Dear Friends,

Welcome to Americares 2018 annual report.

Every year, Americares sets out to make a greater difference in the lives of more people in need. And in 2017-18, with support from donors and partners, Americares achieved this goal.

As we prepare this report, our emergency response team is ensuring health care access to survivors of #Kerala Floods, conducting health camps and bridging the essential medicine gaps to prevent any disease outbreak. We are helping more than 12,000 families maintain health and hygiene as they come back to their ravaged homes from relief camps. Americares is mobilising resources to support the recovery and rehabilitation of 50 health centres that were damaged during the floods.

As health focussed relief and development organization our mission is to help local health centres thrive. As urban health catalyst, we strengthen the connection between a conscious community and efficient health system. Our mobile health clinic and school health programs work towards raising the health consciousness of the urban poor while we work with the health system to build capacity, improve quality to create sustainable change.

Americares generous donors are our partners in every endeavour. Americares has the trust of a broad base, including pharmaceutical and health care companies and corporate and family foundations, with a desire to improve the lives of people affected by urban poverty and disaster.

Our dream is that we continue to work together, to change lives by improving health. Your ongoing support and partnership put health within reach for thousands of people.

Table of contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health is Fundamental</td>
<td>4-7</td>
</tr>
<tr>
<td>Who we are</td>
<td>8-11</td>
</tr>
<tr>
<td>Our programs</td>
<td>12-37</td>
</tr>
<tr>
<td>Our Team, Donors, Patrons</td>
<td>38-42</td>
</tr>
<tr>
<td>Professional standards</td>
<td>41</td>
</tr>
</tbody>
</table>
Health Is Fundamental

The equivalent of more than 200 million school years are lost each year in low-income countries as a result of ill health and the impact on learning and cognition is equivalent to a deficit of more than 630 million IQ points.

“Every year an estimated 100 million people – that’s more than a quarter of a million people every day – are forced into poverty as a result of out-of-pocket health care costs.”

When disaster or disease strike down local health worker, community leader or neighbor, countless lives may be lost that might otherwise have been saved.

With good health, anything is possible

Over the past decade, health improvements - measured by the value of life-years gained - constituted 24 percent of full income growth in low- and middle-income countries.

education, employment and active community life.
Rapid urbanization has outpaced the public healthcare infrastructure growth in India.

- By 2030, 50 percent of India’s population will be living in urban areas*
- Close to 50% of urban population lives in slums, where health is not a priority
- Unless addressed now, urban health is a catastrophe waiting to happen

Source: “Revision of World Urbanization Prospects” UN Economic and Social Affairs

Natural disasters impact over 500 million in India

- This rise in temperatures has led to higher incidences of natural disasters - storms, floods and droughts - which have increased from 32 in the 1960s to 110 in the current decade.

Americares saves lives and improves health for people affected by **urban poverty** and **disaster** so they can reach their full potential.

**Who We Are?**

Americares India Foundation is a health-focused relief and development organization that responds to people affected by urban poverty or disaster with life-changing health programs, medicine & medical supplies.

Each year, Americares delivers innovative health programs and quality medical aid across India, making it the country’s leading non-profit provider of donated medicine and medical supplies.

**What we do?**

- **Emergency Response**
  - We help communities prepare for, respond to and recover from disasters

- **Access to Medicine**
  - We increase access to critical medicines and medical supplies

- **Clinical Services**
  - We deliver quality health care to people who have none

- **Community Health**
  - We design & implement sustainable programs that strengthen community health

**Our Vision**

A world in which all people have pathways to health and opportunity

For more information, visit [www.americaresindia.org](http://www.americaresindia.org)

---

**Our Strategy Outline**

- **Urban Poor**
  - Help Local Health Centres (LHCs) Thrive
    - MHC: Creating health awareness and healthy behaviour
    - SHP: Nurturing students as ‘change agents’ of health

- **Disaster Survivors**
  - Efficient Health Systems
    - A2M: Increase access to quality medicines and supplies
    - HWS: Capacity building to deliver sustainable, high quality health services

- **Conscious Community**
  - Help Local Health Centres (LHCs) Thrive
  - Efficient Health Systems

- **ER**
  - Medical supplies
  - Health camps
  - Relief
  - Recovery
Key Milestones

Since 2006

**ADMIN** - 12A Registration, FDA License
- Mumbai office & warehouse established

**ER** - Bihar Floods, Odisha Tornado, West Bengal Cyclone Alia

**A2M** - Program launch, 200 shipments worth Rs. 10 Cr.

**2006-09**
- Program launch, 200 shipments worth Rs. 10 Cr.

**2010-12**
- Established 12,000 sq. ft. warehouse
- Uttar Pradesh Floods, Cyclone Phailin
- Capacity Building workshop, 1,000 shipments to a network of 150 partners in 24 states
- Added 2 Mobile Health Centres, 48 locations covered, 1,00,000 consultations
- Mumbai office & FDA License
- 12A Registration, ADMIN
- 12A Registration, ADMIN

**2013**
- Bihar, Kashmir, Odisha Floods
- Capacity Building workshop, 1,000 shipments to a network of 150 partners in 24 states
- 12,000 sq. ft. warehouse established
- 12,000 sq. ft. warehouse established
- 12,000 sq. ft. warehouse established

**2014**
- Bihar, Kashmr, Odisha Floods
- Cumulative shipment worth Rs. 20 Cr., 1,000 shipments, 150 partners, 24 states
- Phase I launch at JRH Hospital, Phase II launch at KEM Hospital
- Phase I launch at JRH Hospital, Phase II launch at KEM Hospital
- Phase I launch at JRH Hospital, Phase II launch at KEM Hospital

**2015**
- Bihar, Kashmir, West Bengal Cyclone Alia
- Capacity Building workshop, 1,000 shipments to a network of 150 partners in 24 states
- Added 2 Mobile Health Centres, 48 locations covered, 1,00,000 consultations
- Added 2 Mobile Health Centres, 48 locations covered, 1,00,000 consultations
- Added 2 Mobile Health Centres, 48 locations covered, 1,00,000 consultations

**2016**
- Bihar, Kashmr, West Bengal Cyclone Alia
- Capacity Building workshop, 1,000 shipments to a network of 150 partners in 24 states
- Added 2 Mobile Health Centres, 48 locations covered, 1,00,000 consultations
- Added 2 Mobile Health Centres, 48 locations covered, 1,00,000 consultations
- Added 2 Mobile Health Centres, 48 locations covered, 1,00,000 consultations

**2017**
- Bihar, Kashmr, West Bengal Cyclone Alia
- Capacity Building workshop, 1,000 shipments to a network of 150 partners in 24 states
- Added 2 Mobile Health Centres, 48 locations covered, 1,00,000 consultations
- Added 2 Mobile Health Centres, 48 locations covered, 1,00,000 consultations
- Added 2 Mobile Health Centres, 48 locations covered, 1,00,000 consultations

**2018**
- Bihar, Kashmr, West Bengal Cyclone Alia
- Capacity Building workshop, 1,000 shipments to a network of 150 partners in 24 states
- Added 2 Mobile Health Centres, 48 locations covered, 1,00,000 consultations
- Added 2 Mobile Health Centres, 48 locations covered, 1,00,000 consultations
- Added 2 Mobile Health Centres, 48 locations covered, 1,00,000 consultations
In an emergency, Americares provides quality medical aid, disaster relief and recovery.

Emergency Response
Ready- Respond-Recover
In an emergency, Americares provides quality medical aid, disaster relief and recovery.

Active Emergencies
- Kerala Floods, 2018
- Assam Floods, 2018

Active Recovery
- Rajasthan Floods, 2016

Past Emergencies
- Cyclone Ockhi, 2017
- North East Floods, Gujarat Floods 2016
- Tamilnadu Floods, Nepal Earthquake 2015
- Kashmir Floods, 2014
- Uttarakhand Floods, 2013

2017-18 Emergency Responses

Rajasthan
Monsoon Floods July 2017
No. of villages covered - 72
No. of patients treated – 6543
No. of households benefited - 2000

Bihar
Monsoon Floods July 2017
No. of households benefited - 1000

Gujarat
Monsoon Floods July 2017
No. of villages covered - 19
No. of patients treated - 1681
No. of households benefited - 1500

Assam
Monsoon Floods July 2017
No. of villages covered - 49
No. of beneficiaries reached - 7044
No. of households benefited - 3500

Tamilnadu
Ockhi Cyclone December 2017
No. of households benefited - 1000

Kerala
Monsoon Floods August 2018*
No. of villages covered - 50
No. of patients treated - 8500
No. of households benefited - 12000

*As of 20th of September 2018
Natural disasters impact over 500 million in India. This rise in temperatures has led to higher incidences of natural disasters - storms, floods and droughts - which have increased from 32 in the 1960s to 110 in the current decade.
Americares is helping improve healthcare access in flood affected #Kerala

We acknowledge support of our generous donors to #Kerala Mission

Americares is mobilising resources to support the recovery and rehabilitation of communities and health partners.

Unprecedented rain brought the entire state of Kerala to a standstill in August 2018. More than 200 people lost their lives, while 250,000 families had to take refuge at relief camps set up across the state. Many families lost all their belongings while hundreds of local health centres were inundated damaging the equipment and infrastructure.

Americares Emergency Response team is on ground to improve access to healthcare for the flood survivors, in partnership with the government, pharmaceutical partners and local health partners.

Response:
We have donated medicines and supplies worth Rs. 40 Mio to bridge the medical supply gaps. We donated 2 Mio chlorine tablets to ensure safe drinking water access to communities and 5 Lac Doxycycline tablets to prevent Leptospirosis. More than 8,500 people received care for acute and infectious diseases at the health camps conducted by our teams.

Relief:
- 12,000 families received health & hygiene kit, safe drinking water and shelter support
- 3500 mothers and children each received 90 day nutrition kit
- 5000 families in Wayanad and Palakkad received home cleaning and baby care support
- 9000 women received personal hygiene support

Recovery:
Americares is mobilising resources to support the recovery and rehabilitation of 50 health centres that were damaged during the floods.

We acknowledge support of our generous donors to #Kerala Mission
School Health Program
Developing children as ‘change agents’ of health

Children come to school to learn. But too often, schools are places where children become ill.

Core Model
- Health education
- Water, Sanitation and Hygiene
- Preventive health services
- Stakeholder engagement

- 93 Municipal & aided schools
- 32,000 Children
- 4,000 Sessions

Community Health

Schools & Children

- 93 schools
- 32K children
- 30 schools
- 4K sessions
Health of young people, and the adults they will become, is critically linked to the health related behaviors they choose to adopt. The schools offer an extraordinary setting to influence the choices that young people make and encourage healthy behavior among them.

Health Education

Classroom based health education sessions are effective way to sensitize children about importance of health, hygiene and nutrition for overall quality of life. A team of trained facilitators uses Learning-Engagement-Demonstration methodology (LED) to impart the key messages around the core themes of Health, Hygiene and Nutrition.

The sub-themes include, communicable diseases, adolescent health, substance abuse, healthy- unhealthy food, anaemia, personal hygiene, oral hygiene and menstrual hygiene. The key messages are reinforced using customized engagement tools like games and activities.

Interim assessment indicates that children are embracing positive health habits with significant changes in knowledge and practice levels across key health areas. There is 60% reduction in consumption of junk food by children when they are on school campus and more than 80% of students have reported washing hands before they eat food. Children are embracing positive change in their eating habits. Nearly 88% of the children surveyed are reporting regular consumption of fruits and green leafy vegetables and significantly lower consumption of unhealthy packaged food.

Water, Sanitation and Hygiene (WASH)

WASH in schools is a first step towards ensuring a healthy physical learning environment. Schools with functional WASH can lessen the spread of disease. Our WASH intervention also aims to improve the health and learning performance of school-aged children - and, by extension, that of their families - by reducing the incidence of water and sanitation-related diseases.

We have completed the refurbishment of WASH at thirty schools. close to seven thousand children across these schools now access functional WASH and are learning healthy habits.

Americares ensures that the WASH facilities across schools are maintained through the regular supply of consumables, monthly audit by our WASH coordinator and site visits by empanelled plumber. Student Cabinets are formed to encourage ownership and drive compliance to WASH practices. Cabinet members, with a team of supporters, are bestowed with responsibilities aimed at achieving behavioural changes, finding solutions to WASH challenges and managing WASH facilities in their schools.

Preventive Health Services

Clinical preventive services are various forms of important medical or dental care that support healthy development. They are delivered by doctors, dentists and allied health providers in school settings. These services prevent and detect conditions and diseases in their earlier, more treatable stages, significantly reducing the risk of illness. Americares conducts comprehensive screening program for vision, dental and anaemia among school children.

During 2017-18, 4,020 children from 1st to 8th standards, across seven schools were screened for anaemia. Alarming more than 2500 (83.5%) children were found to have Hb levels below the standard parameters and needed IFA supplementation. Post IFA treatment, counselling and follow up 79% of children had shown an improvement in Hb values as compared to the pre - intervention screening results.

Under vision intervention, 1,667 children were screened for vision issues of which 700 received the desired further intervention. More than 500 children received good quality spectacles while others received appropriate treatment for squint eyes, high refractive error, watery eyes, night blindness under medical supervision.

The oral health screening was availed by 2,500 children of which 1,315 (52%) who required further treatment received it from a trained dentist within their community.

Stakeholder Engagement

Parents

Parents play a crucial role in reinforcing the learning into children when they are at home. Nearly 5,000 parents participated in 100 sessions organized to familiarize them with the health messages they receive through the program to ensure consistency of messaging. To enable mothers to provide healthy food in children’s tiffin we developed a unique ‘recipe book’ that provides innovative and tasty recipes using the ingredients easily available at home. These recipes were contributed by mothers of children studying in our schools.

Teachers

As part of building sustainability in the program, we have begun familiarizing teachers about the health curriculum and topics covered by the program health facilitators. The objective is to have at least one teacher in each school who is trained on subjects being covered as part of the program. Each school is also provided with one set of health education material that our program facilitators use during sessions.

During 2017-18, we reached out to 100 teachers across the ward to equip them with necessary information about the health topics covered.

Administration

A wide range of administrative officers are engaged during various stages of the program throughout the year, to ensure sustainability and continuity.
Health Education

**Health**

- **88%** girls aware of reasons for menstruation
- **32%** pre session
- **60%** post session

Average knowledge about changes in puberty

Data Source: Internal testing survey 2017

**Nutrition**

- **92%** students aware of iron rich foods
- **88%** students aware of healthy and unhealthy foods
- **147 sessions** 12000 students
- **61%** students always consume green leafy vegetables
- **83%** reduction in consumption of junk foods among students

Data Source: Internal testing survey 2017

**Hygiene**

- **73%** students aware of correct steps of handwashing
- **88%** students wash hands after using toilet
- **82%** students wash hands before having meal

Data Source: Internal testing survey 2017

**Oral Health**

- **4 schools**
- **2495 students screened**
- **1644 students required treatment**
- **80% completed treatment**

Data Source: Anaemia and oral health data collected by healthcare under School Health program 2017-2018

**Health Intervention**

**Vision**

- **41 schools** (National services + MCHN referrals)
- **1667 students screened**
- **834 students required treatment**
- **514 spectacles distributed**
- **320 received aid based treatment**

Data Source: Pre and post session assessment conducted during session, Sep 2017

**Anaemia**

- Pre Intervention: 2%
- Post Intervention: 0%

- % students by Anaemia Grades: 54 Normal, 16 Mild, 30 Moderate

Data Source: Anaemia pre and post intervention data collected by healthcare under School Health program 2017-2018

**Practice of washing teeth twice daily**

- Baseline 42% of the students
- 17% increase

Data Source: Internal testing survey 2017

- % of students brushing teeth at least once daily

---

*Reduction in consumption of Samosas*

*Reduction in consumption of Breakfast*
Access to quality primary care services is the first step towards improving the health outcomes of urban poor in India. Mobile Health Centres
Bringing healthcare to the people who need it most.

Clinical Services

Access to care
> Behaviour change
> Capacity building
> Develop Referral Linkages

8 Mobile centres
13 Municipal wards
130+ Clinic locations
1.70 Lac consultations
Close to 50 percent of India’s urban population lives in slums where healthcare is not a priority—partly because of lack of awareness but mostly due to issues of access, affordability and education. The urban slum dwellers in cities are exposed to dual threat of communicable and non-communicable diseases equally.

**Access to Care**
Rapid urbanization has outpaced the healthcare infrastructure growth in India. For the urban poor who live in slums, living conditions are challenging and healthcare is not the main priority.

To avail the government health facilities one has to travel a distance, spend resources and lose a day’s wage. To save time & wage, communities often pay a high price to avail services of non-qualified Health Care Practitioners (HCPs) in the slums who neither have the knowledge nor the skills to offer appropriate and quality care.

Access to quality primary care services is the first step towards improving the health outcomes of these slum dwellers.

Six days a week, our fully-equipped mobile health centres bring health care to impoverished families in dozens of locations. Hundreds of patients a day benefit from the medical vans' on-site services and free medicines. For most patients, this is the only time they will ever see a doctor.

During 2017-18, our mobile health centres served 1,70,000 consultations.

**Behaviour Change**
The communities remain oblivious of positive health habits and preventive health practices and are trapped into a vicious cycle of disease that worsens their overall health indicators.

We work with the communities to build positive health habits through consistent health education to individuals and groups.

Each centre has a compact health education booth with seating that provides opportunity for effective and healthy discussion, strengthening rapport with the community. Our trained health educators impart health messages using variety of engaging tools, to groups of twenty participants each.

We sensitize communities on prevention of and protection from communicable and non-communicable diseases. Mass awareness drives are conducted to commemorate World Health Day, World Diabetes Day, World Hypertension Day, World Breastfeeding Day among others.

We reached out to more than 62,000 individuals through 5,150 group health session during 2017-18.

**Capacity Building**
Private healthcare practitioners or family physicians are the backbone of primary care in the community. Unfortunately, urban slums lack robust network of qualified family physicians (MBBS) & the community is largely dependent on the inadequate services provided by unqualified practitioners.

These providers lack sufficient knowledge, skills and resources to sensitize the communities on preventive measures and healthy lifestyle.

Educating these practicing physicians with basics of disease prevention & management techniques would have a positive impact on the health outcomes of the communities availing their services.

Americares is piloting a healthcare worker capacity building program, ‘MasterClass’, aimed at building the capacity and raising the quality of services offered by health practitioners. Participants are trained on basics of disease management, doctor-patient interface, patient counselling, etc. The practitioners are provided with a specific kit containing educational materials which they can use to sensitize their patients.

**Develop Referral Linkages**
Patients who require advanced treatment, surgery and diagnostic services, benefit from referral network of government or charitable centres.

To enable ease of referrals for our doctors on the clinics, we have piloted a comprehensive referral guide that provides

- Treatment Protocol
- Referral Guidelines
- Referral Centres by location
- Referral Forms

Our teams map the referral network for each of the locations covered by the clinics and the list of potential referral centres which cover diagnostics, specialists, tertiary care centres from charitable, government and low-priced private service providers.

Our doctors are advised to follow the protocols and refer the patients as needed.
Health Workforce Safety
Protecting the protectors

The health workforce is central to managing and delivering health services

Clinical Services

Core Model
- Protect the individual
- Create safe work environment
- Ensure sustainability

- 3 Tertiary care public hospitals
- 8,000 Health Care Workers
The range and burden of infectious diseases in India are enormous. Infection, not heart disease, diabetes, or cancer, is the leading cause of death in India.

Protect the Individual
Health care workers are at the risk of occupational exposure to infections such as HIV, Hepatitis B and C, Tuberculosis amongst others.

As a health focussed development organization Americas is committed to protecting the health workers from occupational risks. We focus on risk assessment, awareness and capacity building to ensure the health workers are sensitized for self-protection. The major steps in this direction include,

• Comprehensive health surveillance
• Immunization and protection
• Training and education

Individual health workers are screened to identify health risks and determine the treatment. Testing and immunization offers protection from Hepatitis and other infectious diseases. Educators conduct regular workshops and training in wards to elicit positive behaviour change.

Create safe work environment
The basis of good infection control in the workplace is to assume that everyone is potentially infectious. Proper procedures have to be followed at all times. Equipment such as gloves, gowns, eye goggles and face shields should be provided if necessary.

Infection prevention measures at workplace includes,
• Cleanliness at workplace
• Infectious waste management
• Handling needles and sharp objects
• Dealing with spills and body fluids

Americares collaborates with the hospital management to strengthen infection prevention and control practices. We support the post-exposure prophylaxis practices at the institution.

We assess and upgrade infrastructure to enhance the safety of the health facility.

Ensure Sustainability
By collaborating with hospital management at every stage of the workforce safety program, Americas ensures engagement and partnership for long term sustainability of the program.

Train The Trainer
We build the capacity within the institute by training representatives from each department who can advance the education and awareness activities in absence of the formal program.

Drive Policy Change
The Institute and Americas sign a joint declaration wherein the institute takes over the responsibility of continuing the initiatives of health workforce safety. The institute commits for desired policy changes and initialisation of processes.

Innovation
Model Ward
At one of Mumbai’s large tertiary care public hospitals, Americas is setting a model ward from infection prevention perspective. We have undertaken a comprehensive assessment of:

• Knowledge, Attitude and Practices of health workers
• Infection Control Infrastructure & practices
• Bio Medical Waste management

We propose to develop a paediatric intensive care unit (ICU) at the hospital as a model ward where both the health workers and infrastructure are equipped for minimizing the risk of infections.

Mobile based learning App
In public hospitals, health workers are one of the extremely burdened lot. They have very limited opportunity to train themselves and learn new skills. Often the nursing staff and interns are unable to attend class room training sessions and miss an opportunity.

Americares is developing an unique mobile application that will enable health workers to learn about infection prevention at their convenience. The application once downloaded on a mobile phone will enable self learning, evaluation and submissions. Participants can receive a certification from the institute post successful completion.

We aspire to take this application for use of all health workers in the public sector soon.
People’s contact with trained workers has been instrumental in improving health in developing countries. Community based programs under many circumstances provide this crucial contact.

**Community Health Program**

Support, Design and Implementation

Clinic-To-Community programs in the areas of maternal and child health, infectious diseases and NCDs

---

**Prevention of Hepatitis B**

To sensitize and counsel childbearing women in high risk communities, we conducted over 11,100 door-to-door education sessions and followed-up with the beneficiaries at least 3 times each.

650 childbearing women were identified and registered to the program, of which 563 had safe deliveries due to referrals to ANC service providers and regular follow-up in and after the duration of their pregnancy. We helped protect 490 new born children from Hepatitis B by ensuring their timely and complete immunization.

Hepatitis B voluntary screening was conducted for 6,200 beneficiaries and 1,202 doses of preventative vaccination were administered. Through the program, we identified 95 Hepatitis B positive patients.

68 families underwent the voluntary contact tracing and screening for Hepatitis B.

In addition, through the medium of Continuous Medical Education (CME), we trained more than 200 community physicians on the importance of screening, testing and vaccination of Hepatitis B.

---

“*It was surprising to learn that Hepatitis B is more dangerous than HIV and that such a disease exists. Many thanks to Americares India’s home based education, testing and vaccination services. The health worker who visits our community is very friendly and supportive. She has helped me to understand all about Hepatitis. She also tested and vaccinated me for Hepatitis B. I am grateful to her and to Americares India for ensuring our safety.*”

- Raveena Kumari* (name changed) (age 26), Ambedkar Nagar, Antop Hill

---

**STEP Model**

Our Clinic-To-Community model links treatment services with disease prevention and health education. Our ongoing program protecting new-born babies and women from hepatitis has reached over 27,000 women across Mumbai.

Built on the four pillars of

- Surveillance
- Testing
- Education
- Protection

Each program module is customized to address the relevant issues and concerns.

A trained team of health workers and educators works closely with the communities to drive the outcomes.

---
Due to lack of access and affordability, individuals and families cannot get the medicine they need to stay healthy. As the leading non-profit provider of donated medicine and medical supplies, Americares India is working to change that.

Americares India increases access to quality medicines and supplies to improve health outcomes for patients and low income communities.

**Partnership with pharmaceuticals**

We partner with leading pharmaceutical manufacturers in India that donate quality products. We provide local partners across India with a wide range of donated medicine - from basic analgesics and antibiotics to anti-hypertensive and anti-diabetic treatments.

**Network of clinics**

Americares India’s partner network includes charitable hospitals, clinics and NGOs providing community-based health care services across the country. Our partners are carefully selected and meet our criteria of program, capacity and philosophy.

**Inventory Management**

All the donations received and distributed from our warehouse are recorded in a specialized inventory-management software. Our documentation process complies with statutory requirements and standards.

**Logistic capacity & infrastructure**

Americares India receives, stores, sorts and distributes the quality donations in our state-of-the-art 12000 sq. ft. warehouse in Bhiwandi, near Mumbai. Our warehouse is equipped with cold-chain management and other necessary infrastructure. Our trained staff manages and optimizes product donations to ensure safe and effective distribution of medicine and medical supplies to local partners.

The charitable work of VHS is sustained and carried forward through the valuable support of organizations such as, Americares India. The donations made by Americares help to provide curative services and essential medicines to the poor, ailing and deprived members of our communities. Our heartfelt acknowledgements to Americares for playing a catalyzing role in realizing the mission of VHS.

Dr Joseph Williams, Director - Projects
Voluntary Health Services, Chennai
For charity to continue, good work and recognition must go hand-in-hand.

Winners of 8th Spirit of Humanity Awards, September 2017

For charity to continue, good work and recognition must go hand-in-hand.

Americares India believes in recognizing and rewarding those who make exemplary contributions towards the society. With this in mind, the Spirit of Humanity was initiated, in the year 2010.

Over the years, Spirit of Humanity has expanded its scope to become a national-level platform for collaboration, capacity building, rewards and recognition within the social sector in India.

Thought leaders from corporate, government, academia, social and CSR sectors unite and share their knowledge & expertise while evaluating the social impact created by the participating organizations.

In its 9th year, the Spirit of Humanity will bring together various stakeholders for sustained engagement and cross learning.

Benefits to participating NGO

**RECOGNITION:**
- Zonal Winner
  - Certificate
- National Winner
  - Certificate
  - Trophy
  - Cash Prize of Rs. 1 Lakh

**COLLABORATION:**
- Interface with domain experts
- Opportunity to present program to the Jury
- Volunteering opportunities

**CAPACITY BUILDING:**
- Knowledge sharing
- Scope to expand programs based on best practices
- Mentoring & guidance by corporate and academia
- Cross fertilization of ideas & expertise

**NETWORKING:**
- Meet CSR Heads and share the organization’s work
- Partnership opportunities
- Contest for national-level recognition of your work
- PR opportunities

**Impact Sectors 2018**

- Child Care
- Disability
- Education
- Health
- Social Impact
- Women’s Empowerment

**Categories**
- 6

**Nominations**
- 350

**Jury Members**
- 50

**Finialists**
- 26
We thank our generous donors for their whole-hearted support.

Corporate:
Abbott Healthcare Pvt Ltd
Abbott India Ltd
AbbVie Foundation
AT & T Global Network Services India Pvt Ltd
Baxter International
Becton Dickinson
Bharat Serums and Vaccines Ltd
Blue Cross Laboratories Pvt Ltd
BP Exploration (Alpha) Limited
Castrol India Limited
Catalyst Corporate Services Pvt. Ltd
CME Group
Cognizant
Crane Process Flow Technologies India Pvt Ltd
Fullerton India Credit Company Ltd
Indigo
India Infoline Foundation
Jet Airways
JW Marriott
Merck Limited
Morgan Stanley Advantage Services Pvt Ltd
Morgan Stanley India Company Pvt Ltd
Morgan Stanley India Primary Dealer Pvt Ltd
Morgan Stanley Investment Management Pvt Ltd
National Stock Exchange of India
Novartis Healthcare Pvt Ltd
Novartis India Limited
Pfizer India Ltd
Procter & Gamble Co.
Reliance Nippon Life Asset Management Limited
Videojet Technologies (I) Pvt Ltd

Foundation:
Americares Foundation Inc
Axis Bank Foundation
Bristol Myers Squibb Foundation
Cipla Foundation
Glenmark Foundation

Our Board of Trustees
President & Trustee
Mr. S. K. Mitra
Chairman, QSK Advisory Pvt Ltd

Secretary & Trustee
Mr. Ranjit Shahani
Former Vice Chairman & Managing Director, Novartis India

Treasurer & Trustee
Mr. Vikram Parekh
Director, Parekh Integrated Services Pvt Ltd

Trustee
Ms. Anjali Raina
Executive Director, Harvard Business School India Research Centre

Key Management Team
Mr. Shripad Desai
MD & Country Director
Mr. Anirban Mitra
Senior Director, Operations

Corporate - Product Donors:
Abbott Healthcare Pvt Ltd
Abbott India Ltd
Baxalta Bioscience India Pvt Ltd
Becton Dickinson India Pvt Ltd
Bliss GVS Pharma Ltd
Cipla Limited
Galaeosmithkline Pharmaceuticals Ltd
Glenmark Pharmaceuticals Ltd
Johnson & Johnson Pvt Ltd
Medecins Sans Frontieres
Medley Pharmaceuticals Ltd
Merck Limited
Procter & Gamble Co.
Pfizer India Ltd
RPG Life Sciences
Sanofi India Ltd
Zydus Cadila

*Received throughAmericares Foundation Inc
We thank our generous donors for their whole-hearted support.

**OUR INDIVIDUAL DONORS**

- Rs. 10,000 and above
  - Anil Parmar
  - United Way Mumbai
  - Babu Joseph
  - Consultant
  - Chiranjeev Das
  - Consultant
  - Dr Mayur Patel
  - Swasthya Diabetes Care
  - Dr Sarika Kulikarni
  - India Infoline
  - Dr Shirish Ghadi
  - Tata Trust
  - Dr Shripad
  - Sion Hospital
  - Dr. Neeraj Markandeywar
  - GSK
  - Dr. Vijay Pawar
  - Mahindra logistics
  - Garima Dutt
  - GSK
  - Juli Ranade
  - West India, British Council
  - Murli Sundranii
  - BD India
  - Shilpa Arora
  - Merck
  - Shilpa Bhatte
  - Vitamin Angels
  - Sunitha Jadhade
  - Johnson and Johnson
  - Sushant Bhagwat
  - Kotak Education Foundation
  - Shushmita Bandopadhyay
  - BD India
  - Tanisha Das
  - Johnson and Johnson

- K V K Raju
- Karen Cheng
- Manjeet Kumar
- Mohan Sharma
- Mohit Lodhi
- Nandan Singh
- Navneet Sharma
- Ng Tze
- Nithdesh Shetty
- Nur Syafieeqah
- Parasuram Kolekar
- Prashant Buddhhi
- Praveenraj K
- Pristine
- Rachakonda Rajesh
- Rakesh Kumar Pandey
- Raman Kumar
- Ramana Kumari
- Ramnath Kumar
- Ranveer Singh
- Roop Singh
- Sachin Kasture
- Santu Pal
- Shaily Garg
- Shoutik Chakraborti
- Shrutir Aryanj
- Shweta Kokane
- Sonali Singh
- Sourabh Bagla
- Sourav Mukherjee
- Sukh Ram
- Suman Kumar Sinha
- Swapnil Suresh
- T Kumar
- Tanya Frantz
- Utkarsh Jain
- Vaishali Maheshwari
- Vani Voorkikala
- Vasundhara Jain
- Victoria Lai
- Vijay Devani
- Vinit Guptha
- Yogesh Mishra

**OUR PATRONS**

- Rajendra Saini
- Rashmila Mazumdar
- Rehan Kulkarni
- Sana Zaman
- Hashank Raghupathy
- Shivdas Gaonkar
- Shubhrangsu Dutta
- Sonali Dhawan
- Sridharan Ranganathan
- Suman Kumari
- Soneel Kumar
- Sunita Roy
- Suresh Kumar Pitchaiyan
- Suresh Rajan
- Tanvi Ahuja
- Tawfiq Deifalla
- Vipul Yadav
- Vish
- Vivek Kumar
- Yogesh Sardana

- Up to Rs. 3000
  - A Prabhakaran
  - Abhinav Solanki
  - Ajay Kakadiya
  - Anicet Castelino
  - Ankit Gupta
  - Arun Srinivasta
  - Barindra Kumar
  - Bhavik Dave
  - Chandan Kumar
  - Daulat Jamuna
  - Deepak Kumar
  - Deepak Kumar Kathuria
  - Devang Jesrani
  - Dhan Bahadur
  - Dhruv Mal Mehta
  - Fazilat Biviji
  - Gangai Amaran
  - H Shahina
  - Hareni Kumar
  - Hemraj Kumawat
  - Himanshu Baghel
  - Ishita Kakkar
  - Jasneer Kaur
  - K Sabari

- National Jury
- Anjali Raina
  - Executive Director
  - Harvard Business School India
  - Research Centre
- Dr. Jayesh Lete
  - National Secretary
  - Hospital Board of India
- Dr. Nirja Mattoo
  - Chairperson
  - Centre for DOCC - SPJIMR

- Pre-National Jury
- Abha Goyal
  - India CSR Analyst
  - Morgan Stanley

- Anmol Bhalerao
  - VP – Corporate Social Responsibility
  - Fullerton India Credit Co. Ltd

- Dr Harshad Thakur
  - Professor
  - Tata Institute of Social Science

- Dr Shripad
  - Assistant Professor
  - Sion Hospital

- Dr. Kavita Chaudhari
  - Deputy Director - CSR
  - Sanofi India

- Dr. Chandrika Parmar
  - Associate Professor
  - SPJIMR

- Gandharva Pednekar
  - CSR Research In-charge
  - Tata Institute of Social Science

- Mr. V Trustee
  - Collective Good Foundation

- Pratibha Nayak
  - Head of Teacher Training Intervention
  - Kotak Education Foundation

- Prof M. Suresh Rao
  - Chairperson, Centre for Entrepreneurship
  - SPJIMR

- Svetlana Pinto
  - Director General
  - WPP India CSR Foundation - WPP

- Prerana Langa
  - Chief Executive Officer
  - The Hans Foundation

- Prof. P M. Sandhya Rani
  - Chairperson
  - School of Development Studies (TISS)

- Rajen Gandhi
  - Partner
  - Gandhi Paleja & Associates

- Rama Iyer
  - Director General
  - WPP India CSR Foundation – WPP

- Svetlana Pinto
  - Country Head Communications & CSR
  - Novartis India

- SK Mitra
  - Chairman
  - GSK Advisory Pvt Ltd

- Viveka Roychowdhry
  - Editor, Express Pharma & Express

- Healthcare, Indian Express

- Dr. Chandrika Parmar
  - Chief Executive Officer
  - Yes Foundation

- Prof. P M. Sandhya Rani
  - Chairperson
  - School of Development Studies (TISS)

- Rajen Gandhi
  - Partner
  - Gandhi Paleja & Associates

- Rama Iyer
  - Director General
  - WPP India CSR Foundation – WPP

- Svetlana Pinto
  - Country Head Communications & CSR
  - Novartis India

- SK Mitra
  - Chairman
  - GSK Advisory Pvt Ltd

- Viveka Roychowdhry
  - Editor, Express Pharma & Express

- Healthcare, Indian Express

- Natasha Patel
  - Director - Strategic Philanthropy
  - Dasra

- National Jury
- Anjali Raina
  - Executive Director
  - Harvard Business School India
  - Research Centre
- Dr. Jayesh Lete
  - National Secretary
  - Hospital Board of India
- Dr. Nirja Mattoo
  - Chairperson
  - Centre for DOCC - SPJIMR

- Pre-National Jury
- Abha Goyal
  - India CSR Analyst
  - Morgan Stanley

- Anmol Bhalerao
  - VP – Corporate Social Responsibility
  - Fullerton India Credit Co. Ltd

- Dr Harshad Thakur
  - Professor
  - Tata Institute of Social Science

- Dr Shripad
  - Assistant Professor
  - Sion Hospital

- Dr. Kavita Chaudhari
  - Deputy Director - CSR
  - Sanofi India

- Dr. Chandrika Parmar
  - Associate Professor
  - SPJIMR

- Gandharva Pednekar
  - CSR Research In-charge
  - Tata Institute of Social Science

- Mr. V Trustee
  - Collective Good Foundation

- Pratibha Nayak
  - Head of Teacher Training Intervention
  - Kotak Education Foundation

- Prof M. Suresh Rao
  - Chairperson, Centre for Entrepreneurship
  - SPJIMR

- Svetlana Pinto
  - Director General
  - WPP India CSR Foundation - WPP

- Prerana Langa
  - Chief Executive Officer
  - Yes Foundation

- Prof. P M. Sandhya Rani
  - Chairperson
  - School of Development Studies (TISS)

- Rajen Gandhi
  - Partner
  - Gandhi Paleja & Associates

- Rama Iyer
  - Director General
  - WPP India CSR Foundation – WPP

- Svetlana Pinto
  - Country Head Communications & CSR
  - Novartis India

- SK Mitra
  - Chairman
  - GSK Advisory Pvt Ltd

- Viveka Roychowdhry
  - Editor, Express Pharma & Express

- Healthcare, Indian Express

- Natasha Patel
  - Director - Strategic Philanthropy
  - Dasra
Governmental:
- Registered as a Public Charitable Trust in India since 2006
- Registered under Section 12A of the Income Tax Act, 1961
- Recognized under Section 80G of the Income Tax Act, 1961
- Registered under Foreign Contribution Regulation Act (FCRA), with Ministry of Home Affairs (MHA)
- Licensed to purchase, sell, and distribute drugs with the State Food & Drug Administration (FDA) of Maharashtra
- Complies with the waste disposal norms laid down by Maharashtra Pollution Control Board (MPCB) with regard to destruction of date expired medicines

Professional:
- Member of Indian Drug Manufacturers Association (IDMA)
- Member of the Associated Chambers of Commerce of India (ASSOCHAM)
- Member of National Coalition of Humanitarian Agencies in India (SPHERE)
- Member of Indo American Chamber of Commerce (IACC)

Partnerships:
Americares is privileged to have partnered with numerous respected institutions as part of its programs and initiatives. Few of them are listed below:
- National Disaster Management Authority (NDMA)
- National Rural Health Mission [NRHM]
- Municipal Corporation of Greater Mumbai [MCGM]
- King Edward Memorial Hospital [KEM]
- Lokmanya Tilak Municipal General Hospital (LTMG)
- Directorate of Health Services
- Department of Health and Family Welfare
- Sashastra Seema Bal
- 14 Rashtriya Rifles, Indian Army

* Americares India is a registered trademark of Americares Foundation Inc.

The map used is for general illustration only and are not intended to be used for reference purposes. The representation of political boundaries does not necessarily reflect the position of the Government of India on international issues of recognition, sovereignty or jurisdiction.
Healthy citizens are the greatest asset any country can have

- Winston Churchill