseases



Aware on Diabetes

Medical Camps

373

68

**172** 

110

**53** 

56

8935

5061

393

Diabetic Clubs are formed

community leaders and 129 health functionaries sensitised on non-communicable diseases received Diabetic Foot Care

Aware on NCD and its Risk Factors

Street Plays & 57 Wall Paintings

screened on Diabetes and hypertension

Patients Support Groups

screened for Diabetes

served at Special Foot Care Clinics

#### Project Title

HealthRise Udaipur - Increasing Awareness, Detection and Management of Hypertension and Diabetes

#### Supported by

Medtronic Foundation, Abt Associates

October 2015 - October 2018

#### Operational Area

Girwa and Jhadol Blocks of Udaipur District, Rajasthan

#### Target Group

Urban, Rural and Tribal Population Aged between 15-70 Years at Risk for Diabetes and cardiovascular disease

#### Goal

The overall goal of the project is to contribute to a reduction in premature mortality by 25% from CVD and diabetes among the underserved in targeted geographies

#### **Objectives**

- Increase screening and diagnosis for diabetes and hypertension
- Increase management and control for diabetes and hypertension

#### Project Brief

The project aims at reducing premature mortality due to diabetes and cardiovascular disease using a three-pronged approach through improving health-seeking, adherence and reduction in barriers to care, capacitating government healthcare workers in NCDs and building evidence to advance policy and advocate for the underserved.

- 172 community leaders and 129 health functionaries were sensitized on non-communicable diseases.
- Awareness among the community was generated through 53 street plays, 57 wall paintings and 50 public addresses.
- 17559 people were met by project staff to make them aware of the symptoms, risk factors of NCDs and to motivate them to attend screening camps.



2



## Project Title Prevention and Control of Diabetes in India

Supported by V-Guard Industries Ltd, Kochi, Kerala

Duration
July 2016 – June 2017

#### Operational Area

7 States (Jharkhand, Rajasthan, Bihar, Madhya Pradesh, Odisha, Himachal Pradesh&Maharashtra)

Target Group

General Population

Partners
10 Member Institutions(MIs) & 5
Regional Units (RUs)

- 8935 persons attended the screening camps organized by the project among whom 564 had a positive screening test for diabetes and 610 had a positive screening test for hypertension. These people were referred for further treatment at govt. facilities
- 56 patient support group meets held

#### **Effect**

- Health workers in the two blocks were capacitated and sensitized towards NCDs who will remain a lasting force in the region working towards reduction of premature mortality.
- A significant proportion of the people in the intervention area were screened and linked to treatment for diabetes and hypertension

Screened 8935

Hypertension positive 610

Diabetes positive 564

#### **Objectives**

- 1. Capacitate the personnel of Member Institutions (MIs) of CHAI to focus on diabetes related services
- 2. Increase levels of awareness on diabetes among general population
- 3. Reduce of morbidity and mortality with reference to the high-risk group by early identification of persons with high levels of risk factors and appropriate referrals

#### Project Brief

India carries the highest burden of diabetes with escalating prevalence in both urban and rural populations. To address the situation and to create awareness about diabetes, CHAI is implementing 'Prevention and Control of Diabetes in India Project' with the support of V-Guard Industries in 7 states through 10 MIs working in V-Guard-operational areas. The project is implemented in rural and semi-urban areas, towards improving the availability of information on prevention of diabetes as well as ensuring accessibility to diabetes care among the poor and the marginalized.



3



#### Project Title

Self-Care and Foot-Care Management of Diabetes

Supported by World Diabetes Foundation

Duration
July 2015 - June 2018

#### Operational Area

4 Districts (Shahjanpur, Sitapur, Lalitpur and Varanasi) of UP

#### Target Group

Health Care Professionals of CHAI Member Institutions, Diabetic, and Pre-diabetic Population and their family members

#### Partners

6 Member Institutions(MIs) and 1 Regional Unit (RU)

#### Accomplishments

- 359 awareness programmes were conducted by 10 MIs wherein 77,082 persons (26126 men, 37565 women & 13391 children) were made aware of diabetes.
- 373 medical camps were conducted wherein 14742 (6197 men& 8545 women) persons were screened. 1565 (621 m & 944 women) were screened as pre-diabeticand 1337 (651 men, 684 & 2 children) screened positive for diabetes.
- Out of these, 921(473 men, 447 women & 1 child)personswere known diabetics and 416 (174 men, 241 women & 1 child) were newly-diagnosed ones.

#### **Objectives**

- Capacitating the personnel of Member Institutions (MIs) of CHAI to raise awareness regarding diabetes self-care; to control/manage and prevent effectively with special emphasis on foot-related complications.
- Ensure continuum of care and treatment for diabetics through appropriate referrals and effective follow-up with secondary and tertiary hospitals specialized in diabetic foot-care.

#### Project Brief

The aim of the project is to promote self-care and foot-care practices among diabetics through capacitating health care professionals, at primary and secondary levels, to manage, prevent diabetes and foot-related complications, and thereby reducing morbidity and mortality due to the disease in four districts of Uttar Pradesh, India.

#### Accomplishments

- 5061 people were screened for diabetes through 99 health camps:
- 591 diabetics and 1018 pre-diabetics received care
- 393 persons with foot complications are treated at special foot care clinics
- 68 Diabetic Clubs were formed with 806 diabetics and pre-diabetics as members and given extended monthly health education, care and facilitated peer learning and sharing
- Block level advocacy meetings were organized by involving various stake holders
- 110 patients with foot complications received free diabetic foot wear with the support of Podiatric Department of University of Rochester Medical Center (URMC) Rochester, New York

#### **Effect**

- Due to the advocacy of Diabetic Clubs Federation with Chief Medical Officer, now the CHC in Khirabad stared distributing free medicines to diabetic patients.
- With regular advocacy with State NCD Cell in Lucknow, the major Govt hospitals in Lucknow have appointed Diabetologists and allotted separate room for hypertension & Diabetic patients and started distributing free medicines as well as made all diagnostic tests are free
- The project was presented at 4th NCD summit organized by Govt of India in Delhi



## Disability 1nterventions



Awareness programs and health promotion held on eye care

Community out Reach and screening camps conducted

Cataract Surgeries conducted

Children Access health Care

Children Access to education

Children provided with livlihoods

Access to social Participation inclusion

#### 1

#### Project Title

Disability Inclusive Eye Health Programme

#### Supported by

CBM (Christoffel-Blindenmission), Germany

#### Duratior

January 2017 - December 2017

#### Operational Area

Five districts including Satna, Jhabua(Madhya Pradesh), Varanasi (Uttar Pradesh), Medinipur, (West Bengal) and Buxar (Bihar)

#### Target Group

Persons with Disability and Those at Risk of Disability from the Lower Socio-Economic Strata

#### Partners

5 Member Institutions (MIs)

#### **Objectives**

- Reduce the prevalence of diseases which cause impairment and disability
- Minimize the conditions which lead to disability

#### Project Brief

CHAI in collaboration with Christoffel-Blindenmission, Germany provides free cataract surgeries to the marginalized people. The project also develops the capacities of implementing partner-organizations in order to support persons with disabilities in future. The implementing partner (Member Institutions) identifies the needy cataract patients and conducts free/subsidized cataract surgeries.

- ullet 21 awareness programmes and health promotion held on eye care
- 74 Community outreach and screening camps conducted
- 4913 Free/Subsidized Cataract Surgeries conducted



#### Proiect Title

Disability Intervention among Children/Youths with Disabilities (C/YwDs)

#### Supported by

Liliane-Fonds Foundation(LF)— MIVA, The Netherlands

#### Duration

Ongoing (Being implemented since 1994)

#### Operational Area

(8 States (Andhra Pradesh, Gujrat, Karnataka, Kerala, Maharastra, Orissa, Telangana, Tamil Nadu)

#### Target Group

Children and youngsters with disabilities aged upto 25 years

#### **Partners**

Partner Organizations (POs): 34 Member Institutions (MIs), 6 Regional Units (RUs), 49 Non-Member Institutions and 11 NGOs

#### **Objectives**

- To provide support to Children/Youths with Disabilities (C/YwDs) through its comprehensive disability rehabilitation assistance programme
- To provide support to POs to acquire transportation and communication facilities to benefit C/YwDs.

#### Project Brief

The project is providing support to children and youths with disabilities through its comprehensive tailor-made and rights-based disability rehabilitation assistance programme to children belonging to marginalized families. The programme intends to provide holistic rehabilitation services spread across four domains including health, education, livelihood and inclusion towards capacitating C/YwDs to lead a quality life.

#### Accomplishments

- The program could touch the lives of 8321 children and youngsters with disabilities.
- Access to Healthcare (medical rehabilitation) was provided to 5844 children
- Access to Education was provided to 6831 children
- Access to Livelihood opportunities was provided to 840 children
- Access to Social participation (Inclusion) was provided to 2854
- Supported 8 POs to purchase four-wheelers to provide transport for C/ YwDs.

The project through its resource-mobilisation initiative collaborated with Hindustan Petroleum Corporation Limited (HPCL) to support partner organisations. HPCL has sponsored physiotherapy equipment to the Diocese of Adilabad Human Promotion Society (DAHPS) in order to start a physiotherapy unit at Gadderagadi which was inaugurated on 15th December 2016.





## Project Title Providing cataract surgeries for poor marginalized people

Supported by WonderWork, USA

Duration
May 2016 - October 2016

Operational Area
Warangal, Telangana State

Target Group

People suffering from cataract

1 Member Institution (MI)of 1 Regional Unit (RU)

#### **Objectives**

To prevent blindness and give sight to the poor and needy

#### Project Brief

CHAI-WonderWork Project is working with one Member Institution (Navadrushti Charity Eye Centre) - an arm of Presentation Social Service Society, Fathimanagar, Warangal, Telangana for providing cataract surgeries for marginalized people.

#### Accomplishments

450 cataract surgeries performed to 282 women and 168 men which enable them to regain their eye sight





## Spiritual Care





#### Project Title

Healing Retreat for Healthcare Professionals

Supported by Missio Aachen, Germany

Duration
August 2014 -July 2017

#### Partners

6 Regional Units (CHAT, CHAKE, RUPCHA, CHAAP, NECHA and CHAKA)

#### Target Group

Priests and Sister-Nurses/Social Workers and Other Religious, Mostly Working in Different Member Institutions of CHAI



#### **Objectives**

To cater to the spiritual needs of caregivers

#### Project Brief

The project organizes Healing Retreats to cater to the spiritual needs of caregivers – facilitating the participants to experience themselves the inner healing touch of God, and in turn, helping the people they serve, while doing healing ministry, experience His healing touch.

- 24 preachers identified as Resource Persons and a draft module developed for the Healing Retreat
- Five-day Healing Retreats were organized by 6 Regional Units for 192 participants.



#### Project Title

Establish Spiritual Care Education Department in CHAI for Effective health ministry in Catholic health care institutions in India

Supported by Missio Aachen, Germany

Duration August 2015 – July 2018

Operational Area
Pan India

#### Target Group

31 Participants including Sister-Nurses from different parts of the country Involved in Training

#### **Objectives**

To establish Spiritual/Pastoral Care Units, provide training and spiritual care

#### Project Brief

Pastoral Care Units were established with dedicated trained staff who provided spiritual care to patients

- Training was provided to 31 health care providers of various CHAI MIs
- Facilitated provision of spiritual support to over 5,000 patients while in hospital and their families to cope with suffering
- Visited 900 patients' families, providing spiritual/pastoral care
- Established Spiritual/Pastoral Care units in 10 Mission Hospitals of CHAI MIs with a dedicated person prayer room with proper ambience, music systems & referral books, scriptures and other related books, etc.)







## Environmental Greenin



Hospitals and Health Care Centres of remote Areas provided with Solar

Total Installations

Total KWP

Total Carbon Reduction 36,317

Total Saving Fuel Consumption

#### Project Title

Installation of Solar Energy-Systems in CHAI Health Care Centers

Supported by Misereor and KZE

#### Duration

Phase II: January 2016 - December 2017 and Phase III: January 2017 - June 2018

#### Operational Area

Phase II: 8 States (Chhattisgarh, Andhra Pradesh, Telangana, Gujarat, Maharashtra, Bihar, Jharkhand and West Bengal)

Phase III: 15 states (Arunachal Pradesh, Assam, Meghalaya, Nagaland, Tripura, West Bengal, Orissa, AP, MP, UP, Jharkhand, Bihar, Uttarakhand, Punjab,

#### Objectives

To enhance the quality of health care services of CHAI MIs &to develop models of eco-friendly health facilities.

#### Project Brief

The project aims to make provision for adequate power to tide over frequent power disruptions and maintain uninterrupted supply while reducing dependence on conventional energy which in turn reduces the emission of poisonous gases from the use of generators. So far, the project, in its three phases, has been able to make 195 Member Institutions rely on solar power systems for power and reduction in the use of fuel to run generators, and accordingly, contributing towards enhancing quality healthcare service to the marginalized as well as positive ecological impacts.

#### Accomplishments

During 2016-17, 67 Hospitals and Healthcare Centers of remote areas have been installed with solar power systems in 2nd phase (total capacity of 254kW) and installation is in the process in 3rd phase in 70 MIs (total capacity of 295kW).

#### Jammu & Kashmir)

Target Group

Underprivileged Children (0-16 years) living in urban slums at the identified locations.

Partners

3 MIs



Impact
Impact of previous two phases:
Total installations :125 Total kWp : 472

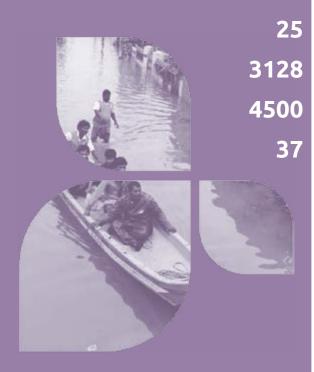
: 36,317 KgCO2e(for 114 installation) Total Carbon reduction

Total saving in fuel consumption :66%





## Disaster Intervention



Medical Camps

people were provided with medical services

litres of safe drinking water were provided with the affected people

families provided with food and shelter

#### Project Title

**Support Indigenous People Affect**ed by the Flooding in 20 Villages in **Guntur District, Andhra Pradesh** 

Supported by Misereor, Germany

September - December 2016

Operational Area

Guntur District, Andhra Pradesh

Target Group

Floods Victims Especially Yanadi Tribal Communities

Partners 1 NGO

#### Project Brief

The project focused on providing relief services in the affected areas by conducting medical camps in the most affected sites. As part of the project, CHAI operated the camps for 30 days. The medical camps were organized in the most affected villages of Repalle and Rajupalemmandal. The project also emphasized provision of psychosocial support, nutritional support and purified drinking water to people.

- Through 25 medical camps 3128 people were provided with medical
- More than 4,500 litres of safe drinking water was provided to the affected people which indirectly saved people from water borne
- Linked 37 families with other organizations for food and temporary shelter
- Developed good rapport with Guntur District Administration

## Health System Strengthening Et Advocacy



116

Successfully

667

7 lakh





Launched

#### Project Title

GAVI – Civil Society Organizations -**Health Systems Funding Platform** 

#### Supported by

The Vaccine Alliance (GAVI) and Catholic **Relief Services** 

#### Duration

March 2013- March 2018

#### Operational Area

4 States - Uttar Pradesh, Rajasthan, Jharkhand and Bihar

#### Target Group

The project's aim is to bring about demand-generation, coverage and equity for immunization through the work of Civil Society Organizations focusing on the hard-to-reach and marginalized population.

#### *Partners*

13 Member Institutions (MIs), 4 Regional Units (RUs), 194 NGOs

Members Responding in Global vaccine Action Plan

organised World immunisation week through a series of activities in 4 states UP, Jharkhand, Rajasthan and Bihar

Blood bank staff trained including Medical Officers, Nurses and Lab Technicians

population reached through Massive Social Media Campaign for Telangana SACS on Voluntary Blood Donation awareness and HIV Awareness in Just 4 Days

Quality Management Systems modules at National Institute of Medical Sciences, Hyderabad

#### **Objectives**

- To build a functional network of Civil Society Organizations working towards immunization with financial sustainability
- Develop capacity to contribute to national health sector planning and coordination.

#### Project Brief

The project was started in 2013 as part of the GAVI- CSO constituency project which is being implemented by Catholic Relief Services in 24 countries across the world. In India, the Catholic Health Association of India is the facilitating CSO.

The country platform for immunization was established, called 'Alliance for Immunization in India', which was later renamed and registered as an organization in 2016 as the 'Alliance for Immunization and Health' (AIH). There are 18 organizations which form the National Steering Committee and another 194 at the state level. The state level organizations are in 4 platforms namely Uttar Pradesh, Rajasthan, Jharkhand and Bihar.

- Successfully organized World Immunization Week through a series of activities in Uttar Pradesh, Jharkhand, Rajasthan and Bihar.
- Participated in Global Vaccine Action Plan (GVAP) survey with 116 members responding to the survey.
- Consolidated membership of the platform by formalizing members through proper documentation and membership fee payment.
- Entered into a small scale funding agreement (SSFA) with UNICEF to carry out Social & Behavior Change Communication (SBCC) workshops, one at the national level and four at the state levels.



#### Project Title

Exploring the Potential of Diversified Traditional Food Systems to Contribute to a Healthy Diet

Supported by Misereor, Germany

Duration

January 2017 – December 2017

Operational Area
Telangana

### Target Group

Communities Utilizing Traditional Food Systems

#### <u>Partners</u>

1 Member Institute, 1 Regional Unit and 1 NGO

#### **Fffect**

- The project has brought together several organizations working in the field of maternal & child health and immunization on a common platform.
- The project has empowered its civil society members to work better in the field of immunization- by knowledge and skill improvement.



#### Goal

Exploring the potential of diversified traditional food systems to contribute to a healthy diet

#### **Obiectives**

To explore the role of diversified traditional food systems in providing a balanced diet and contributing to food, health, nutrition security and food sovereignty in an ecologically sustainable way.

#### Project Brief

A participatory evaluation will be conducted among communities utilizing traditional diversified food systems to understand the impact of food systems on holistic health. Analysis of nutrients and food habits with special regard to women and children will be performed with a desk review of food systems and policies.

#### Accomplishments

- A dialogue was conducted with family members, women, men, children and elders. These in-depth discussions map out the past and present foods eaten, value of the food, source of food, crops grown, gender analysis, etc.
- The next round of discussions was between families to broaden and collectivize the dialogue.



## **Quality Management System of Blood Banks**

#### Supported by

Christian Medical Association of India (CMAI)&Center for Disease Control (CDC) & National AIDS Control Organization (NACO)

#### Duration

October 2014 - March 2018

#### Operational Area

14 States (Andhra Pradesh, Telangana, Madhya Pradesh, Chhattisgarh, Rajasthan, Gujarat, Mizoram, Manipur, Meghalaya, Tripura, Sikkim, Nagaland, Arunachal Pradesh, and Assam) and 2 Union territories (Daman-Diu and Dadar Nagar Haveli)

#### Target Group

NACO-Supported & Non-NACO-**Supported Blood Banks** 

#### **Objectives**

- 1.Strengthen National Blood Transfusion Service Systems 2.Ensure practising Blood Testing Protocols and Quality Systems
- Essentials
- 3.Improve quality in Capacity-Building
- 4.Provide technical assistance for Quality Assurance Programme(EQAS)

#### Project Brief

The project works closely with the Division of Blood Transfusion Services (BTS) and National AIDS Control Organization (NACO), Ministry of Health and Family Welfare, to strengthen and support the Quality Management Systems in Blood Banks (QMS-BB) to ensure access to safe and quality blood in remote areas in the shortest possible time.

#### Accomplishments

- Out of 1819 available staff 1347 blood bank staffwere trained. 667 members were trained during 2016-17 across the CHAI Zones.
- Conducted Massive Social Media Campaign for the Telangana SACS on Voluntary Blood Donation awareness & HIV awareness reaching a 7-lakh population in just 4 days.
- Launched Quality Management Systems modulesat National Institute of Medical Sciences in the presence of Ms Katherine Hadda, US Consulate-
- Mapping of all Blood Banks undertaken and Blood Bank App developed which is integrated into NHP (National Health Portal).
- Baseline Assessment done for all the NACO & Non-NACO supported Blood Banks.





# **Network Strengthening Initiatives**

## Thematic Areas

Repositioning for the future

Pratyasha healthcare

Herbal training

Geriatric care cum hospice

Common Procurement Projects

Doctors for India

Resource Mobilization

Help Desk

Scholarship







## Repositioning of Religious Congregations/Sisters for the Future

Supported by

Conrad N.Hilton Foundation

Duration

October 2015 - September 2018

#### Operational Area

Across the country, with special emphasis on 9 states (Chhattisgarh, Bihar, Odisha, Maharashtra, Uttar Pradesh, Telangana, Tamil Nadu Madhya Pradesh and Jharkhand)

#### Target Group

Religious Sisters Congregations Working in the Health Care Ministry

#### **Partners**

Partnered with 13 Religious Congregations in the Health Sector

#### **Objectives**

- Facilitate 45 Religious Congregations to revisit, rediscover and reposition themselves in the healing ministry
- Establish an inter-congregational referral / advocacy network in 9 states
- Train 230 Sister-Nurses as 'Community Health Enablers'

#### Project Brief

Consultations with 13 major religious congregations resulted in an agreement to implement four Common Projects (1. Common Procurement Project, 2. Doctors for India, 3. Knowledge Centre, 4. Help Desk) to knit them together into a strong network. The National Steering Committee, as an Inter-Congregational Entity, facilitates the implementation of these projects. With a view to strengthening the envisaged advocacy/referral network, NSC closely works with CHAI Central Office, the Sister-State Coordinators and their State level offices, Regional Units of CHAI and the Sisters trained as Community Health Activists/Enablers through a 3-month training.

#### Accomplishments

- Over 600 Major Superiors, their Councilors and Administrators of hospitals/health centers of 13 congregations participated in separate two-days of consultation
- All these congregations have formed Steering Committees (SCs) headed by Chairpersons with a mandate to take forward the Collective Aspiration
- Started internal consultations with Administrators of hospitals and care centres
- Regular consultations of National Steering Committee of 17 SC Chairpersons
- Consultations resulted in exploring the feasibility of four Common Projects
- Eight State Coordinators are doing advocacy and networking at various level.
- 125 Sister-Nurses received 3-months' training as 'Community Health Enablers'





# PRATHYASHA - A Ray of Hope for the Terminally Ill Patients

Supported by Misereor, Germany

Duration

October 2015 - September 2018

#### Operational Area

Telangana (CHAI Training Centre, Karimnagar, Warangal, Khammam), Jharkhand (Ranchi &Hazaribagh) and Tamil Nadu (Dharmapuri)

#### Target Group

Terminally-ill Patients and Their Families

#### Partners

7 Member Institutions (MIs) and 3 Regional Units (RUs)



#### **Objectives**

A. 200 personnel (40 doctors & 160 nurses) to be trained by Model HPCC on holistic/integrated palliative and end-of-life care – during the 1st & 2nd project years.

B. At the 25-bed hub HPCC at Medchal, 900 (@300 per year) terminally ill patients are to be taken care of within 3 project years.

C. 2160 of patients are to be supported by 6 HPCUs in 3 project years (@360 patients per HPCU in 3 project years).

#### Project Brief

Being implemented with the financial support of Misereor, Germany. The HPCC intends to be a Model Interdisciplinary Palliative Care-cum-Training Centre with 'whole person' approach. The centre plans to serve annually over 300 marginalized terminally ill/end-stage patients. The centre also provides hands-on training in holistic palliative care to health personnel with the intention of replicating such a model elsewhere in the country, starting with CHAI Member Institutions. This centre will act as a Hub. The project also includes 6 other Holistic Palliative Care Units (HPCUs) in 3 States (Jharkhand, Tamil Nadu and Telangana)as Spokes. These HPCUs will be coordinated (via teleconferencing) by the HPCC, the Hub.

#### Accomplishments

- 144 health professionals in holistic palliative care hospice in 7 batches were trained on palliative care
- 182 in-patients were treated in HPCC and 2001 in-patients in HPCUs
- 4150 patients and their families are supported in home based care with home visits by HPCC & HPCUs
- 34815 people are made aware of positive health, holistic palliative care and project Pratyasha
- Pratyasha has been granted permanent registration valid up to 5 years.

#### Effect

- 1 Model PHCC and 6 HPCUs coordinated by HPCC acting as a hub provide holistic palliative care to the terminally-ill patients and Model HPCC.
- Family members of all patients (at HPCC & 6 HPCUs together) are enabled to provide quality home-based holistic palliative care. HPCC as the Hub is in the process of developing a unique PratyasharenderingCHAI brand of holistic palliative care –with a 'whole person' patient-family-centered approach and socially-culturally-faith linked psycho-spiritual support. The project intends to replicate 'Pratyasha' model in patient homes/home-based care, nurturing local volunteers through ecclesia optics (come, see and experience). Pratyasha model believes that Nature has the power to heal, and hence tries to create nature-rich healing ambience catering to 5 senses: smell, taste, sound, touch, and sight.



Additional Support for the Construction of a Model Holistic 25-Bed Palliative Care Hospice-cum-Training Centre (Pratyasha)

Supported by Italian Bishops' Conference

Duration

November 2016 - October 2017

Operational Area

CHAI Training Centre Campus at Devaryamjal, Medchal district, Telangana State

Target Group
Terminally-ill Patients

# 4

Project Title

Purchase of Furniture and Equipment for Pratyasha(A Ray of Hope)
- AModel 25-Bed Holistic Palliative
Care Centre (HPCC) in Telangana
State, India

Supported by

Missio, Muenchen, Germany

Duration

November 2016 - October 2017

Operational Area

CHAI Training Centre Campus at Devaryamjal, Medchal District, Telangana State.

Target Group

Terminally-ill Patients

#### **Objectives**

Building to house a Model Holistic 25-Bed Palliative-cum-Hospice Care Unit to provide Holistic Palliative-cum-Hospice care to the marginalized terminally ill patients.

#### Project Brief

CHAI set upa holistic/ interdisciplinary ('whole person') palliative/hospice care training centreat CHAI Training Centre Campus, to take care of the terminally ill patients and also to train mainly sister doctors/nurses/social workers involved in CHAI MIs' palliative care units, towards providing physical, emotional and spiritual support for terminally ill patients and their caregivers - including home-based care. This centre will provide technical support to other HPCUs under CHAI.

#### **Objectives**

To furnish Pratyasha with adequate furniture and equipmentto provide quality holistic care to the terminally-ill patients

#### Project Brief

CHAI set up a 25-bed Holistic Palliative Care Centre (HPCC) "Pratyasha" at CHAI Training Centre Campus at Devaryamjal, Ranga Reddy District, Telangana State, with the help of Italian Bishops' Conference and Misereor. CHAI received financial support from Missio to purchase furniture and equipment to furnish the centre with adequate facilities to meet the requirements for serving terminally ill-patients in a better manner.

#### Accomplishments

Purchase of furniture and equipment is in the process.



## Holistic Geriatric and Hospice Care **Training**

Supported by

Conrad N. Hilton Fund For Sisters

Duration

June 2015 - May 2017

Operational Area

Pan India

Target Group

40 Participants Including Sister-Nurses/ Social Workers from Different Parts of the Country

6

Project Title

Training of Trainers on Herbal Medicine for Healthcare Personnel and **Health Workers** 

Supported by

Missionary Sisters of St. Peter Claver

Duration

April 2016 - May 2017

Operational Area

Pan India

Target Group

40 Participants including Sister-Nurses from Different Parts of the Country

#### Project Brief

Participants were trained in holistic geriatric and hospice care.

#### Accomplishments

A 26-day training programmeon "Holistic Care for the Elderly" was conducted for nurses/social workers belonging to the health care institutions, especially hospitals and geriatric centers, run by CHAI Member Institutions

Sister-nurses, social workers were trained on basic nursing care, nutrition, first-aid, medical emergencies, basic psychiatry and psychotherapy with regard to taking care of the elderly.

#### **Effect**

- These trainees have gone back to their communities and trained caregivers and families to look after the elderly and also provided homebased care to many patients.
- They also organized awareness programmes on care of the elderly among marginalized communities.



#### Project Brief

Project aims to train health care practitioners/health workers to provide low-cost treatment by identifying medicinal plants and preparing herbal formulations for common diseases.

#### Accomplishments

- Organized a seven-day training programme for 40 health care practitioners/health workers to provide low-cost treatment to the poor and the marginalized, especially of medically underserved areas, by identifying medicinal plants and preparing herbal formulations for common diseases.
- Trainers prepared various types of medicinal oil as well as conducted herbal exhibition, visited by local school children and teachers.



Spiritual Care-Oriented Training for CHAI Healthcare-Providers in 'Whole Person' Palliative Care for Progressive ill Patients

Supported by

Missio-Austria

Duration

December 2014 to November 2016 (24 months)

Operational Area

Pan India

Target Group

Sister-Nurses/Social Workers from Different Parts of the Country

**Partners** 

250 MIs

#### Project Brief

Training programme provides spiritual care-oriented training for healthcare- providers of CHAI MIs in 'whole person' palliative care for progressive ill patients.

#### Accomplishments

Conducted a 4-week-long accredited training programme in Palliative Care in collaboration with MehadiNawaj Jung (MNJ) Institute of Oncology & Regional Cancer Centre (MNJIORCC) at Hyderabad and Two Worlds Cancer Collaboration Foundation - Canada/International Network for Cancer Treatment and Research.

#### **Effect**

- These trainees have gone back to their communities and trained caregivers and families to look after the terminally ill patients and also provided home-based care to many patients participating local community volunteers.
- They organized awareness programmes on palliative care, especially among marginalized communities.





Project Title

## **Common Procurement Project**

Duration

April 2016 - 31st March 2017

Operational Area

Pan India

Target Group

CHAI Member Institutions Owned/Managed by Various Religious Congregations

**Partners** 

250 MIs

9



Project Title

**Doctors for India** (to be launched)

Operational Area

Pan India

Target Group

CHAI Member Institutions Owned/Managed by Various Religious Congregations

**Partners** 

250 MIs

#### **Objectives**

To empower Member Institutions to make effective Supply Chain Management decisions for obtaining long-term sustainability.

#### Project Brief

CHAI has a network of 3500+ Member Institutions (MIs) ranging from primary healthcare facilities to Multi-speciality hospitals. Most of these MIs do their procurement independently and CPP aims to facilitate common procurement to get better results by using the strength and reach of the network. A centralized process of negotiation will be beneficial to all the MIs as it will ensure improved savings and service and quality products.

#### Accomplishments

- Negotiated and finalized purchases of more than Rs. 2 Crore in equipment, consumables and software in the last 6 months with a saving of Rs 22, 32,000/- for 27 Member Institutions. Saving of 11.5 % on an average per hospital.
- MIs benefited from increased savings and after-sales service/support from vendors
- Reduced future capital expense and maintenance cost
- Patient-service improved as a result of better infrastructure
- Evidence-based decision-making as a result of better feedback mechanism

#### **Effect**

- Enhanced networking and data sharing among the MIs
- Improved product awareness and negotiating power

#### Project Brief

Difficulty in getting Doctors is a key challenge faced by CHAI Member Institutions. The 'Doctors for India' (DFI) project is an attempt to get Lay Doctors to volunteer some of their time (from 2 weeks to 2 years) for Mission Hospitals. Modelled around the concept of the 'Teach for India' program, we hope to inspire Doctors to contribute some of their time for the country.

#### **Progress**

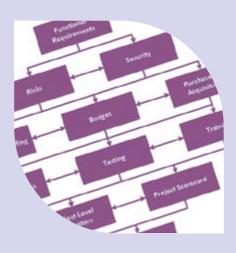
- Website is developed (www.chaidoctorsforindia.org) which contains all the information about the project. It also has the option for Doctors to sign up and give their preferences for volunteering and is currently being populated with information on existing hospitals that require doctors.
- Once the website is officially launched, various 'advertising' options will be created to publicise the project. This would include posters, videos, newsletters, etc.
- First placement under DFI is already initiated with a surgeon who has volunteered his time for 6 months and will be joining from August 2017 in one of the remote hospitals.

#### **Network Oriented Projects**

#### Help Desk



#### **Resource Mobilization**



#### Project Brief

Help Desk is a facility for Member Institutions (MI) to seek assistance in any area related to running of their institutions. CHAI either directly helps the Member Institution (with existing staff expertise) or connects them to experts in the area to guide them.

The CHAI team monitors the process with the experts as much as possible to ensure maximum benefit to the MI.

Under the Help Desk, assistance has been provided in the following areas to MIs:

- Software Assessment & Selection (incl. guidance in hardware purchase)
- Guidance in legal / statutory compliances (Registration & Profession Tax)
- Editing & Refining of Employees' Manual
- Refining of Project Proposal
- Information on DNB Accreditation with NBE (National Board of Examinations)
- Clinical Establishment Act MP (Health Policy)
- Reviewed Health Policy of one religious congregation
- Course in Nursing Assistant Guidance
- GST
- Answering Queries
- Informing about reputable GST Seminars

#### Project Brief

Resource Mobilization is a new initiative that explores new sources of funding and shares this with the Member Institutions. It also tries to raise funds for various causes directly for CHAI or for the Member Institutions. A study was done that identified 5 new areas of Resource Mobilization. These were:

- Venture Capitalists / (Impact) Angel Investors
- Venture Capital Funds / Social Funding Organizations
- CSR / Corporate Funding
- Crowd-funding / Crowd-sourcing
- Competitions / Research Studies etc

Out of this, CHAI explored Crowdfunding successfully as follows:

- Research on best crowd-funding platforms
- CHAI micro-site on Ketto.org (chai.ketto.org)
- Krishna Campaign
- Raised Rs. 80000/- in 2 days
- Two-wheeler bought and handed over
- Update video shared with all sponsors



#### **Scholarships**





#### Sr. Dr. Mary Glowrey Scholars Program (SMGSP)

SMGSP was established to support health professionals from CHAI to gain training and skills in Melbourne, supported by Faculty of Medicine Dentistry and Health Sciences (MDHS), University of Melbourne (UoM) and St Vincent's Health Australia. MDHS and St. Vincent's with their expertise in research and training and CHAI with its pan Indian presence especially at the grassroots, have great opportunity to collaborate in Health Systems Research (HSR) contributing towards quality health delivery and population health in general. CHAI also can motivate the health professionals to upgrade their skills through varied online courses offered by UoM.

SMGSP was launched on 1st December 2016 at UoM, with Rev. Dr. Mathew Abraham, CHAI Director General, as the chief guest on the occasion. The visit of the Director General to UoMand its affiliate institutes for the inaugural of SMGSP, turned out to be an occasion for CHAI to learn in depth more about the legacy of Mary Glowrey from her own homeland which she left to serve the marginalized in India and advocate their cause. It also helped CHAI to explore and strengthen collaboration and cooperation with UoM and its affiliated institutes and organizations.

As Dr. Nathan Grills, the Lead of the Scholars Programme visualizes, "If Sr. Mary Glowrey were the director of CHAI in 2016, she would be thinking about the scholars program as a chance for CHAI to grow the research work, increase their capacity to network with together Christian health programs, to engage in IT/social media, to promote the understanding of how CHAI works, to build organizational leadership and management, to grow the potential to apply for project grants, to focus on key strengths. Whilst still maintaining her devotion to God and obeying His precepts she would acknowledge that the way to grow is to be outwardly focused and not inwardly looking."

SMGSP will help CHAI to conceptualize and implements further its role in Health Systems Research (HSR), continuing the legacy of Mary Glowrey, a "systems thinker" and builder of "networks and collaborations" to promote the health of the marginalized across India.

#### Victoria Scholorship

Since last more than 25 years, through this scholarship instituted by the will of Fr Victoria, CHAI is supporting 4 Sisters: two for MBBS and two for GNM studies annually.

#### Elizabeth Dunne Education Scholarship Instituted

CHAI instituted 'Elizabeth Dunne Education Scholarship' in 2011 with US\$ 3,000/- donated by Ms. Betty Dunne to help Sisters pursue studies in General Nursing/B.Sc. Nursing/Paramedical Courses.

During 2016 - 2017, CHAI partially supported one Sister, to pursue her studies in General Nursing with the interest accrued on the Scholarship Fund

#### McGettigan Sr and Florence Markley Scholarships set-up

Two scholarships in the names of Edward McGettigan Sr and Florence Markley respectively were set up in 2011 with US\$ 6,000 donated by Mr. Edward and Cathy, in order to encourage the pursuit of higher education among Religious Sisters.

Three Sisters were given the scholarships this year from the interest that accrued out of the fund, to pursue their education in Nursing and MBBS.







The two-day National Health Convention & 73rd Annual General Body Meeting (AGBM) of The Catholic Health Association of India (CHAI) was held at St. John's Medical College, Bangaluru on 15th -16th September 2016. The theme for the NHC/AGBM is "Strengthening Our Institutions: Hospitals, Health Centers and Care Centers" as part of "Action 2020: Repositioning for the Future." Around 600 representatives from various member institutions attended.

The programme commencedon 15thwith prayer at 6 am at the tomb of Sr. Dr. Mary Glowrey, the founder of CHAI, followed by procession to St. John's Medical College with torch lit at the tomb.

After Holy Mass and the flag hoisting by Most. Rev. Prakash Mallavarapu, Ecclesiastical Advisor to CHAI, the inaugural ceremony of the two-day programme was started with welcome address by Sr. Deena, President of CHAI. Rev. Dr. Mathew Abraham, Director CHAI presented the AGBM highlights, followed by presidential address by Moran Mar. Baselious Cardinal Cleemis, President, CBCI who emphasized inclusive healthcare and repositioning and strengthening of CHAI institutions without comprising its core values. On this occasion, CHAI Annual Report 2015-16 was released by Most. Rev. Prakash Mallavarapu, and CHAI Herbal Calender 2016 by Sr. Deena. Sr. Sundari, the Provincial of JMJ congregation, launched 'Sr. Dr. Mary Glowrey Fellowship' and Fr. Paul Parathazham Director St. John's National Academy of Health Sciences inaugurated 'Health Pavilions-2016.' Mr. Milan Rao, President and CEO, GE Healthcare- India and South Asia, and Mr. John Doyle, President & CEO, Ascension Holdings, shared their experiences in healthcare delivery. With a view to strengthen the networking among the member institutions, CHAI launched four new initiatives, namely 'Common Procurement', 'Doctors for India', 'National Help Desk' and 'Resource Mobilization'. Fr. Mathew Perumpil, Health Secretary CBCI, Sr. Dr.Beena, President SDFI, Fr. Joe Mannath, National Secretary CRI and Sunil Gokavi, Executive Director, Emmanuel Hospitals Associaation and Fr. Santosh Dias, Secretary of CHAI also graced the occasion.









The thematic sessions by eminent resource persons gavenew and rich insights to participants on how to reposition their institutions to meet the emerging challenges in health sector. The Health Pavilion at the venue provided information on latest medical technologies.

The special consultation in the evening with various experts helped CHAI to fine tune its strategies in its way forward in repositioning its member institutions and building collaboration with other likeminded healthcare networks to provide quality affordable and accessible services to the poor. The day concluded with grand cultural evening.

On 16th Sep. 2016, the final day of CHAI National Health Convention and 73rd Annual General Body Meeting (AGBM) began with Holy Mass presided by Rev. Dr. Mathew Abraham, the Director General, at St. John's College of Nursing Auditorium, Bangalore. Over 700 delegates from the member institutions of CHAI were present. Later in the day, representatives of the respective CHAI regions presented their Annual Reports, highlighting their achievements. Their experiences of empowering communities to be responsible for their own health were an eye opener. Dr.Promod George, Chief Medical Officer of Life Trenz explained how health care delivery can be made affordable and accessible to the marginalized while not compromising the quality. After the formalities of AGBM, presided by Rev. Sr. Deena, CHAI President, the day concluded with a pledge by the participants. Lighting the candles, they committed themselves to the repositioning of their health ministry to reach the unreached, treading the unbeaten paths of Sr. Dr. Mary Glowrey, the Founder of CHAI.



# CHAI SNEHAKIRAN



Started in 2008, Snehakiran is a Holistic Care Centre for People Living with HIV/AIDS (PLHIV). It's a partnering endeavour by CHAI and Order of the Ministers of the Infirm (Camillians). Through a holistic and comprehensive approach, CHAI-Snehakiran provides an array of services for PLHIV and their families, ensuring their dignity and overall quality of life. These include medical care, in-patient and out-patient service, rehabilitation since home-based care, etc.

During 2016-17, there were 394 inpatient admissions (male: 190 (48%) & female: 172 (44%) & children: 32 (8%)). Of these, 64 (16%) died. There were 1208 out-patient visits (male: 584 (48%) & female: 519 (43%) & children: 105 (9%)).

The ART Centres of Hyderabad & Secunderabad and also surrounding districts refer patients to CHAI-Snehakiran, especially for critical care. Other NGOs working with PLHIV like Prajwala, Suraksha, Ark Home, Freedom Foundation, World Vision and Nereekshana affected persons refer PLHIV for inpatient care.





CHAI is always in forefront of capacity building of health personnel through its various projects and in health literacy with special emphasis on individual/social behaviour communication. During the reporting year 2016 -17, altogether 31,323 health professionals, frontline health workers and community heath volunteers were capacitated through various trainings organized under the aegis of various projects. Also, over 1,980,000 households and 5,370,000 were reached by varied measures under health literacy.

At CHAI Training Centre, located in Medchal near Hyderabad, during the year, trainings were conducted for 246 members from various health facilitates, 99% of them being sisters from various religious congregations. These include 3-month long training for 95 sister nurses/social workers, in two batches, on 'Community Health Enablers'. The sister trainees are given opportunities to acquire information and skills in various alternative modes of healing/drugless therapies (such as, Herbal Remedies, Naturopathy, Yoga, Acupressure, Acupuncture, Sujok, Reflexology, Massage and Cupping, basics in physiotherapy, etc.,), family and de-addiction counselling, holistic geriatric and palliate care, current maternal and child health issues, various Govt. schemes, basics in art-based life skill tools and computer applications. Onemonth long trainings were organized for 151 sisters in various batches on holistic geriatric care, herbal remedies, holistic palliative care and spiritual/pastoral care.

In all the trainings, the trainees have been given the space and time to reflect and pray over Christ's Healing Mission. It imparts information and skills to be relevant in today's health context to continue to help the Church to proclaim and practice His Mission – providing compassionate, accessible, affordable and rational quality care, with focus on the marginalized and the vulnerable.

The sprawling training centre campus is refreshing and unwinding with rich vegetation, mango trees and a herbal garden. The centre with residential facilities for over 250 persons has an auditorium with seating capacity of 400 and trainings halls, class rooms and computer lab with wi-fi connectivity.

As part of strengthening the process of communicating CHAI, thorough clean up of the CTC premises of wild grass and bushes had been undertaken, giving it a new look and a conducive ambience for the trainees. The renovated structures, residential facilities, kitchen, training halls and board room with effective sound systems, air-conditioning, etc. have now been attracting more outside organizations to rent the premises for their programmes.

CTC also houses Pratyasha – a model holistic palliative care centre for the marginalized patients suffering from terminal illnesses. The serene environment of the campus provides them with a nature-rich healing ambiance, with seasonal-fruit and vegetable gardens and pet garden.

- Rev.Dr.Mathew Abraham, CSsR, took over as Director-General of CHAI on 1st May, 2016.
- Prime Minister Tony Abbott of Australia Supports the Cause of Sr. Dr. Glowrey's Canonisation.
- The grassroots comics booklet published by CHAI-LF was released in the presence of the Liliane Foundation representatives, Mr JorritFrankhuizen and Ms AnnekeHofs, who had visited CHAI for evaluation work.
- NGO Health Consortium (NHC) members who met in Chennai on 28th and 29th of March, 2016 decided to induct CHAI as a member on the basis of the depth and coverage of work that the organization is involved in as well as on the basis of the discussion and scrutiny conducted as per the NHC criteria filled in by CHAI.
- 'Pratyasha' was inaugurated on April 26th, 2016, at CHAI Training Centre at Devar-Yamjal Village, R.R. District, Telangana. Most Rev Prakash Mallavarappu, Archbishop of Visakhapatanam and Ecclesiastical Advisor, CHAI, blessed the centre.
- A two-day National Consultation on Palliative Care was held on 26th & 27th April, 2016, at CHAI Training Centre, Hyderabad.
- On the occasion of International Nurses Day on 12 May 2016, Rev Dr Mathew Abraham, C.Ss.R, MD, Director-General thanked all the nurses working



at CHAI for their selfless work. Sr Nirmala Mary, Sr Esther Rani, Sr Celine and Ms Prathima Vasu, nurses working with CHAI, were felicitated.

- A special prayer was conducted to mark the occasion of the 59th Death Anniversary of Sr Dr Mary Glowrey on 5th May, 2016.
- A two-day orientation meeting on `Disability-Inclusive Eye Health Programme' was conducted on 16th -17th May at CHAI Central Office.
- As part of the World Environment Day CelebrationCHAI central office had planted the trees in CHAlon 5th June, 2016: a symbolic gesture to inspire the Member Institutions and other Church organizations.
- The 73rd CHAI Foundation Day was celebrated at the CHAI Training Centre, Medchal, on 29th July 2016.Catholic Council of India (CCI) members who were attending their 13th General Board Meeting also joined in the celebration. A special Prayer service led by His Beatitude Baselios Cardinal Cleemis, President, Catholic Bishops' Conference of India (CBCI), was conducted on the occasion.
- Mr N Vasudevan Nair, Editor, Health Action, the monthly magazine published by CHAI, was also felicitated by His Beatitude on having completed twenty-five years of service at CHAI.
- An Orientation-cum-Training Programme for the





- Projects-in-charge and Community Animators/ Social Workers was organized at CHAI Central Office to build their capacity for diabetes services and facilitate the implementation of the project activities.
- CHAI took part in the 'World Blind Walk' held at Hyderabad to mark the World Sight Day on 13 October, 2016, which was organised by Project Vision.
- Dr. ShaliniPrabhata, Head Planning of CHAI presented a paper titled 'Self-care and Foot-care Management of Diabetes' at 4th National NCD Summit on 6th October 2016 at Delhi organized by the Government of India (GOI), in collaboration with the Confederation of Indian Industry (CII) and The Lilly Foundation.
- Engage Disability Facilitators' Meeting was conducted on 8th October 2016 at CHAI Central Office to plan the 'Disability Tool Kit' launch as well as Accessible Church Campaigns.
- CHAI attended the first regional-level consultation for Asia region to discuss the formation of a regional-level alliance network towards bringing disability issues to a higher (regional and/or global) level and for greater impact to achieve higher goals at Asia-Pacific Development Center on Disability (APCD Foundation), Bangkok, Thailand, from 22 to 24 September, 2016.
- The District Advisory Committee (DAC) of Project HealthRise was held on 19th October 2016 at Udaipur in the presence of Govt officials, donors and stakeholders
- A four-day training programme on "Strengthening Quality Management Systems of Blood Banks" was rolled out at Nizam's Institute of Medical Sciences (NIMS), Hyderabad from 29th Nov -2nd Dec' 2016.
- "CHAI Inclusive Cultural and Art Fest 2016" was conducted on 29th& 30th November at the Training Centre, Medchal, as part of International Day of Persons with Disabilities being observed across the world on 3rd December 2016. With 200 children and youngsters with disabilities along with non-disabled children from various districts of Telangana. Ms. MarjoleinKeijsper, the representative of Liliane Foundation, the Netherlands, also took part in the event.
- "Engage Disability" workshop was held from 14th to 17th Nov.2016 at the premises of National Council for the Churches in India (NCCI), Nagpur. The purpose of the workshop was to orient on the tool kit includes whichthe basic concepts on disability and inclusion of disability from a biblical perspective, where CHAI disability team also took
- CHAI participated in the three-day National Consultation held from 7 to 9 November at VishvaYuvak Kendra, New Delhi, organised by World Vision India.













- A three-day Training for Master-Trainers on Prevention & Management of Non-communicable Diseases (NCDs) was organized from 15th to 17th November, 2016, at Hotel Amantra, Udaipur. It was organized in collaboration with CM&HO Office and RNT Medical College, Udaipur.
- World AIDS Day 2016 was marked by Telangana State AIDS Control Society in collaboration with NGOs and other allied departments, CHAI was felicitated with memento.
- Rev. Dr. MathewAbraham, participated in the "Sr. Dr. Mary Glowrey Scholars Program" at University of Melbourne, Australia.
- As part of the canonization process, the grave of the Servant of God Sr. Dr Mary of the Sacred Heart (Sr. Dr. Mary Glowrey) at St Patrick's Church cemetery in Bengaluru, where she was buried in 1957, was opened and her mortal remains were recovered taken to Guntur where Sr. Dr. Mary Glowrey had carried out most of her work with India's poorest from 1920 until her death in 1957.
- The Physiotherapy Centre set up by Diocese of Adilabad Human Promotion Society (DAHPS) was inaugurated on 15 December, 2016, at Gadderagadi, Mancherial, Telangana, was facilitated by CHAI.
- 'World Day of the Sick' wasobserved on 11 February followed by the observance of the 'Healing Ministry Week' in India.
- Two Strategic Partner-Organisations (SPOs)
  of Liliane Foundation (LF) The Catholic Health
  Association of India (CHAI) and Jan VikasSamiti
  (JVS) came together on 10th & 11th January 2017
  at CHAI Central Office to discuss collaborative
  efforts and strengthening of programmes in India.
- Kasaragod TB Forum has been conducting various activities to provide awareness about TB to the public and supporting TB patients for their welfare. As part of this, Health line and Chandragiri Club organized a special event to felicitate the officials of MegralGrama Panchayat on 25 January 2017 in Kasargod.
- On 29th January 2017, Ms. Brigitte, Project Officer, India Desk, Misereor, Germany, visited Pratyasha Holistic Palliative Care Centre, at Devaryamjal, Medchal who had an interactive session with volunteers and beneficiaries
- UNICEF organized a three-day training programme for its Telangana and Karnataka Partners on "Social Behaviour Change Communication (SBCC)" at Hotel Mercur, Hyderabad, from 1st to 3rd Feb 2017 where CHAI also participated.
- CHAI teamed up with the Health Department, Government of Telangana, to observe the World Cancer Day on 4th February 2017.
- A meeting of CHAI and JVS was held on 13 February, 2017 with National Trust Office, New Delhi for discussing steps to avail governmentrun schemes/programmes for the benefit of

- CHAI-LF Partner Organizations which can make a remarkable difference in the lives of children and youngsters with disabilities.
- The Annual Review meeting of the project "Prevention and Control of Diabetes in India" was organized at CHAI Central Office on 17th February 2017.
- On 8th February 2017, Dr.Saritha Kumar, Founder, Sunflower Vedic School, Kandlakoya, along with 15 students, and 25 teachers visited Pratyasha for seeing how Pratyasha Palliative Care Centre functions as well as to learn about the care being given to patients.
- The 3rd Grantee Partners' Meet (GPM) of Project HealthRise India was held from 27th Feb to 1st March 2017 at Hotel Amantra, Udaipur. The meet was hosted by CHAI. Representatives of implementing agencies of CHAI & MAMTA and Abt Associates participated in the meet.
- Dr. Piet Reijer, Consultant, Misereor, Germany, visited Pratyasha Holistic Palliative Care Centre, at Devaryamjal, Medchal on On 26th March 2017 and had an interactive session with community volunteers and they shared their experiences and their joy in spending time and rendering services to the needy patients and their family members.
- "We Ring the Bell" campaign was held worldwide on 22 March, 2017 to realize the Right to Education for every child which is also one of the Millennium Development Goals (MDGs). Nineteen CHAI-LF partner organizations involving more than 11000 children from 50 schools participated in this worldwide campaign.
- Christoffel-Blinden Mission (CBM), organized a three-day (23rd to 25th March 2017) training programme on "Access Audit and Universal Design "at Doddaballapur, Bengaluru. Mr Benjamin, CBM Technical Advisor for accessibility, was the resource person for the training program.
- CHAI conducted a two-day review meeting on Kindermissionswerk-supported Project "Promoting Maternal and Child Health through Mother's Club Project" on 27th and 28th March 2017 at CHAI Central Office, Secunderabad.
- US Consul-General Ms Katherine Hadda visited SVRRGGH, Model Blood Bank, Tirupthi on 5th of April 2017. This model blood bank is supported by CDC/CMAI/CHAI under Quality Management System in Blood Banks.
- CHAI in partnership with UNICEF is implementing the project entitled "Mobilizing Communities for Age-appropriate Marriages and Full Immunization" in four selected mandals (Bonakal, Madhira, Tirymalayapalem and Singareni) of Khammam district through Intensive Social Behaviour Change Communication (SBCC). As part of the project plan, CHAI organized a District-level stakeholders' orientation meeting on 31st March 2017 at Hotel S Park, Khammam.



The project provides students with an opportunity to apply their knowledge to practical work and develop skills in various sectors and contribute as volunteers to health and development initiatives.

## **Accomplishments**

National Internships: Students from the following colleges did their internal placement for varying durations:

- ICRD College, Maharashtra
- Osmania University, Hyderabad, Telangana
- Loyola College, Chennai, Tamilnadu
- Loyola College, Secunderabad, Telangana
- Roda Mistry College& Research Institute, Hyderabad, Telangana
- XIME, Bengaluru, Karnataka
- Indira Gandhi National Open University (IGNOU)

Social Work Colleges that visited CHAI as part of their study tour:

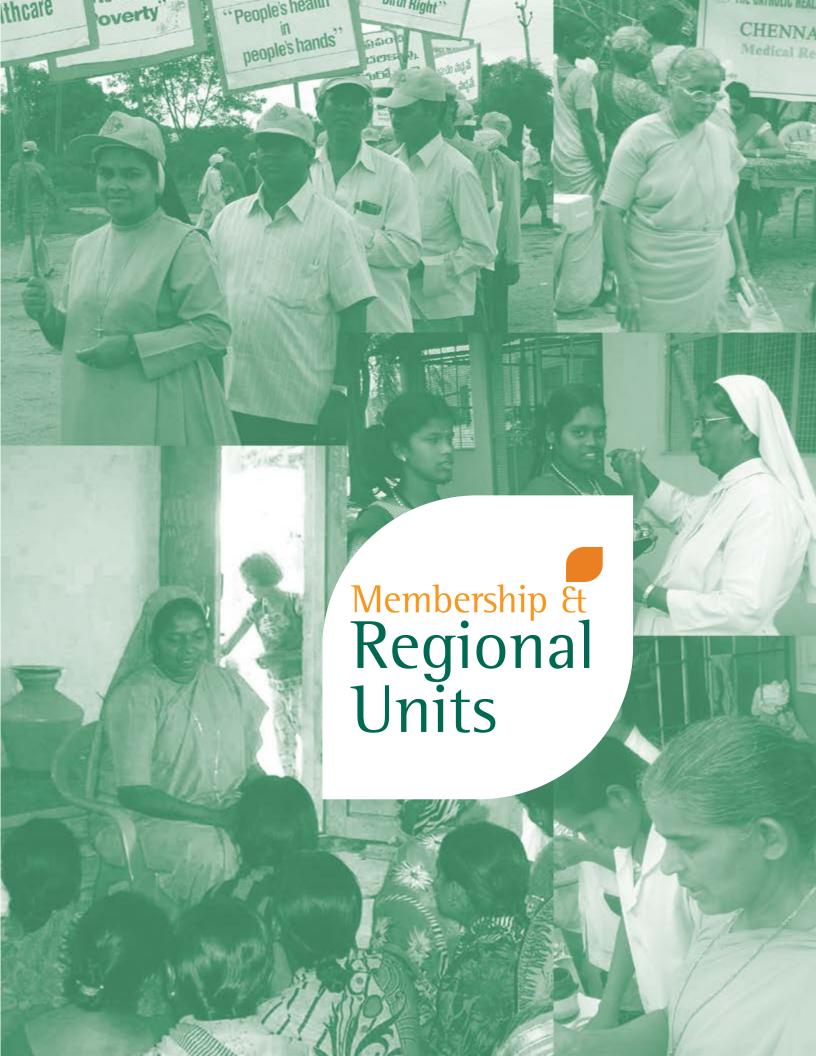
- Loyola Academy, Secunderabad, Telangana
- Bharatamata College of So0cial Work, Kochi, Kerala
- Rajagiri College of Social Work, Kochi, Kerala
- BCCM college of Social Work, Tirunelveli, Tamil Nadu
- Tripude College of Social Work, Nagpur, Maharashtra
- ICRD College of Social Work, Maharashtra
- St. Joseph's College, Kannur, Kerala
- Department of Management Studies, Kannur University, Palayad, Kerala
- CSRD College, Ahmednagar, Maharashtra

Nursing Colleges that visited CHAI as part of their study tour:

- JMJ College of Nursing, Hyderabad, Telangana
- Nursing College, Osmania University, Hyderabad, Telangana
- Government College of Nursing, Hyderabad, Telangana
- Care College of Nursing, Hyderabad, Telangana

International Student Internship

As part of the CHAI International Student Internship Programme, seven students holding BSc Nursing degree from Lawrence's Bloomberg Faculty of Nursing, University of Toronto, Canada, underwent a one-month internship programme in different health care set-ups. The structured Internship programme offered Rural, Urban, hospital-based and community-based placement opportunities. The placements were supervised by and guided by highly qualified preceptors.



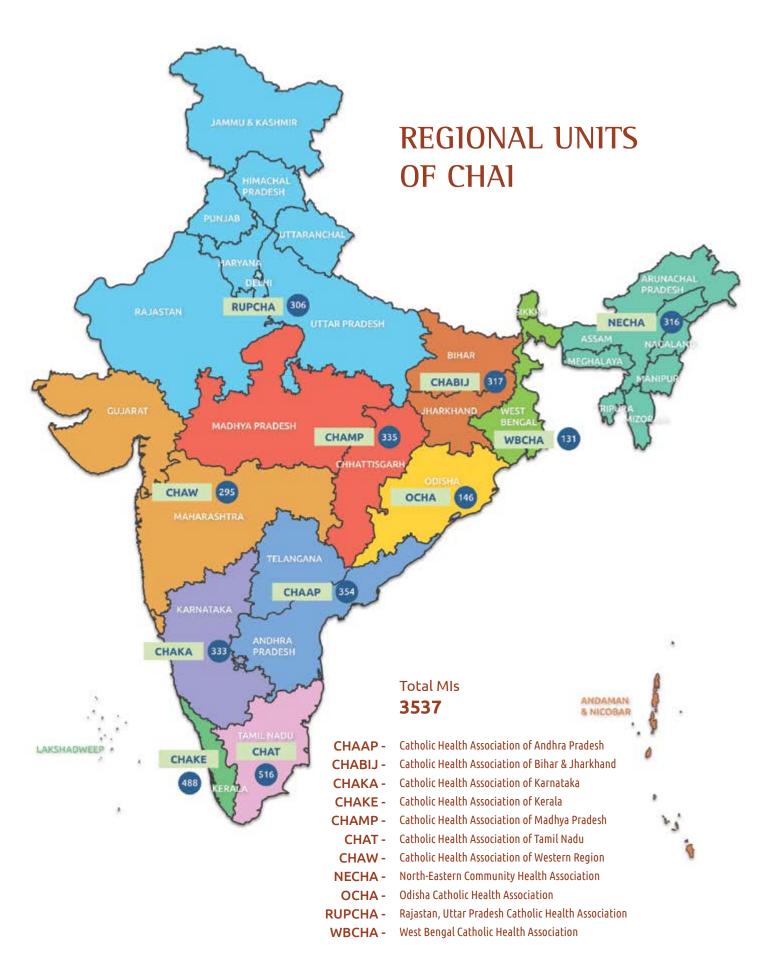
# CAPACITY STATEMENT OF MEMBERSHIP (As on 12th April 2017)

Regional Units	STATE	SSS	NSG	ASM	CENT BE CAPA	TRE D HOSPITAL CITY BED CAPACITY						RUs TOTAL					
(RUs)	(RUs)			20000		0 BEDS	1 to 10	11 to 30	31 to 50	51 to 100	101 to 200	201 to 300	301 to 400	401 to 500	<501	TOTAL	TOTAL
CHAAP	ANDHRA PRADESH	14	3	13	83	45	23	18	7	7	2	1	0	0	216		
	TELANGANA	14	4	13	56	28	14	3	1	2	3	0	0	0	138	354	
CHABIJ	ANDAMAN	0	0	0	3	0	0	0	1	0	0	0	0	0	4		
STATE OF THE PARTY OF	BIHAR	3	0	.7	33	41	7	0	0	0	3	0	0	0	94		
	JHARKHAND	9	1	9	89	84	16	4	5	2	0	0	0	0	219	317	
CHAKA	KARNATAKA	26	1	63	121	66	26	13	8	4	1	0	1	3	333	333	
CHAKE	KERALA	51	13	77	99	53	59	43	34	29	14	4	4	8	488	488	
CHAMP	MADHYA PRAADESH	12	1	12	91	49	6	4	5	2	0	0	0	0	182		
21111111	CHATTISGARH	3	1	4	68	62	7	3	4	1	0	0	0	0	153	335	
CHAT	PONDICHERRY	1	0	2	1	0	0	1	0	1	0	0	0	0	6		
	TAMIL NADU	25	3	21	186	188	45	19	15	5	3	0	0	0	510	516	
	MAHARASHTRA	16	1	33	68	24	15	9	7	3	1	1	0	0	178		
CHAW	GOA	1	0	6	17	4	5	0	1	0	0	0	0	0	34		
CHAW	NAGAR HAVELI	0	0	0	0	3	0	0	0	0	0	0	0	0	3		
	GUJARAT	1	0	3	57	10	5	1	3	0	0	0	0	0	80	295	
NECHA	ARUNACHAL PRADESH	1	0	0	12	8	1	0	0	0	0	0	0	0	22		
NECHA	ASSAM	6	0	11	71	31	3	1	2	1	0	0	0	0	126		
	MANIPUR	2	0	2	19	7	1	0	0	1	0	0	0	0	32		
	MEGHALAYA	- 1	1	0	48	33	1	0	1	1	0	0	0	0	86		
	MIZORAM	0	0	0	11	0	0	0	0	0	0	0	0	0	11		
	NAGALAND	2	0	0	17	5	2	0	0	0	0	0	0	0	26		
	TRIPURA	1	0	0	7	5	0	0	0	0	0	0	0	0	13	316	
OCHA	ORISSA	5	0	6	82	45	3	3	2	0	0	0	0	0	146	146	
	HARYANA	-1	0	1	10	4	1	0	0	0	0	0	0	0	17		
RUPCHA	HIMACHAL PRADESH	0	0	0	1.	3	0	0	0	0	0	0	0	0	4		
Jr Gild	JAMMU & KASHMIR	1	0	0	7	3	1	0	1	0	0	0	0	0	13		
	NEW DELHI	1	0	10	5	4	1	0	0	0	1	0	0	0	22		
	PUNJAB	1	0	1	20	2	3	1	0	1	0	0	0	0	29		
	RAJASTHAN	3	1	2	8	19	7	1	0	0	1	0	0	0	42		
	UTTAR PADESH	12	3	11	48	50	11	8	6	6	1	0	0	0	156		
	UTTARANCHAL	2	0	2	10	7	1	- 1	0	0	0	0	0	0	23	306	
WBCHA	SIKKIM	0	0	0	1	1	0	0	0	0	0	0	0	0	2	2000	
100 (2002217)	WEST BENGAL	9	1	9	64	36	8	2	0	0	0	0	0	0	129	131	
	TOTAL	224	34	318	1413	920	272	135	103	66	30	6	5	11	3537		

## MEMBERSHIP AT A GLANCE

Health Centre 0 - 10 BEDS	2333
Hospital < 11 Beds	628
SSS	224
Nursing School/College	34
Associate/Individual	318
Total	3537

RUs	No. of MIs
CHAAP	354
CHABIJ	317
CHAKA	333
CHAKE	488
CHAMP	335
CHAT	516
CHAW	295
NECHA	316
OCHA	146
RUPCHA	306
WBCHA	131
Total	3537





# **CHAAP**

The Catholic Health Association of Andhra Pradesh & Telangana

States: Andhra Pradesh and Telangana

No. of MIs: **354** 

Districts covered: 44 (AP 13 & TS 31)

Category of MIs						
MIs	AP	TS	Total			
Health Centres (Nil beds)	83	56	139			
Health Centres (1-10 beds)	45	28	73			
Hospitals (11-400 Beds)	58	23	81			
Social Service Centres	14	14	28			
Others	16	17	33			
Total	216	138	354			

#### **About CHAAP**

CHHAP - a Regional Unit of CHAI was founded on 30th July 1988, with its regional office at Kothuru Tadepalli of Vijayawada, Krishna District, Andhra Pradesh. It has 340 Member Institutions (MIs).

#### **PROJECTS**

- Fusion Project supported by Tata Trusts / Modern Architects for Rural India (MARI): Under Swachh Bharat Mission of Government of India, Tata Trusts adopted Krishna District to make it Open Defecation Free (ODF). Collaborating with MARI and Government departments concerned CHAAP worked in 8 mandals of Krishna Distrct. From June 2016 to March 2017, CHAAP completed 355 toilets for eligible households.
- Community Health Services & Scale-Up of Interventions on Communicable Diseases with special focus on HIV/AIDS: Supported by Misereor through CHAI, community-level interventions in 96 villages have been undertaken by CHAAP; also MIs were also helped to take up various government schemes.
- Healing Retreat: Organized Regional-level Retreats for 50 sisters from various MIs of AP & TS.
- Holistic Care Centers (HCCs) for PLHIV: 7 MIs have been maintaining HCCs (4 in AP & 3 in TS), and they together during 2016-17 provided comprehensive care to 1909 inpatients (with 15243 inpatient-days) and to 11660 Out-patients.
- Pratyasha Holistic Palliative Care Centers: 4 MIs from Telangana (Warangal, Khammam, Karimnagar and Medchal Districts) are implementing the project activities and took care of 641 inpatients with 7312 in-patient days. 1189 outpatients utilized services with 1417 out-patients visits.
- Care and Support to children infected and affected with HIV/AIDS: 14 Special

- Care Homes for Children living with HIV (CLHIVs) -- 5 Telangana and 9 Andhra Pradesh -- provided nutritional support to 613 children (351 girls and 262 boys).
- Social Behaviour Change Communication project is being implemented in 100 villages of Khammam district to prevent child marriages and enhance universal immunization.
- Under Hilton Fund Project, CHAI collaborated with CHAI Central office to facilitate various religious congregations for repositioning health ministry.
- Cataract surgeries for poor: 450 cataracts surgeries were conducted for marginalized patients by one MI.
- Greening Efforts: With support from Misereor through CHAI, solar power units were installed in 6 member hospitals/health centres.
- Quality Management System of Blood Banks, supported by CMAI, NACO and CDC is being implemented in 14 states and 2 Union territories. In CHAAP region, 61 blood banks from AP and 51 from Telangana are part of this initiative. During 2016-17, 369 blood bank staff including Medical officers, Nurses and Lab technicians were trained under the project.
- Disability Rehabilitation Programme: 23 Partner-Organizations (POs) provide support for 2169 Children/Youth with Disability (C/YwD)

- World Toilet Day: On the occasion of World Toilet Day, 12 MIs conducted awareness and health education programmes involving local schools and organizing women's rally in all 96 villages.
- World AIDS Day: World AIDS Day 2016 was observed on 1st December to raise awareness in the community about HIV/AIDS. Conducted awareness campaign through rallies, mass media and distributed nutritional food.
- Free Eye Camp: A Free Eye Camp was organized in association with Gifford Memorial Hospital, Nuzveed, on 27-03-2017. Nearly 90 patients attended this camp. Out of this, 23 were identified for free cataract surgery. The patients were provided with eye drops, spectacles and other medicines.
- World Older Persons Day was organized on 1st October, at SH Bhavan - a home for the elderly in Kotturu Thadepalli in Krishna district of AP, participating the inmates. Gifts and nutritional food were also distributed.
- World Women's Day was observed by various MIs on 8th March 2017. Eminent women were felicitated and awareness on women-friendly legislations and health issues was also created.

#### **About CHABIJAN**

CHABIJAN's main thrust is the co-ordination of the Member Institutions (MIs) and the peopleoriented–community-based primary health and sustainable development. CHA-BIJAN was founded as part of decentralization process during the Golden Jubilee Year of CHAI on 4th May 1993.

#### **PROJECTS**

- Improving the Health Status of Severely Malnourished Children & Mothers in the semi-urban belt of Jharkhand (MTC): The project is being implemented through 8 MIs in 80 villages of Jharkhand through the support of Kindermissionswerk, Germany. 62.58% of severely malnourished children and 86.04% of moderately malnourished children have been cured. More than 1200 children and women benefitted from the health camps.
- Youth United with Action in Jharkhand (YUAJ): The project is being implemented through 6 MIs in 3 Dioceses covering 60 villages of Jharkhand with support from MISEREOR, Germany. 178 Adolescent youth groups have been formed.
- Distribution of Vitamin A, Multivitamin & Albendazole: Supported by Vitam Angels USA, pregnant women, breastfeeding mothers, and children under five were provided with Vitamin A, Multivitamin & Albendazole Tablets. 695,500 Vitamin A & 113,000 Albendazole doses were completed for children under-five; also, multivitamin was provided to 1,631 pregnant and lactating women.
- Hilton Foundation Project is being implemented with the support of CHAI, facilitating various religious congregations working in health sector to revisit and reposition their respective health ministry as part of repositioning the healing ministry of the Church. Under the leadership of the State Health Coordinators of Jharkhand and Bihar, supported by the project, various measures have been undertaken to build and strengthen networking among these religious congregations, diocesan health units and CHAI MIs. As part of it conducted Advocacy & Networking and Review meetings with hospitals and health centres of 6 Dioceses.
- *Project Axshya:* Being implemented in 13 districts, covering 556,203 populations; 11,049 persons were tested at DMC, and out of these, 1,425 TB cases were identified and put on treatment.
- Holistic Care centers for PLHIV: 2 MIs, one from Bihar and another from Jharkhand, are partnering with the project. 502 in-patient (with 2,129 days) were provided with medical, nutritional, counselling and palliative care support; 2,470 outpatients were also taken care of.
- Prevention & Control of Diabetes: 5 MIs (4 from

# **CHABIJAN**

The Catholic Health Association of Bihar, Jharkhand & Andaman



States: **Bihar, Jharkhand and Andaman**No. of Mls: **317**Districts covered: **51** 

MIs	Total
Health Centers ( Nil beds)	125
Health Centres ( 1-10 beds)	125
Hospitals ( 11-300 Beds)	38
Social Service Centres	12
Others	17
Total	317

Jharkhand and 1 from Bihar) are implementing the project. Reached 51,283 people with awareness measures. Screened 7,746 through 192 health camps.

- *Holistic Palliative Care Centers*: 2 MIs from Jharkhand supported 976 inpatients in the centres (with 6039 in-patient days) and 358 out-patients.
- Care and Support to children infected and affected with HIV/AIDS: 2 Member Institutions (1 from Jharkhand and another from Bihar) supported 80 children (44 girls & 36 boys) with nutritional support.
- *GAVI Project:* Alliance for Immunization in India (AiH) is a platform of Civil Society Organizations (CSOs) facilitated by CHAI. It operates in four states including Bihar and Jharkhand. There are 40 CSOs under Bihar Chapter, and 36 CSOs under Jharkhand Chapter of AiH.
- *Mother's Club Project:* Two MIs provide free comprehensive maternal and child health services to 152 mothers and their newborns.

#### **SPECIAL EVENTS**

Supported by Action of Natural Medicine (ANAMED International), CHABIJAN conducted:

- State-Level ANAMED training from 12th to 19th February, 2017 at CHABIJAN Training Center, Ranchi. 20 Sister Nurses from various Regional Units of CHAI and 8 health workers were trained.
- Three-day Diocesan level ANAMED training in herbal medicine was organized in Simdega & Gumla Diocese for 40 sister nurses and the health workers.
- Networking Meeting: Under MTC Project, CHABIJAN organized a one-day Networking Meeting on 20th December, 2016 on the theme "Improving the Health and Nutritional Status Children (U5) and women in Jharkhand." Under YUAJ Project, a similar Networking meeting was organized on 26th April 2017 on the theme "How to promote better skill development among the youth."



States: **Karnataka** No. of Mls: **333** Districts covered: **26** 

MIs	Total
Health Centers (Nil beds)	121
Health Centres (1-10 beds)	66
Hospitals (11-500 Beds)	56
Social Service Centres	26
Others	64
Total	333

#### **About CHAKA**

CHAKA was formed in the year 1992, to provide opportunities for health organizations such as hospitals, health care centers and other community-based health projects actively engaged in health activities and training programmes. CHAKA facilitates networking among these institutions to promote health-related activities in Karnataka.

#### **PROJECTS**

- HIV/AIDS prevention and skill development programme in Karnataka: Project is supported by Misereor for two years from January, 2017 to December, 2018. The target area of the project is Northern Karnataka with high prevalence of HIV/AIDS cases. As of now, 10 member institutions are partially supported to carry out HIV/AIDS-related activities.
- Axshya Project: Axshya Project is being implemented in 16 districts in Karnataka with 20 Mother NGOs and 9 Independent Community Volunteers (ICVs), out of which 2 are MIs. The project covers 430654 population. Out of 3727 persons tested at DMC, 359 tested positive.
- Holistic Care Centres (HCCs) for PLHIV: 4 MIs from Bellary, Kolar, Bengaluru and Badravati, took care of 1529 inpatients with 9926 in-patient days, and 2537 out-patients. They were provided with medical, nutritional, counselling and palliative care services.
- Care and Support to children infected and affected with HIV/AIDS: 1 Special Care Home for CLHIV provided nutritional support to 40 children (37 girls and 3 boys)
- Disability Rehabilitation: The project is implemented through 6 partnerorganizations, providing support for comprehensive tailor-made and rights-

based assistance to 510 children and youth with disabilities.

- Healing Retreat: A Healing Retreat was organized at Mother Theresa Charitable Hospital Gulbarga for 25 religious working in the health care sector, from 26th to 29th June 2017, with Fr. Bartholomew as the retreat preacher.
- *Diocesan CHAI Unit meetings* were held in the dioceses of Gulbarga, Chickmagalur, Belgaum, Bellary, Shimoga, Udupi and Bhadrawathi.
- Karnataka Regional Health Commission Meeting: The Health Commission Secretaries of all the 14 Dioceses were called for a meeting at KROSS, Bengaluru, for a one-day consultation on revising the Pastoral Plan of the Regional Health Commission. It was decided to hold similar consultations in all the 14 Dioceses.

#### **About CHAKE**

CHAI Kerala is completing its 55th year of journey as one of CHAI's Regional Units. It has made tremendous impact in the Health Care System through its dedicated service in the field of Health Care & Social Service. CHAI Kerala, consisting of 5 Zones with 488 members, includes super-speciality, speciality, medium, and small hospitals; also, various health and developmental projects, being implemented mostly by Social Service Societies of dioceses and religious congregations.

#### **PROJECTS**

- *Project Axshya:* The Project is being implemented in 13 districts of Kerala. 30 NGOs and more than 100 volunteers are associating with project implementation. Covered 285,324 population; 131 TB positives were identified, out of 3,589 persons tested at DMC. AYUR AXSHYA, a Joint Initiative with AMAI (Ayurvedic Medical Association of India ) for TB elimination in all districts of Kerala was started. Under this initiative, all the Ayurvedic Doctors are being sensitized on TB and patients are referred to DMCs for diagnosis.
- CHAI Kerala Common Purchase Program: The CHAI Kerala Common Purchase Committee has signed Vendor contracts with more than 30 companies and manufacturers for quality products.
- NABH: Official Inauguration of 70 CHAI Kerala Hospitals for NABH entry-level accreditation was launched on 13th February 2017 at POC, Palarivattom. The 70 participating hospitals were divided into 6 clusters (Waynad, Kannur, Trichur, Ernakulam, Thodupuzha and Kottayam).
- CHAI Kerala Healing Retreat: CHAI Kerala organized a Healing Retreat for its Member Institutions on 4th February 2017 to 8th February 2017, at Carmel Retreat Centre Manjummel. 20 members participated with Fr. Mathew Perumpil, CBCI Health Commission Secretary and Fr. Peter Thiruthanathil, (Yoga) as the facilitators.
- Holistic Palliative Care Centres: One MI in Palakkad implements the project and served 362 inpatients with 10,824 days.
- Nutrition support for terminally ill: Two Palliative Care Centres provided nutritional support to 33 terminally ill patients.
- *Disability Rehabilitation:* Implemented through 32 POs, the project provided support for comprehensive tailor-made and rights-based assistance to 3,236 children/youth with disability.
- Mothers' Clubs: The project provides comprehensive maternal health care to 210 pregnant women identified through two CHAI member hospitals, for a period of 1000 days, from pregnancy to the child's 2nd birthday.





States: **Kerala** No. of MIs: **488** Districts covered: **26** 

MIs	Total
Health Centers ( Nil beds)	99
Health Centres (1-10 beds)	53
Hospitals (11-1200 Beds)	195
Social Service Centres	51
Others	90
Total	488

- Stay order on wage protection System: CHAI Kerala has obtained a Stay Order on WPS (Wage Protection System) (which was introduced by the government of Kerala vide notification G.O(P) No.84/2015/LBR dt: 8th July,2015) from Hon'ble High Court of Kerala on 28th June 2016.
- CHAI Kerala Managerial Training Program: This program was conducted from 21st to 23rd July 2016 for 50 Hospital Directors / Administrators / HR & Financial Managers, to equip them with practical knowledge and managerial skills for a professional approach in the administration.
- Blind Walk 2016 Eye Donation: World's Sight Day on October 13th was observed by CHAI Kerala in collaboration with Project Vision and Sahrudaya Welfare Services, Ernakulam. On the occasion, it organized Kochi Blind Walk in which Bishop Sebastian Adayamtharath, Mr. Hibi Eden MLA, Mrs Soumini Jain, Kochi Mayor and other dignitaries attended, along with over 600 participants from various sectors. As part of the Program, 'Sahrudaya Melody' a music event was performed by the physically disabled persons.



# **CHAMP**

Catholic Health Association of Madhya Pradesh & Chhattisgarh

States: Madhya Pradesh and Chhattisgarh

No. of MIs: **335** 

Districts covered: 43 (MP 29 & CG 14)

MIs	MP	CG	Total
Health Centers ( Nil beds)	91	68	159
Health Centres ( 1-10 beds)	49	62	111
Hospitals (11-200 Beds)	17	15	32
Social Service Centres	12	3	15
Others	13	5	18
Total	182	153	335

#### **About CHAMP**

Registered in 1998, CHAMP is one of the Regional Units of CHAI working in the rural and urban pockets of Madhya Pradesh and Chhattisgarh. It caters not only to health needs of the community but also is playing a major role in it. The major field of intervention of CHAMP has been HIV/AIDS, Tuberculosis, Malaria and Communicable and Non-Communicable Diseases. It has provided community health services and collaboration with various national-diseasecontrol programmes.

#### **PROJECTS**

- Provision of Community Health Services and Scale-up of Interventions on Communicable Diseases: A herbal medicine preparation training was organized at the village-level and 72 village-level medical camps were organized. Conducted special village-level activities to create awareness on ODF in 64 villages in MP and CG. Under the Project, 1488 people were linked with Income-Generation Programme and 1109 linked with Social Security Schemes.
- AXSHAYA: The project covered a population of 393,503. 6,200 persons were tested at DMC and 705 TB positives identified. Axshya Kiosks (AKs), located in community, are TB Information, Counselling and Flexi DOTS Centres. A total of 8 AKs were established in Chhattisgarh (Durg and Bhilai: 4, Bilaspur: 3 and Rajnandgaon: 1).
- Holistic Palliative Care Unit: One institution in Ujjain implements the project activities. During 2016-17, comprehensive care and support was given to 148 inpatients (with 722 inpatient days) and 404 outpatients.

- Care and Support to children infected and affected with HIV/AIDS: Two Special Care Homes in Chhattisgarh provided nutritional support to 37 children.
- Prevention & Control of Diabetes in India: One MI in Bhopal spread awareness on diabetes among 5521 people; screened 1571 people through 37 medical camps.
- Mother's Club: Implemented through 2 MIs, more than 250 mothers were provided with medical, nutritional and psychological support.
- Solar project: During 2016-17, solar power units were installed in 6 MIs in Chhattisgarh as part of providing uninterrupted power supply in remote rural health facilities
- Quality improvement in Blood Banks: The project is implemented to improve quality management systems in blood bank by capacity-building of Blood Bank staff. 25 staff including Medical officers. Lab technicians and Nurses from 16 Blood banks have been trained under the project in the last one-year in Chhattisgarh.
- CBM Project: Implemented through 2 MIs for prevention and control of blindness. 2528 marginalized patients were supported for cataract surgeries.



# **CHAT**

The Catholic Health Association of Tamil Nadu

States: Tamil Nadu & Pondicherry

No. of MIs: **516**Districts covered: **31** 

#### **About CHAT**

Established in 1997 as one of the Regional Units of CHAI, CHAT is catering to the needs and requirements of CHAI MIs, working with over 10,000 village communities of Tamil Nadu and Pondicherry States. CHAT promotes community-based integral health to the poor and marginalized sectors of people, especially children, women and elders through these MIs.

#### **PROJECTS**

- *Project Axshya:* The Project is implemented in 10 districts of Tamil Nadu, covering 350,131 population. During 2016-17, 8,075 persons got tested at DMC. Of these, 439 tested positive. Ten Axshya Kiosks (AKs) have been established in urban sites of Salem and Coimbatore. In Salem, 5 AKs are located in Urban Health Centres and 1 in DTC. They function as DMCs and are completely manned by Axshya staff. In Coimbatore, 4 AKs provide TB information, flexi DOTS, counselling along with contact tracing and domiciliary visits.
- Community Health Services and Scale-up of Interventions on Communicable Diseases: As part of linking the partnering MIs with Govt. health programmes, 28 MoUs have been signed under SACs, PPTCT, NDCP, RNTCP, NELP and NHM. Through Community Health Volunteers, villagelevel activities are undertaken, including the facilitation of National Saving Schemes, Old Age Pension and Sanitation Programmes.
- Hilton Foundation Project for Sisters: CHAT in collaboration with CHAI facilitated 3 congregations FIHM, SMMI and CTC to revisit and reposition their health ministry. Ten sister-nurses/social workers underwent 3-month training as Community Health Enablers.

- MIsTotalHealth Centers (Nil beds)187Health Centres (1-10 beds)188Hospitals (11-400 Beds)89Social Service Centres26Others26Total516
- Holistic Care centers for PLHIV: 723 inpatients (with 7,174 inpatient days) and 3,559 outpatients were provided with comprehensive care.
- *Pratyasha Holistic Palliative Care Unit:* One HPCU from Dharmapuri had taken care of 225 inpatients (with 2444 inpatient days); also, supported 358 outpatients.
- Care and support to children infected and affected with HIV/AIDS: 5 Special Care Homes provided nutritional support to 200 children. These apart, 5 Palliative Care Centres provided nutritional support to 120 terminally ill patients.
- *Disability Rehabilitation project:* Implemented through 12 POs, comprehensive tailor-made and rights-based assistance is provided to 993 children and youth with disabilities.
- *Pastoral Care:* 5 hospitals have started Spiritual and Pastoral Care Units in their hospitals.

- *NABH:* Three Hospitals (Assumption Hospital Erode, St. Joseph Hospital Dindigul and St. Mary's Hospital Salem) have received NABH entry level Accreditation.
- *Spiritual Care Retreat:* Healing Retreat was organized for 13 participants, from 20th 23rd January 2017 at Amalashram, Srirangam, Trichy, with Rev. Fr. Arputham and Fr. Raja as retreat facilitators.



States: Maharashtra, Gujarat, Goa & Nagar Haveli

No. of MIs: 295 Districts covered: 71

MIs	Total
Health Centres (Nil beds)	142
Health Centres (1-10 beds)	41
Hospitals ( 11-400 Beds)	51
Social Service Centres	18
Others	43
Total	295

#### **About CHAW**

The Catholic Health Association of Western Region (CHAW) was registered in 2001. It covers Maharashtra, Gujarat, Goa and Nagar Haveli. Covers 71 districts and 295 MIs. It implements various health programmes as well as programme to empower the community.

#### **PROJECTS**

- Hilton Foundation Project for Sisters: Collaborated with CHAI Central Office to facilitate various religious congregations to revisit and reposition their health ministries. The State Health Coordinator, supported by the project, works towards networking among the member hospitals and health centers belonging to these congregations.
- Greening Efforts: Solar power units were installed in 6 member hospitals/ health centers.
- Holistic Care centers for PLHIV: Through 1 HCC run by an MI, 335 in-patients (with 2873 days) and 702 out-patients were provided with nutritional, medical, counselling and palliative care support.
- Akshaya project: Being implemented in 20 districts and 2 urban sites, it covers 799,395 Population. During 2016-17, 10,314 persons got tested at DMC. Of these, 962 tested positives. 13 Axshya Kiosks are established in urban sites of Maharashtra (Aurangabad: 6 and Nashik and Malegaon: 7). Located both in public facilities and in the community, these kiosks are providing TB services effectively to the patients and the public.
- Prevention & Control of Diabetes in India: One MI from Chandrapur sensitized 4,471 people on diabetes; 1,604 people were screened for diabetes through 38 medical camps.

- A Healing Retreat was organized for 16 Sisters from Gujarat and Maharashtra at Igatpuri in Nashik. The participants included directors, administrators, doctors and department heads of various hospitals/health centers.
- Workshop on `Common Procurement process' was organized on 18th June 2016, for 19 directors, administrators, doctors of various member hospitals/health centers.
- Capacity-building workshop on 'Human Resource Management' and `Medico Legal Issues' was organized for 33 participants, on 19th and 20th November 2016 at Andheri East, Mumbai.
- One-day capacity-building seminar on 'Managerial Skills & Managing Crisis' was organized for 24 CHAW Members, at Atma Darshan, Andheri East, Mumbai on 3rd February 2017.



# NECHA The North Eastern Community Health

Association

States: Arunachal Pradesh, Assam, Manipur, Meghalaya, Mizoram, Nagaland and Tripura

No. of MIs: **316**Districts covered: **77** 

#### **About NECHA**

NECHA was established in 1985. The region was very backward in the fields of education and health compared to other states in the country. Today, thanks to the efforts of NECHA, networking among the health care providers of the Catholic Church of the region gradually gets strengthened. NECHA, has now great influence in the rural areas of many states through its empowerment programme for women and child care, disability rehabilitation assistance to the disabled and advocacy measures for the marginalized.

#### **PROJECTS**

- Empowerment of women and children: The programme supported by Manos Unidas, has been implemented in 10 villages of Nagrijuli area of Baksa District, Assam for the last two years.
- *Project Axshya*: Being implemented in 4 districts of Nagaland through DAN; covered 59,657 people; 1,183 persons tested at DMC, and of these, 146 tested TB positive.
- Quality improvement in Blood Banks: The project is being implemented in NECHA region to improve quality management systems in 17 blood banks. Capacity-building trainings were organized for their 49 staff, including medical officers, lab technicians and nurses.
- Holistic Care Centres: Implementing the project, one MI provided comprehensive support for 181 PLHIV with in-patient services and for 908 outpatient PLHIV.
- Care and Support to CLHIV: Through 3 MIs, 71 children Infected and Affected with HIV/AIDS were supported.

MIs	Total
Health Centres (Nil beds)	185
Health Centres (1-10 beds)	89
Hospitals (11-200 Beds)	15
Social Service Centres	13
Others	14
Total	316

- Nutritional Training by Vitamin Angles Team.
- CHAI Healing Retreat at NECHA.
- Strategic Planning meetings and vision 2020 in Diocesan Units (DUs).
- AGBM of DUs of the region and of NECHA.
- Intensive Assamese language course.
- Facilitating registration of new MIs with CHAI.
- Solar Power Project of CHAI is being implemented in NECHA region. Installation of solar power units in 30 MIs is in process.
- Skill training & placement of school dropouts.
- Building harmony among various religious & linguistic groups through awareness classes.
- Enhancing communication among Diocesan Units by sharing success stories.



## **OCHA**

Orissa Catholic Health Association

> States: Odisha No. of MIs: **146** Districts covered: 30

MIs	Total
Health Centers ( Nil beds)	82
Health Centres ( 1-10 beds)	45
Hospitals ( 11-100 Beds)	08
Social Service Centres	05
Others	06
Total	146

#### **About OCHA**

With special focus on the development of the marginalized communities/ families, OCHA as one of CHAI's Regional Units, was established in 1996, comprising CHAI MIs. Most of the MIs under OCHA are located in the hard-toreach areas of Odisha. OCHA is also working very closely with Government Institutions and other like-minded NGOs.

#### **PROJECTS**

- Community Health: 18,375 people are being reached with health messages through 10 MIs in 50 villages. During 2016-17, 2,833 people were linked with Income-Generation Programme. Undertook awareness on 'Open Defecation Free Odisha' in operational villages and oriented over 3500 people on the issue.
- Community Empowerment for Sustainable Reproductive and Child Health **Project** is being implemented in Kandhamal and Sundergarh Districts of Odisha.
- Disability Rehabilitation: Being implemented through 6 POs, comprehensive and rights-based assistance is provided to 522 children and youth with disability.
- Holistic Community Health & Development of Women and Children is being implemented in 450 villages in Odisha.
- Prevention & Control of Diabetes in India: One MI from Sambalpur

implements the project and organized 38 medical camps, reaching 10,498 people with awareness messages; 1,564 people were screened for diabetes.

 Care and Support to Children infected and affected with HIV/AIDS: One Special Care Home for CLHIV in Sambalpur provided nutritional support to 20 children

- School health education programmes were organized by 32 health centres at different village schools, covering a total of 866 students (boys: 395 & girls: 471), the students got information on communicable diseases, health and hygiene, importance of hand washing, as well as traffic rules.
- 560 adolescent girls were imparted knowledge on various topics like physical growth, mental development, adolescent health and life skills, such as, problem solving, decision-making, goal setting, critical thinking, communication skills, assertiveness, skill for coping with stress, etc.

#### **About RUPCHA**

RUPCHA, one of the CHAI Regional Units, is a network of 261 member institutions, of hospitals, primary health centers, social service societies and various hospices. All the member institutions are strategically placed in various north Indian States to cater to the most deprived sections of the society.

#### **PROJECTS**

- 'Integrated Approach to Community Empowerment & Health among Slum Dwellers & Migrant Workers of Jahangirpuri Slum, Delhi': Launched in May 2017, this is a community based health project for Jahangirpuri Urban slum area, focusing on TB.
- Central Purchase Scheme: Since 4 years, the central purchase system, one of the common projects by RUPCHA, facilitates the member institutions to make use of collective bargaining to purchase disposables for hospitals/health centres with best price possible, getting the maximum savings; currently, it is extended to purchase of equipments too.
- ECHO: Project ECHO Extension for Community Healthcare Outcomes is an innovative healthcare program developed to manage complex medical conditions in rural and underserved areas of India. Through the use of technology, project ECHO bridges the gap between urban healthcare specialist and clinicians in rural settings.
- Electronic Health Records (EHR) Project: RUPCHA and our Mission Hospitals, with an objective of creating and maintaining an electronic health record of their patients' medical history, have agreed to support 'Kronicle' in developing a biometric enabled and Aadhaar-linked-Electronic Health Record database software ('EHR Project'). Kronicle will endeavor to develop, implement and maintain the EHR Project and can be utilized as a centralized resource pool with data recorded by different healthcare providers and services.
- Solar Project: The 3rd phase of the project for undertaking installation of Solar solutions in 70 member institutions of CHAI through the support of Misereor and the German government is being implemented with 10 MIs from RUPCHA benefitting through this project. In the 2nd Phase, 8 MIs' hospitals/health centres got benefitted from this project.
- Community Health Project: This project is being implemented through member-institutions in 80 villages with the help of 10 community health coordinators & 80 community health volunteers and given health counselling to 54,291 people through home visits and referred 9,353 people to health care institutions for minor ailments.
- AXSHYA Project: Axshya project is being

# **RUPCHA**

Rajastan & Uttar Pradesh Catholic Health Association



States: 8 States - Uttar Pradesh, Rajasthan, Punjab, Haryana, Delhi, Himachal Pradesh, Jammu & Kashmir and Uttarakhand and Chandigarh (UT)

No. of MIs: **306** 

MIs	Total
Health Centres (Nil beds)	109
Health Centres (1-10 beds)	92
Hospitals (11-300 Beds)	53
Social Service Centres	21
Nursing School/College	4
Others	27
Total	306

implemented in 5 districts of Punjab and 6 districts in Uttar Pradesh, covering 463,464 population; tested 7,828 persons at DMCs, and of these, 814 TB cases got identified.

- Prevention & Control of Diabetes in India: 2 MIs (1 from Rajasthan and another from Himachal Pradesh) conducted 68 camps wherein 2,257 people were screened for diabetes; 69 awareness programmes were conducted wherein 6,032 people got information on diabetes.
- Care and Support to Children Infected and Affected with HIV/AIDS: One MI in Delhi, taking care of children infected and affected with HIV/AIDS, provides nutritional support to 15 boys.
- *HealthRise project* is being implemented, in two blocks (Girwa & Jhadol) of Udaipur district in Rajasthan, to enhance detection, management and control of diabetes and heart disease.
- *Mother's Club:* Four MIs provide free comprehensive maternal and child health services to 388 mothers and their newborns.
- Self-care and Foot-care Management of Diabetes is being implemented in the districts of Sitapur, Lalitpur, Shahjanpur and Varanasi of UP and provided foot care services to 3,505 diabetics
- *GAVI Project:* The Alliance for Immunization in India (AiH) is a platform of Civil Society Organizations (CSOs) facilitated by CHAI. It operates in four states including Rajasthan and UP. 66 CSOs are part of the Rajasthan coalition and UP chapter has 34 member CSOs.
- Quality Improvement in Blood Banks: The project is implemented to improve

quality management systems in blood bank by capacity building of blood bank staff. 149 staff including Medical officers, Lab technicians and Nurses from 50 Blood Banks have been trained under the project in the last one year.

#### **SPECIAL EVENTS**

- Management Development Program (MDP): RUPCHA organized a 3-day training program on 'HR Practices in Healthcare Sector' to enhance the efficiency of managing health care institutions.
- World Blind Walk: More than 14 Medical. Social, Educational and Religious agencies were involved in organizing Blind Walk in Delhi with five National partners EBAI, AOL, CHAI, NFB and 104 Health Line along with Project Vision. In Delhi, 100 visually Challenged Persons led 600 blind folded people with the help of 50 Volunteers.
- MoU with Jesus & Mary College, Delhi: RUPCHA and Jesus and Mary College, New Delhi, mutually agreed on to a Letter of Consent (LoC) to increase the cooperation between them, in areas of mutual interest over the next five years. This includes training, internship programme and employment opportunities.



States: West Bengal and Assam No. of Mls: 131

Districts covered: 24 (West Bengal -20 districts and Sikkim - 4 districts)

MIs	Total
Health Centres ( Nil beds)	65
Health Centres ( 1-10 beds)	37
Hospitals ( 11-50 Beds)	10
Social Service Centres	9
Others	10
Total	131

#### **About WBCHA**

As one of CHAI's Regional Units, its mission is to reach out to the people who are unhealthy due to physical, emotional, spiritual, psychological, and other illnesses so as to make them live a wholesome life through collective effort by providing affordable and effective health care.

#### **PROJECTS**

- Community Health Services & Scale up of Interventions on Communicable Diseases with Special Focus on HIV/AIDS: The project is being implemented by 10 MIs covering altogether 50 villages, undertaking various community health interventions, in collaboration with the local administration. During 2016-17, the partnering MIs facilitated the construction of 123 toilets for BPL families in 5 villages; collaborated with the Agricultural Dept. and received support for ginger cultivaion for 73 families per village.
- Solar Project: In last one year, under 2nd phase of the Solar Project, supported by Misereor through CHAI, solar power units were installed in 3 MIs as part of providing uninterrupted power supply in remote rural health facilities.

- Organized a 3-day retreat for the WBCHA officebearers, along with 20th AGBM of WEBCHA, at Loyola Pastoral centre Matigara, Shiliguri, from 17th to 20th July 2016.
- On November 22nd 2017, the Unit joined a rally at Kolkata on right to food and maternity entitlements, organized by Right to Food and Work Campaign, West Bengal.
- Attended the National Conference of Caritas India on 'Health and Well being: Community as Solution' on 22nd & 23rd March 2017 at New Delhi.



## **Project Partnerships**



Liliane Foundation, The Netherlands



Conrad N. Hilton Foundation, USA



The Union Against Tuberculosis and Lung Disease



Misereor, Germany



Global Fund to fight AIDS, TB & Malaria



Global Alliance for Vaccines and Immunization



Catholic Relief Services, USA



Kindermissionswerk, Germany



WORLD DIABETES FOUNDATION

World Diabetes Foundation, Denmark



Centers for Disease Control and Prevention



Christian Medical Association of India



Missio, Austria



Missio, Germany



The Italian Episcopal Conference's Committee for Charitable Initiatives in Favour of the Third World



ChristoffelBlindenmission / Christian Blind Mission, Germany



Augustine Stewardship Fund, USA



United States Agency for International Development



Karnataka Health Promotion Trust



V-Guard Industries



WonderWork, USA









UNISEF

Medtronic, USA

Abt Associates

The Project Vision, Bangalore, India





AmeriCares India Foundation

Vitamin Angels, USA

# Special Status / Accreditation



CHAI is granted special consultative status with the Economic and Social Council (ECOSOC) since 1st August 2013.



Tata Institute of Social Sciences (TISS) accredited CHAI as an empanelled partner of the National CSR Hub.



Government of Telengana



Guide Star India

#### Membership - International



CHAI is granted special consultative status with the Economic and Social Council (ECOSOC) since 1st August 2013.



International Committee of Catholic Health Care, Rome

Global Coalition of TB Activists

#### Membership - National



Alliance for Immunisation & Health (AiH)



Christian Coalition for Health



CBCI Coalition for AIDS and related Diseases (CBCI-CARD)



Christian Medical College (CMC) Vellore & Ludhiana



Advisory Committee Group Core of 'Engage Disability'



Emmanuel Hospital Association (EHA)

#### Member of NGO Health Consortium (NHC)

#### MOU for technical collaboration for research, student internship & trainings



Two Worlds Cancer Collaboration Foundation, Canada



University of Melbourne, Australia



Australian Catholic University, Australia



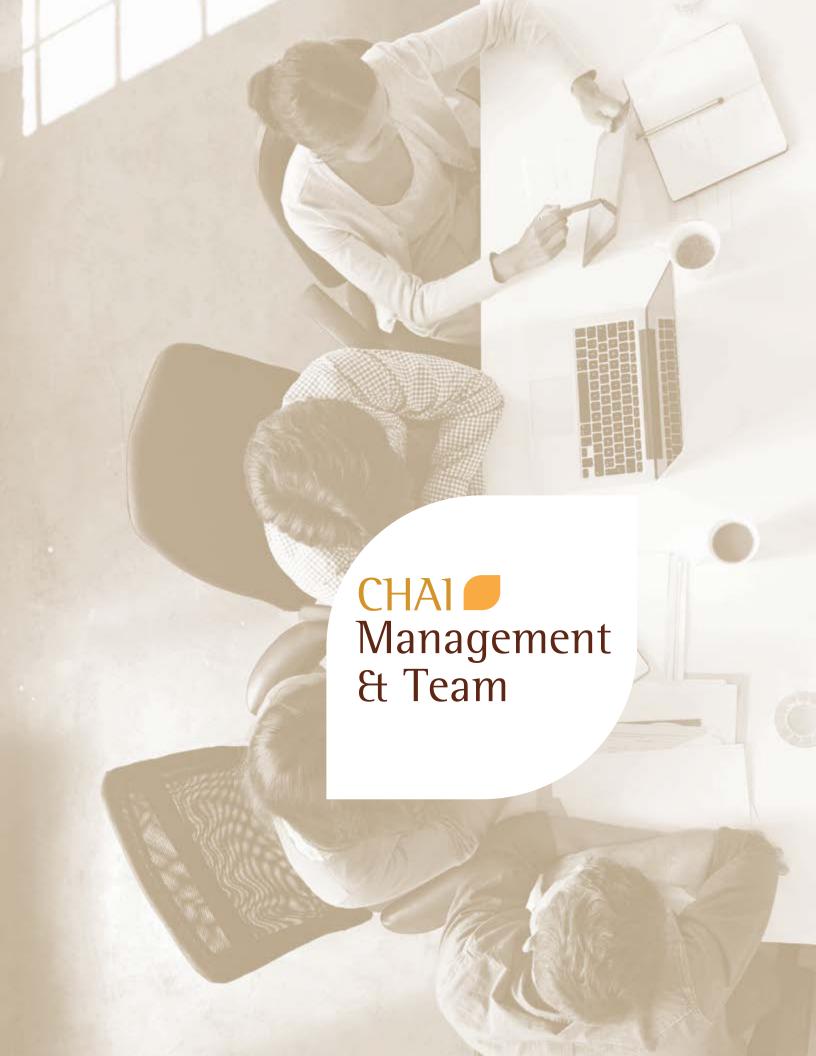
University of Toronto



The George Institute for Global Health



Mehdi Nawaz Jung (MNJ) Institute of Oncology & Regional Cancer Center, Hyderabad technical support for Holistic Palliative Care Training



# Executive Board



Most Rev. Prakash Mallavarapu Ecclesiastical Advisor, CHAI



**Sr. Deena, SCN** *President, CHAI* 



Fr. Thomas Vaikathuparambil I Vice President, CHAI



Fr. G James Raj II Vice President, CHAI



Fr. Santhosh Dias Secretary, CHAI



Sr. Rose Anitta, FMM Jt. Secretary, CHAI



Sr. Sneha, PHJC Treasurer, CHAI





Fr. Mathew Nirappel Councillor, CHAI



Sr. Bincy, FCC Councillor, CHAI



(Late) Sr. Ursula Indwar, MSMHC Councillor, CHAI



Sr. Dr. Vijaya M Udumala, JMJ Councillor, CHAI



Sr. Lizy Abraham Councillor, CHAI

# Regional Unit Presidents



**Sr. Thomasamma** *President, CHAAP* 



**Sr. Sneha, PHJC** *President, CHABIJAN* 



Fr. Santhosh Dias President, CHAKA



Fr. Thomas Vaikathuparambil President, CHAKE



Fr. Ajit Katara President, CHAMP



Sr. Marina Abraham, SCC President, NECHA



Sr. Teresa Lakra, HM President, OCHA



Sr. Rosy Vithayathil President, CHAW



**Sr. Lizy Abraham** *President, RUPCHA* 



**Sr. Deena, SCN** *President, WBCHA* 



**Sr. Anselm Treasa** *President, CHAT* 

# Regional Unit Directors



**Sr. Shiby** *Director, CHAAP* 



**Sr. Nirmala** *Director, CHABIJAN* 



Fr. Simon Pallupeta Director, CHAKE



Fr. Augustine Marottikudy Director, CHAMP



Fr. Paul Thettayil Director, NECHA



Fr. Jeejo Antony Vazhappilly Director, RUPCHA



**Sr. Maria Anita** *Director, CHAT* 





Rev. Dr. Mathew Abraham, C.Ss.R, MD Director – General



Rev. Sr. Lincy Cherian, SCSC Associate Director



Rev. Dr. Joby Kavungal, RCJ Associate Director

Mr. Sandeep Sanjeevan Lakra Mr. Rajesh Ranjan Mr. Dilip Kumar Badset Mr. Krishna Raut Mr. Sunil Dungdung Mr. Laxmidhar Singh Mr. Ravi Vanguri Mr. R.Karthikeyan Mr. L. S. Benjamin Frankilin Mr. Moorthi Mr. M. Arulanantham Mr. S. Francis Xavier Mr. Sharifa Yasin Bale Mr. Venkatesh Prabhakarrao Deshmukh Mr. Sachin Krishnakant Chouqule Mr. Sawankumar

Mr. Shashi kant Bhise Somwanshi

Mr. Sandip Bhaskar **Pandit** 

Mr. Ishwar Koli Mr. Girish S Gavandi

Mr. Chandrashekhar S Gaurkhede

Mr. Amol Prabhakar Gore

Mr. Bharat Awale Mr. Kyupise Sangtam

Ms. Ajanuo Natso Ms. Kehile Semp

Ms. Lakwinder Kaur Mr. Ashwin Kumar

Bhardwai

Mr. Kamal Kishore Mr. Gaurav Ghai Mr. Mukesh Singh

Mr. Apoorv Trivedi Mr. Kamlesh Singh

Mr. Anthony A.K Mr. Anoop Jacob

Mr. Thomson Chacko

Mr. Vijesh Mathew Mr. Tomy Mathew

Mr. Toji B. Johnson Mr. Shinto James

Mr. John Paul Antony

Mr. Loganathan

Mr. Vishal Karbhari

Jadhav

Mr. Machhindra Baban Avhad

Mr. Vivek R. Upadhyaya Mr. Pankaj Shrama

Mr. Shrikant Kumar Chandrakar

Mr. Parikshit Vaishnav Mr. Mukesh Purohit

Ms. Rinku Parihar

#### **Senior Management Team**

Mr. Sundar Bunga Head - HR & Strategic Planning

Dr. Anto Maliekal Head - Proiects

Dr. Shalini Prabhata Ravi

Head - Plannina

Mr. Gopala Krishna

Head - Finance

#### Directorate Team

#### 1. Projects

Sr. Celine Sr. Nirmala Sr. Paula Sr. Esther Rani Ms. Anita Pala Ms. Anshu Kumari Dr. Bharat Kumar Ms. Clemanta Rose Mr. Dileep Kumar Mr. Deep Kumar Dr. Eleazar Raj Dr. G. Jagan Dr. Ishika Ms. Indira Rani Ms. Jessy Joy Ms. Jayanthi Dr. Karra Ramu

Ms. Kamakshi Kumari

Ms. Meena Kumari Ms. Mary Mamtha

Mr. Manish.D Mr. Madhukar

Mr. Nishanth Ekka Mr. Prashanth

Mr. Prince Pius

Ms. Rosemary Thomas Ms. Roshan Maisar

Mr. Raju M.K Mr. Ramesh

Dr. Ramu Karra

Dr. Sameer .V Dr. Samal

Dr. Subbanna Dr. Sri Priva

Ms. Tusarika.K Mr. Vishal Gupta Mr. Vikas Ganta

Mr. Vijay Sharma

#### 2. Finance

Ms. Maii Manesh Mr. Kommu Sreeramulu Ms. Sudha Reddy Mr. Jubin Jose Mr. G.Sreenivas Rao

#### 3. Administration

Ms. Theophine .V Ms. Lizy Francis Ms. E. Nessy Deepika Ms. Ashwinta Beck Mr. Amos Ms. Ankitha Mr. Prakash Mr. Laxmi Mr. A. Tony Ms. Jano Languri Ms. Junga Sinku Ms. Jyothi Lakra Ms. Kadma Languri Ms. Molly George Ms. Mariyam Languri Mr. P.K. George Ms. Sahaya Mary Mr. Sebastian N.T Mr. S.Srinivas Ms. Sita Tirkey Ms. Suchita Ms. Sonia Christurai Mr. Sunder Raj

Mr. Deepak

Mr. Jyothi Lakra

Mr. Dilip

Mr. Nirmal Mr. Blanch Surin Mr. Linus Surin

#### 4. Communication

Mr. N. Vasudevan Nair Mr. M. S. Nanda Kishore Mr. T.K Rajendran Mr. Manesh Thomas

#### Field Team

Mr. Hareesh Mr. Sanju Ramappa Huddar Mr. Gyanappa Siddappa Holedasar Mr. Jagadeesh Nagappa Navak Mr. Krishna Murthy N R Ms. Anupama Mr. Sangappa Mr. Ramesh M Hosalli Mr. Nagaraja R Mr. Shadab Ansari Mr. Anwar Pasa Mr. Ram Kishore Tripathi Mr. Saumitra Mishra Ms. Kiran Verma Mr. Virendra Acharya Mr. Basith Khan Ms. Dolly Palai Mr. Tapan Kumar Laha

# Religious Staff



Rev. Dr. Mathew Abraham C.Ss.R, MD Director – General



Rev. Dr. Joby Kavungal, RCJ Associate Director



**Sr. Nirmala** *Administrator - Pratyasha* 



Rev. Sr. Lincy Cherian SCSC Director – Projects & Operations Duration at CHAI: June'16 – May'17



Sr. Celine
Administrator - Pratyasha

Duration at CHAI:
April'16 – May' 17



**Sr. Pushpam**Administrator

Duration at CHAI:
July'16 – July' 17



Sr. Paula Councilor - Pratyasha Duration at CHAI: April'16 – May' 17



Fr. Ashish Augustine, IMS Administrator – CTC Duration at CHAI: Oct '11 – Dec '16



Sr. Esther Rani Nurse - Pratyasha Duration at CHAI: April'16 – May' 17



Leo Amalraj & Associates Chartered Accountants, 5-9-1111/7, 3rd Floor, King Koti Road, Hyderabad -500 029

Tel: 23244221

#### **Auditors' Report**

To

The members of Catholic Health Association of India, Secunderabad

We have audited the accompanying financial statements of Catholic Health Association of India, which comprise the Balance Sheet as at March 31,2017, and the Income & Expenditure Account for the year then ended.

Management is responsible for the preparation of these financial statements that give a true and fair view of the financial position and financial performance. This responsibility includes the design, implementation and maintenance of internal control relevant to the preparation and presentation of the financial statements that give a true and fair view and are free from material misstatement, whether due to fraud or error.

Our responsibility is to express an opinion on these financial statements basedon our audit. We conducted our audit in accordance with the Standards on Auditing issued by the Institute of Chartered Accountants of India, which require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevantto the Society's preparation and fair presentation of the financial statements inorder to design audit procedures that are appropriate in the circumstances. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of the accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

In our opinion and to the best of our information and according to the explanations given to us, the financial statements give the information required in the manner so required and give a true and fair view in conformity with the accounting principles generally accepted in India:

a) in the case of the Balance Sheet, of the state of affairs of the Society as at March 31, 2017;

and

b) in the case of the Income & Expenditure Account, of the excess of income over expenditure for the year ended on that date.

> For Leo Amalraj & Associates **Chartered Accountants** FRN: 001862S

Place: 30.07.17 Date: Hyderabad

157/6, Staff Road, P.B.No. 2126, Gunrock Enclave, Secunderabad – 500 009

#### Notes forming part of accounts for the year ended 31.03.2017

- 1. Basis of preparation of financial statements: The financial statements are prepared in accordance with the generally accepted accounting principles in India and in accordance with the historical cost conventions.
- 2. Fixed Assets: The Fixed Assets have been recorded at the historical cost less depreciation.
- 3. Depreciation: Depreciation on fixed assets has been provided at the rates prescribed under the Income Tax Act, 1961.
- 4. Investments: Investments are stated at cost unless there is a permanent reduction in value.
- 5. Recognition of Income/ Grants: The grants received from various agencies are accounted only on actual receipt basis. The interests on fixed deposits areconsidered either on maturity or whenever the banks consider the accrued interest for tax deduction purposes, whichever is earlier.
- 6. Retirement Benefits: Retirement benefits to employees are not provided in the accounts and the same are accounted as and when the payments are made.
- 7. Contingent Liabilities: No contingent liabilities have come to the notice of the management.
- 8. Confirmation of Balances: The confirmations of balances have not been obtained in the case of debtors and creditors of the society.
- 9. Previous year's figures have been re –grouped wherever necessary.

For Leo Amalraj & Associates Chartered Accountants

Place: 30.07.17 Date: Hyderabad

157/6, Staff Road, P.B.No. 2126, Gunrock Enclave, Secunderabad – 500 009, Telangana

#### Balance Sheet as at 31st March 2017

Source of Funds	Current Year Amount	
Capital Fund and others  Current Liabilities and Provisions	30,76,14,665.21 46,32,407.13	
Total	31,22,47,072.34	

Application of Funds	Current Year Amount
Fixed Assets	7,55,31,872.72
Current Assets, Loans & Advances 1. Current Assets 1. Cash & Bank Balances 2. Fixed Deposits	2,84,16,863.53 19,02,21,815.00
2. Loans & Advances	1,80,76,521.09
Notes forming part of accounts	
Total	31,22,47,072.34

Place: 30.07.17 Date: Secunderabad As per our report of even date For Leo Amalraj & Associates **Chartered Accountants** 

Director General

A. Leo Amalraj (Partner)

Membership No: 022073

157/6, Staff Road, P.B.No. 2126, Gunrock Enclave, Secunderabad – 500 009, Telangana

#### Income & Expenditure Account for the year ended 31.03.2017

Income	Current Year Amount	
By Foreign Grants Received	20,80,29,805.63	
By Local Grants Received	8,86,50,513.25	
By Interest received	2,23,53,986.21	
By Interunit & Other receipts	6,89,30,416.33	
Total	38,79,64,721.42	

Expenditure	Current Year Amount		
To Foreign Projects Expenditures	20,18,43,224.24		
To Local Projects Expenditures	9,22,76,428.49		
To Administrative & Other Expenses	4,23,32,797.10		
To Depreciation	85,27,184.07		
To Excess of Income over Expenditure	4,29,85,087.52		
Total	38,79,64,721.42		

Place: 30.07.17 Date: Secunderabad As per our report of even date For Leo Amalraj & Associates **Chartered Accountants** 

Director General

157/6, Staff Road, P.B.No. 2126, Gunrock Enclave, Secunderabad – 500 009

### Local Receipts and Payments Account for the year ended 31.03.2017

Receipts	Amount	
Opening Cash and Bank balances	9,51,00,735.80	
Local Grants Received	8,86,50,513.25	
Interest Received	52,15,870.21	
Interunit& Other receipts	6,89,30,416.33	
Increase in Current liabilities	14,34,536.13	
Decrease in Current Assets	4,89,653.37	
Total	25,98,21,725.09	

Payments	Amount	
Local Project Expenses	9,22,76,428.49	
Administrative Expenses	4,23,32,797.10	
Purchase of Fixed Assets	47,17,677.00	
Tax Deducted at Source	14,87,939.00	
Increase in Fixed Deposits	9,43,10,716.00	
Closing cash & bank balances	2,46,96,167.50	
Total	25,98,21,725.09	

Place: 30.07.17 Date: Secunderabad As per our report of even date For Leo Amalraj & Associates **Chartered Accountants** 

Director General

157/6, Staff Road, P.B.No. 2126, Gunrock Enclave, Secunderabad – 500 009, Telangana

#### Foreign Receipts and Payments Account for the year ended 31.03.2017

Receipts	Amount	
Opening Cash and Bank balances	11,92,427.94	
Foreign Grants Received	20,80,29,805.63	
Interest Received	1,01,27,151.00	
Total	21,93,49,384.57	

Payments	Amount	
Foreign Grants Expenses	20,18,43,224.24	
Purchase of Fixed Assets	5,18,415.00	
Tax Deducted at Source	4,67,888.00	
Increase in Fixed Deposits	1,16,71,438.00	
Decrease in Current liabilities	5,79,232.00	
Increase in Current Assets	4,48,491.30	
Closing cash & bank balances	38,17,007.03	
Total	21,93,45,695.57	

Place: 30.07.17 Date: Secunderabad As per our report of even date For Leo Amalraj & Associates **Chartered Accountants** 

Director General

# Acknowledgments

I take this opportunity to extend my heartfelt appreciation and gratitude to all the team who worked behind scenes to bring out this year's annual report elegantly. A special thanks to Rev. Dr. Joby Kavungal, Associate Director, CHAI for being the mastermind in designing the annual report. I am also grateful to all who put their best in this collaborative effort: Mr. Vasudeva Nair, Dr. Shalini Prabhata, Mr. Sundar Bunga, Dr. Sameer Valsangkar, Dr. Anto Maliekal, Ms. Theophine Venard, Mr. George Paul, Ms. Indira, Ms. Kamakshmi and many others among the staff. Special thanks to Program Managers and Departmental Heads for consolidating their reports and extending their timely support to the core team who worked to bring the issue.

Hope this issue will give you a gist of our efforts, we put forward for reaching the unreached during last financial year.

Happy reading!!

Rev. Dr. Mathew Abraham C.Ss.R, MD Director – General, CHAI





# The Catholic Health Association of India (CHAI)

157/6, Staff Road, Gunrock Enclave, Secunderabad, Telangana 500009

#### chai-india.org

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Fax: +91-40-27811982