







से ठीक हुए व्यक्ति को भी वैक्सीन लेना

के बावजूद वैक्सीन की पूरी खुराक ाह एक मजबूत प्रतिरक्षा प्रतिक्रिया तंत्र **इरेगा**।

कैंसर, मधुमेह, उच्च रक्तचाप आदि रिया की दवा ले रहा है, तो क्या वह कोविड ान ले सकता है ?

ममें से किसी एक या एक से अधिक बिमारियों वाले व्यक्तींयोंको ोखिम श्रेणी में रखा गया है। उन्हें कोविड टीकाकरण कराने की











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### "No matter how much falls on us, we keep plowing ahead. That's the only way to keep the roads clear."



- Greg Kincaid

### Dear Friends,

Welcome to Americares 2020-21 Annual Report, which presents our accomplishments in an exceptional year, when a global pandemic threatened the world. We are proud of Americares' achievements during this challenging time, and grateful for the collaborations with our donors and partners that have saved lives and eased the burden of the pandemic for so many.

Americares mission focuses on communities affected by poverty or disaster — those that suffer the greatest impact from every health threat, including the coronavirus. To save lives and improve health during this pandemic, Americares launched a multipronged national emergency response, expanded our partner network, and adapted every program to meet the added demands of COVID-19. This includes providing personal protective equipment and technical assistance to keep our frontline healthcare workers, their patients, and our colleagues safe. We added staff and expertise, acting on our mission every day.

This year also brought a strong call for social change. The pandemic laid bare the inequities that prevent people from accessing the care they need, and shattered any notion that health, a human right, can be provided to all without addressing the centuries of racial discrimination often at the root of poor health outcomes. Access to medicine, community health, clinical services — our programs have never been more relevant and needed.

The world is forever changed, and Americanes is changed with it. We pledge to incorporate every lesson learned into our goal to improve the health of more people, in more places, so they can truly thrive and live the full, productive lives they choose.

Thank you for all you have done to further Americares mission. Together, we are making a difference.

Take Care, Be Safe.

Sincerely,

Shripad Desai MD & Country Director

S K Mitra Chairperson & Trustee



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

### OUR PROGRAMS

## **Emergency Response**



We help communities prepare for, respond to and recover from disasters

# Access to Medicine



We increase access to critical medicine and medical supplies

### Clinical Services



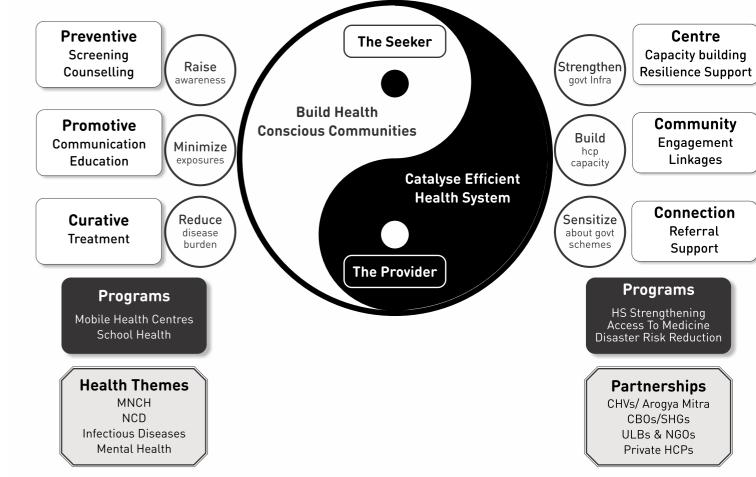
We deliver quality health care to people who have none

### Community Health



We design & implement sustainable programs that strengthen community health

## **Thriving Urban Health Centre Strategy**



MNCH- Maternal and Child Health, NCD- Non Communicable Diseases, CHV- Community Health Volunteers, CBO- Community Based Organization, SHG- Self Help Group, ULB- Urban Local Body, NGO- Non Governmental Organization, HCP- Health Care Providers

## **Our Strategy:**

### **Strategic Foundation:**

## Our Focus: Thriving urban health centres

We believe good health is fundamental to development: with good health people have the chance to make economic and social progress. Poor health puts all that progress in jeopardy. We also believe that the best

way for Americares to contribute to improved health for people affected by urban poverty or disaster is to ensure they have access to a thriving urban health centre. So that is our strategy: to help urban health centres thrive—during times of disaster, recovery and

every day—so they can help people in their communities.

### Why urban health:

Rapid urbanization has outpaced the urban health infrastructure growth in India. By 2030, more than half of India's population will be living in urban areas and of these more than 50% will be living in urban slums, where health is not a priority. Unless

addressed sooner, urban health is a catastrophe waiting to happen. Urban health centres both conventional and nonconventional are key to address urban health challenge in India.

## Defining local health centres

Urban health centres are the health posts, clinics and hospitals that serve as hubs of primary care and health-focused activity in a community
—as well as select social
service agencies and
schools that provide
health services. A health
centre is more than a
facility. It includes the
health workers—from
medical staff to health
educators—who staff
them, as well as the
people and communities
they serve.

## Helping local health centres thrive

Americares helps urban health centres thrive by connecting health-conscious communities (the seeker) and efficient health system (the provider) to improve the health outcomes of the urban community.

## Building health conscious communities:

We work with the communities to address issues around awareness, access and WASH through preventive, promotive and curative care.

## Catalysing efficient health system:

We build capacity and resilience of the health centre itself, based on World Health Organization (WHO) building blocks of strong health systems; ensure quality of care, sense of warmth, respect, compassion and dignity

patients experience from a caring health centre team

#### The Connection:

We connect the communities and the health system to ensure bidirectional engagement between the health centre and community and that with the larger health system for referral and support.

## **Key Milestones** Since 2006



ADMIN – 12A registration, FDA license, Mumbai office & warehouse established, FCRA registration, 12,000 sq. ft warehouse. moved to Andheri office.

ER - Avalanche: Kashmir.
Cyclone Alia: West Bengal,
Cyclone Phalin: Odisha.
Earthquake: Sikkim.
Encephalitis: Bihar.

Floods: Bihar, Andhra Pradesh, Karnataka, Uttarakhand, Leh, Uttar Pradesh, Odisha.
Tornado: Odisha.

**A2M-** Program launch, Cumulative shipment worth Rs. 20 Cr., 1000 shipments, 150 partners, 24 states. apacity building workshop, 1000 shipments,

CS - Phase I launched at JRH Hospital, Phase II launched at KEM Hospital, Infection control manual released, 2 MHCs launched, 48 locations, 10 Thousand consultations

CH - Phase I School Health Program (SHP) launched,
 Phase II Hepatitis B program launched.

Spirit of Humanity launched.

ER - Earthquake: Nepal. Floods: Tamil Nadu.

**A2M** - Shipment worth **Rs. 35 Cr.,** 100+ partners, 27 states.

CS - 300 Thousand consultations since launch, Phase III launched in LTMMC & GH, Sion Hospital, Mumbai.

CH - Hepatitis B Phase II, SHP Phase II launched in 79 MCGM schools.



**A2M -** Introduction of oncology program.

 - 626 Thousand consultations on MHC since launch,
 2.8 Thousand health workers benefited through project I-SPEAR.

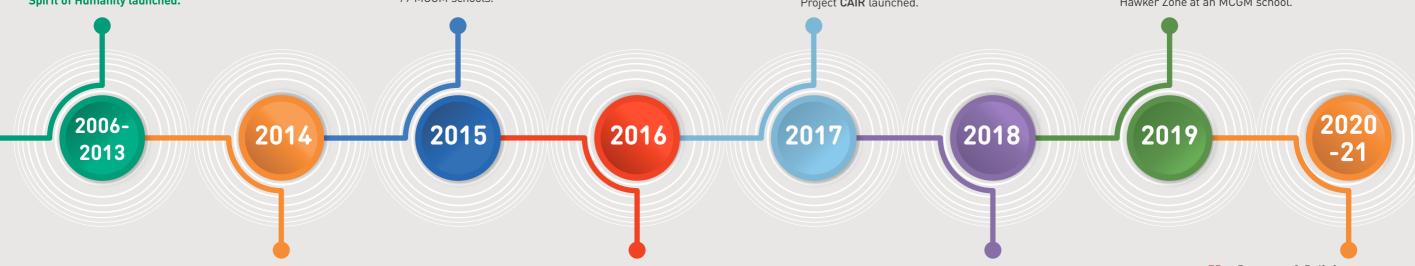
CH - SHP expanded to 26 Thousand children in 88 schools, Project CAIR launched.



**A2M -** Cumulative shipments worth more than **Rs. 65 Cr.** 

CS - MHC - New designed Van Health Booth New EMR (Electronic Medical Records) introduced Model ward launched in LTMMC & GH, Infection Prevention & Control Manual introduced, Launched I-SPEAR Mobile App for HCWS capacity building.

CH - SHP- Introduced Student
Cabinets, Piloted ' Healthy
Hawker Zone'at an MCGM school.



**ER** - Floods: Bihar, Kashmir, Odisha.

**A2M** - Cumulative shipment worth **Rs. 30 Cr.** 

CS - 3 MHCs launched, 130 locations, 20 Thousand consultations, Joint declaration signed at KEM Hospital.

**CH** - Hepatitis B counseling 10 Thousand women.

- ER Drought: Maharashtra. Floods: Tamil Nadu, Manipur, West Bengal.
- **A2M** Crossed landmark 1300+ shipments since 2006.
- CS 450 Thousand consultations on MHC since launch, Health System Strengthening project I-SPEAR launched at LTMMC & GH, Sion Hospital.

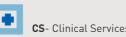
- ER Cyclone Gaja: Tamil Nadu. Floods: Kerala, Assam. Recovery: Rajasthan.
- **A2M -** Cumulative shipments worth more than **Rs. 53.5 Cr.**
- CS MHC launched in Tamil Nadu, Over 1.7 Lac consultations on MHC, Model Ward and Mobile Learning App for HCWs.
- CH SHP expanded to semi-aided schools, Total 93 schools, 32 Thousand children, Protected >11 Thousand women in child-bearing age from Hepatitis B.

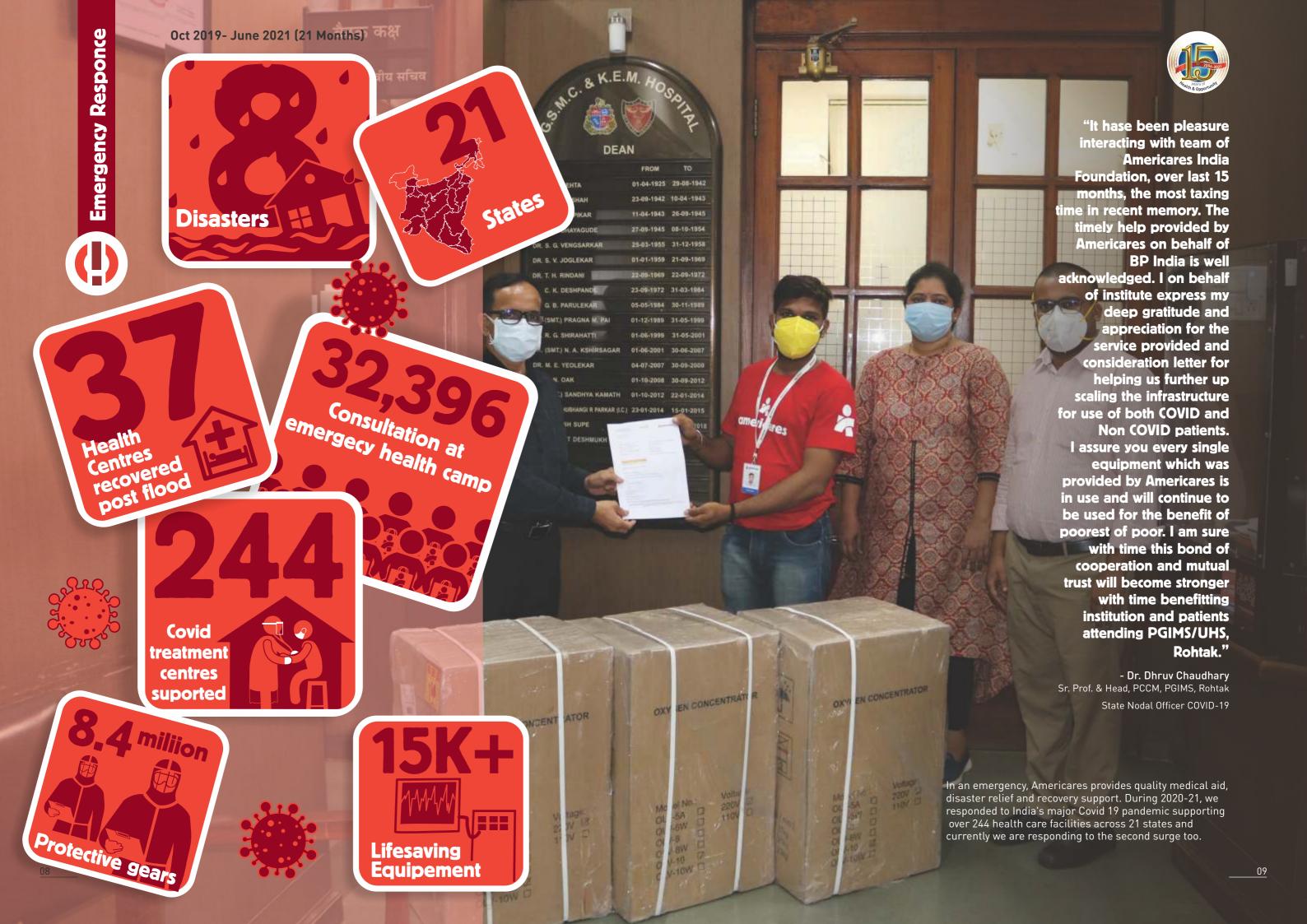
- ER Response & Relief:
   Covid 19 Response 21 States, 244 Covid Centres
   Cyclone: Amphan, West Bengal
   Bulbul, Odisha.
   Floods: Assam, Bihar, Kerala
   Karnataka, and Maharashtra.
   Recovery: Maharashtra and Kerala Floods.
   Readiness: Upgradation
   Sinnar Rural Hospital, Nashik
   Americares Emergency Roster Training
   for ER Partners
- CS Launched 5 new MHC
  Piloted Master class 2.0 E- learning
  Introduced Digital health Service
  Introduced Project Parivartan.
- CH SHP- Introduced tele-health and online session
  Launched NC-DISHAA
  Non Communicable Disease
  Intervention for Screening,
  Health Awareness and Access

ER - Emergency Respons











**Americares** responds to disasters and humanitarian crises, establishes longterm recovery projects, and brings disaster preparedness programs to vulnerable communities by training local health care providers, addressing the health needs of the community and restoring access to care. The COVID-19 pandemic struck in early 2020, requiring a pan-India response and introducing increased complexity to ongoing and new emergencies, including cyclones and floods. The team added infection prevention and control supplies, training, and education to every emergency program to lower the risk of survivors and responders becoming infected with COVID-19.

#### **COVID-19 PANDAMIC RESPONSE:**

To save lives and stop the spread of the coronavirus, Americares focused on three key areas: access to critical supplies, continuity of ongoing health services and access to credible safety information, including educating the vulnerable communities. By June 31, 2021, Americares had provided 8.4 million units of equipment and emergency supplies to 244 COVID-19 facilities in 21 states. These included safety supplies, including masks, gloves, gowns and disinfectants for frontline healthcare workers and lifesaving equipment such as ventilators, oxygen concentrators and multi-para monitors. Americares supported COVID-19 centres in worst affected states like Maharashtra, Delhi as well as resource constrained states like Chhattisgarh and Bihar. Technical assistance included community education and outreach towards COVID-19 appropriate behaviour, precautions, and vaccination.

PREPAREDNESS: In early 2020, Americares modified its preparedness programs to include pandemic preparedness, including how to shift to telehealth, operate with less staff and adopt practices to reduce risk of infection while maintaining services for patients. Americares continued to strengthen the roster of emergency responders, with 115 partner organizations strategically located in 83 Districts across 23 states of India, enabling the reach in future emergencies. Americares prepositioned relief supplies and deployed those resources during multiple emergencies

#### **RESPONSE:**

in 2019-21 period.

When disaster strikes, we commit right away because lives are at stake. We focus on the most vulnerable population – low-income patients, elderly, children, and women. To meet the health needs of survivors of Cyclone Amphan and Bulbul in eastern India, and flood survivors of Assam, Bihar,





Maharashtra, Karnataka, and Kerala floods, Americares deployed medical and response teams on ground. More than 32,000 medical consultations were provided for patients in need of care. Over 16,900 families were provided with essential relief support focusing on health & hygiene, drinking water, disease prevention, among others. More than 7,700 families affected by cyclones received temporary shelter support in north eastern states.

#### **RECOVERY:**

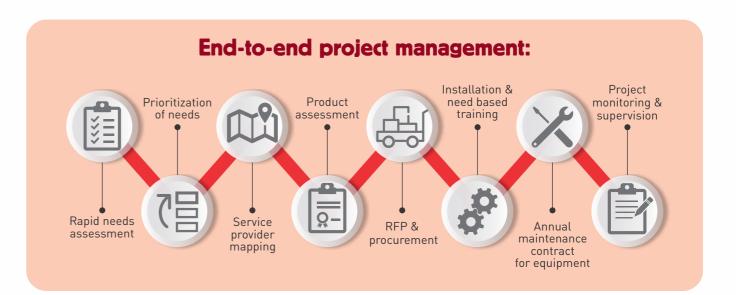
After disasters, Americares stays for as long as needed to help health systems strengthen and recover. We help local health centres to "Build Back Better". Americares has supported the upgradation of 33 health centres in Kerala and Maharashtra. These include, 6 flood affected primary health centres (PHCs) in Malappuram, Thrissur and Wayanad districts of Kerala, 5 PHCs and 22 sub centers in Sangli and Kolhapur District of Maharashtra.

Mental health and psychosocial support to deal with trauma and loss is one of the leading unmet needs post disasters.





Americares builds capacity of local health workers to identify stress and trauma cases and provide referral and other interventions.





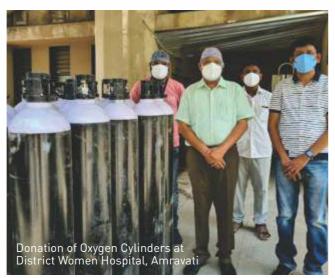


### Access to critical supplies to dedicated COVID-19 facilities

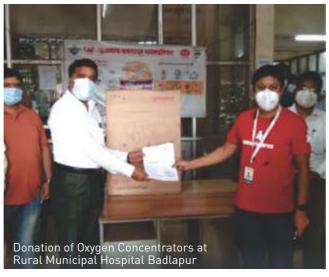




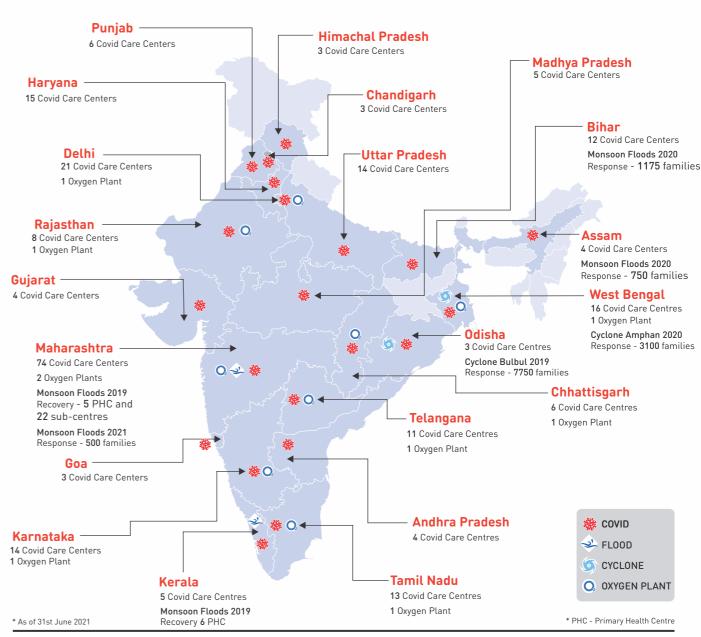








## **Emergency Response Summary 2020-21**



## Present Emergency Covid-19 Pandemic second surge

Past Emergencies 2020

Covid 19 First surge-21 states, 244 Covid care centres Cyclone: Amphan- West Bengal and Cyclone: Bulbul - Odisha. Floods: Assam, Bihar, Kerala

Karnataka and Maharashtra Recovery of Maharashtra and Kerala Floods.

Readiness of Sinnar Rural Hospital, Nashik Upgradation

### 2019- Monsoon Floods

Maharashtra, Assam, Bihar, Kerala & Karnataka Maharashtra floods 2019 Kerala floods 2018

2019- Cyclone: Fani, Odisha

2018- Cyclone: Gaja, Tamil Nadu - Floods: Kerala & Assam

- I toous. Nerata & Assain

2017- Cyclone: Ockhi, Tamil Nadu - Floods: North-East 2016- Drought: Maharashtra - Floods: Tamil Nadu,

2015- Earthquake: Nepal - Floods: Tamil Nadu

Manipur, West Bengal

2014- Floods: Bihar, Kashmir Odisha.

**2013-** Cyclone: Phalin, Odisha Floods: Uttarakhand

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<u>12</u> <u>13</u>



### Maharashtra

74 Covid Care Centers 2 Oxygen Plant 11,150 Life Saving Equipments 4,270,195 Protective Gears

## **Gujarat**

4 Covid Care Centers 112 Life Saving Equipments **10,293** Protective Gears

### Rajasthan

8 Covid Care Centers 1 Oxygen Plant 156 Life Saving Equipments

## **Covid Response Summary**

2020-21

## **Uttar Pradesh**

14 Covid Care Centers **296** Life Saving Equipments 318,200 Protective Gears



12 Covid Care Centers 298 Life Saving Equipments **63,000** Protective Gears

### Delhi

21 Covid Care Centers 1 Oxygen Plant **586** Life Saving Equipments 859,130 Protective Gears



15 Covid Care Centers **458** Life Saving Equipments **162,817** Protective Gears

## **Punjab**

**6** Covid Care Centers 210 Life Saving Equipments

### Chandigarh

6 Covid Care Centers 1 Oxygen Plant **35** Life Saving Equipments 200 Protective Gears



**5** Covid Care Centers 130 Life Saving Equipments



4 Covid Care Centers **120** Life Saving Equipments

### **Himachal Pradesh**

3 Covid Care Centers 20 Life Saving Equipments 250,100 Protective Gears



## **West Bengal**

16 Covid Care Centers 1 Oxygen Plant **230** Life Saving Equipments **63,100** Protective Gears



3 Covid Care Centers 85 Life Saving Equipments 2000 Protective Gears



### **Andhra Pradesh**

**75** Life Saving Equipments 100,000 Protective Gears

### Telangana

11 Covid Care Centers 1 Oxygen Plant **553** Life Saving Equipments 1,086,951 Protective Gears



3 Covid Care Centers **130** Life Saving Equipments **63,000** Protective Gears

### Karnataka

14 Covid Care Centers 1 Oxygen Plant **849** Life Saving Equipments **244,174** Protective Gears

### Kerala

5 Covid Care Centers 81,100 Protective Gears

### **Tamil Nadu**

13 Covid Care Centers

1 Oxygen Plant

204 Life Saving Equipments

**526,900** Protective Gears

### Chhattisgarh

3 Covid Care Centers **170** Life Saving Equipments **328,000** Protective Gears

4 Covid Care Centers





Rapid pace of urbanisation has outpaced the healthcare infrastructure growth in India. For the urban poor who live in slums, living conditions are challenging and healthcare is often not the priority: **Americares Mobile** Health Centre (MHC) program currently functional across four states is working to change that. Our model (ABCD) ensures. Access to primary Care (A), Behavioral change (B), Capacity building of local healthcare providers (C) and Developing referral linkages (D). During 2020-21, our mobile health centres served more than 94,000 consultations

**ACCESS TO PRIMARY CARE:** Lack of Awareness, Affordability and Access leads to a huge healthcare burden on the urban 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.

Each MHC is designed to address privacy, streamlining the patients flow increasing the efficiency and effectiveness on-field. Our MHCs are fully equipped and managed by a team of healthcare professionals to provide primary healthcare.

### **Electronic Medical Records (EMR)**

system on our program enables effective follow up and management of patients suffering from NCD and chronic disorders. Ease of access to patient's history enables our team to decide to guide beneficiaries are

screened for Anaemia (Hb test) and Diabetes (Random blood sugar levels) using "Point-of-Care" diagnostics, to ensure early intervention including advice focusing on diet, lifestyle modifications, confirmatory tests, and medications for at risk patients identified. During the reporting period, 16,600 individuals were screened for diabetes and 8,400 for Anaemia and followed up.

To ensure continuity of care for our beneficiaries during nationwide lockdown due to COVID-19 pandemic, Telehealth services was initiated, delivering more than 30,000 consultations during April-July 2020.

During 2020-21, our mobile health centres served 94.000 consultations.

### **BEHAVIOUR CHANGE:** The

communities remain oblivious of positive health habits and preventive health practices and are trapped in a vicious cycle of disease that worsens their overall health indicators. Working

with the communities, we build positive health habits through consistent health education to individuals and groups. We engage "Arogya Mitra" - communitybased health volunteers to spread awareness on key illnesses, to mobilize and manage the beneficiary referral flow. We reached out to more than 1,250 beneficiaries providing them health information and counselling during 2020-21.

### **CAPACITY BUILDING: Private**

Healthcare Practitioners (HCPs) are the backbone of primary care in the community. Educating them about disease prevention & management techniques has a direct and positive impact on the health outcomes of the communities. In 2017, we introduced 'Masterclass' – our signature HCP capacity building initiative. We have identified the right mix of HCPs who are engaged in quarterly hands-on training programs on specific topics, by subject experts. During 2020-21, we piloted, Master class 2.0 an E-learning

course developed by Americares India Foundation in collaboration with Medvarsity.

**DEVELOP REFERRAL LINKAGES:** Patients who require higher level of care for investigation, consultation, or admission to hospital, benefit from the referral network of charitable and government facilities. Each MHC has a customised referral directory which helps the doctor to refer the right patient to the right centre. Our doctors follow universal protocols and refer the patients as needed.



### Regular Visits to MHC helps Jaiban to Control her Diabetes

Jaiban Nisa Shaikh, 70-year-old female, came to our MHC at Govandi with complaints of cold, cough and joint pains first time during 2017. Since then, she has been visiting MHC regularly. A local resident, she stays with her son and his family. Her son, a tailor, is a sole earning member of the family of seven. Family belongs to socio-economically weaker section.

On examination by our medical officer, Jaiban was diagnosed as hypertensive and blood test showed raised sugar levels (Fasting-165 gm/dl and Post Lunch - 172mg/dl). She was given medicines for hypertension and diabetes. She also received health education on lifestyle modifications like regular walking and dietary restrictions. Jaiban continued to visit our MHC for treatment every 15 days. She brought desired change in her life style. She followed the instructions given by the doctor. Her continued efforts helped her keep her diabetes and blood pressure under control. Jaiban is thankful for the treatment received from Americares India through MHC program.

Seeing Jaiban's improvement, her son showed interest in promoting health. He is now involved with Americares India as an Arogya Mitra.





Mobile Helath centre in operation





Preventing harm to patients, health workers and visitors due to infection in health care facilities is fundamental to achieve quality care, patient safety, health security and the reduction of health careassociated infections (HAIs) and antimicrobial resistance (AMR). Clean, safe care is a patient right and should also be the duty and pride of all those working in the health care sector.

### **Thriving Local Health Centres**

To support the Government of India's Ayushman Bharat initiative Americares is working to institutionalize the provision of quality comprehensive primary health care services by providing technical support for upgrading & strengthening the Primary Health Centres (PHCs) to Health & Wellness Centres (HWCs). In the first phase of the program, we aim to enhance capacity for comprehensive primary health care by upgradation of 16 PHCs and HWCs in Himachal Pradesh, Chhattisgarh, Maharashtra and Goa to HWCs. We are building capacities of PHC level health workers and ASHA on NCDs and Infection Prevention & Control and connecting the communities to the upgraded HWC to enhance the service utilization.

## Antibiotic Stewardship (AS) - Project Parivartan

Antibiotics have serious adverse effects, which occur in roughly 20% of hospitalized patients who receive them. Patients who are unnecessarily exposed to antibiotics are placed at risk for these adverse events with no benefit. The misuse of antibiotics has also contributed to antibiotic resistance, a serious threat to public health. Americares is piloting a model for Antibiotic Stewardship (AS) among eleven mid-size hospitals across seven states of India. Each hospital will undergo self-assessment using globally accepted tools developed by World Health Organization (WHO) and National Centre for Disease Control (NCDC) to identify the current gaps. A team of domain experts will engage with the hospital administration over three years to facilitate the introduction of Infection Prevention & Control (IPC) program and Antibiotic Stewardship (AS) as part of the overall Anti-Microbial Resistance initiative. The program will focus on staff capacity building and suggesting infrastructural changes to enable IPC practices. The team will aspire to bring in policy level changes in each facility to



ensure long term sustainability and consistency. At the end of three-year program, we expect each of these hospitals to be the Centres of Excellence for the respective states. The learning and the program model will be disseminated through publications, and other knowledge platforms including conferences and journals.

## Online Learning Platform (OLP) to train nurses on Infection Prevention & Control (IPC)

Healthcare Associated Infections (HAI) are one of the most common adverse events in delivery of care and a major public health problem with an impact on morbidity, mortality, and quality of life. Nursing staff plays an important role in the care for patients and preventing healthcare-associated infections, which includes educating the patients and their families, ensuring hand hygiene, and supporting antimicrobial stewardship.

Americares is developing a free, easy to use, digital Online Learning Platform (OLP) that will offer certification programs on various aspects of IPC in English as well as Indian languages. The platform is aimed to improve the quality and standards of practice among the nursing professionals through continued professional development (CPD) opportunities. The platform is expected to bridge the digital divide and enable health professionals to improve the quality of care across India.





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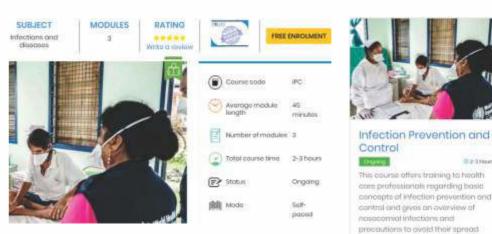


Image courtesy: Pacific Open Learning Health Net (POLHN)



Infection Prevention and Control (Advanced)

102-3 Hear The course explains implementation of infection prevention and control measures in health core settings, management of high-thic settings, surveillance, outhered investigations, suppossessing and manthering.

(Source: National Guidelines for IPC in Healthcare Facilities, NCDC, January 2020)







Health of young people and the adults they will become, is critically linked to the healthrelated behaviour they choose to adapt. School offers an extraordinary setting to influence the choices that young people make and encourage healthy behaviour amongst them. Students who have access to adequate and functional Water, Sanitation and Hygiene (WASH) conditions at school are able to integrate hygiene education into their daily lives and can be effective messengers and agents of change in their families and in the wider community. **Americares' School** Health Program works in 78 schools, both government and semi aided, to bring about this objective.

### **HEALTH EDUCATION:**

Skill based education is an important component for a child's overall development and the benefits can be garnered over long period of time. This is conducted by a dedicated team of trained health facilitators. The health education session is focused on three broad thematic areas: Hygiene, Nutrition and Health. The contents for the classroom sessions are developed to give succinct information to the children. Engaging teaching collaterals are developed to send the health messaging in an easy to- understand manner. We used 'Lecture Engagement-Demonstration' (LED) methodology to deliver the health messages. With the schools shut due to the Covid 19 pandemic, we conducted our Health Education session via online mode of teaching. Nearly 800 sessions were conducted during the lockdown period. Further, tele-calling was started, to educate children on Covid Appropriate Behaviour (CAB) as well as nutrition, oral health, vector borne diseases, among others. Our team made more than 23,000 productive calls during the academic year 2020-21. Nearly 9,000 parents were engaged to educate them on Covid 19 and its prevention in early days, through teleoutreach.

## PREVENTIVE HEALTH INTERVENTION:

Americares conducts comprehensive screening, testing and provision of desired solutions to ensure children do not have health deficit in terms of anaemia, vision, and oral health. Providing health services to detect conditions in their earlier, more treatable stages, significantly reduce the risk of illness. Required and appropriate referrals are done for further treatment.

During 2020-21, Americares team conducted screening & treatment camps for anaemia and vision benefitting nearly 3,500 children. Nearly 40% children who were found to be anaemic, received anthelminthic treatment and 3 months supplement of iron and folic acid. More than 1,000 children received spectacles and close to 500 were referred to eye specialists for further investigations and treatment. 4,000 individuals benefitted from the community-based health camps for parents and general population, focused on identification and treatment of hypertension, diabetes, anaemia and obesity among others.



## Story related to Health Intervention

#### **Grateful to Americares**

**Shruti** is 15 years old, 9th standard student of Pushpa Park Marathi School.

Shruti was found Anaemic at Americares Community Health Camp. Her mother, Mangala, was made aware about the consequences of anaemia. Shruti's mother was handed over the IFA medications along with the nutritional diet for her daughter. Mangala revealed that Shruti was yet to get her menstrual periods. She had consulted some doctors and had undergone various tests and check ups to determine why it was so but there was no change in Shruti's status.

After one and half month's course Shruti received her period and within three months Shruti 's hemoglobin had reached 10. Her mother conveyed her gratefulness in ensuring Shruti's healthy life. In her words I will never forget the care and benefit me, and my daughter received from Americares. "अमेरिकेअर्स ने माझ्या मुलीची घेतलेली काळजी आणि त्या मुळे तिला झालेला फायदा हे मी कधीच विसरणार नाही."



## WATER, SANITATION & HYGIENE (WASH)

Americares' WASH intervention aims to improve the health and learning performance of the children and by extension, that of their families by reducing the incidence of water and sanitation related diseases. Accessible and functional WASH in schools is the first step towards ensuring a healthy physical environment. Sensitizing children on importance of health and hygiene practices is crucial keeping in the mind the importance of varied health benefits.

For sustainable WASH efforts, we form 'Student Cabinet' as a way of transfer of ownership of learning. Each child in the student cabinet has a role and responsibility as part of the team. The Student Cabinet entitles and empowers children with leadership role and decision-making skill in continuing the work of sustainable WASH facilities and practices.

More than 20,000 children benefit with functional WASH facilities in their schools. Our dedicated work to bring clean and healthy changes in our schools was rewarded when three of our schools from P-North Ward won the Clean School Awards recently.

### STAKEHOLDER ENGAGEMENT

Engaging key stakeholders, parents, teachers, and school authorities is extremely important to sustain health and hygiene related behaviour at home and school environment. Americares engages with the school administration and staff, takes feedback and includes inputs while delivering sessions to the children. The positive support of headmasters and teachers has been crucial for our school health program. Building capacity of teachers and headmasters is a decisive component keeping sustainability in mind. We engage parents reaching out to them through parent groups and parentteacher meetings.

Americares supported the schools with customized messaging tool towards Covid Appropriate
Behaviours (CAB) helping schools to be Covid-19 compliant. We imparted awareness sessions at school assembly, in the classrooms and in meetings with teachers and parents. Housekeeping staff were also reached out by the team.
Awareness messages were also placed on the school notice boards for continued health messaging.
Good hygiene practices were reemphasized on every opportunity

that the team got to interact with the children.

#### **BEING ACTIVE CATALYST:**

Behaviour change requires sustained efforts from both the sides- knowledge provider & information receiver. Our school health program plays catalyst role in helping children be the change agents for their families and communities they live in. Americares is focusing on, Strengthening Swatchata Samitee, activating Parent Teacher Association, introduction of Mentor + Mentee Model for Health Education, launch of Mobile Application for better parent engagement and dedicated teachers to be identified as "Health Ambassadors" for schools.



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Close to 50 percent of Mumbai's population lives in slums where healthcare is not a priority-due to lack of access, affordability, education and awareness. In addition, urban slum dwellers are at a risk of a double burden of both communicable and non-communicable diseases with 1 in every 5 individual living in urban slum suffering from either diabetes or hypertension or both.

The prevalence of diabetes mellites in urban areas of India ranges between 10.9% and 14.2% among population aged 20 years and above with a much higher prevalence among individuals aged over 50 years. Americares has developed a model for addressing the challenge of dual disease burden among the urban poor which is being implemented in partnership with the NCD Cell of MCGM, in 130+ slum locations across the 6 wards of Mumbai.

### Non-Communicable Disease Intervention for Screening, Health Awareness and Access (NC-DISHAA)

aims to improve health behaviour enhance compliance of medical treatment and recommendations and improve access to quality care. NC-DISHAA is build on four pillars of "Establish-Educate- Engage-Encourage "engaging with local community health volunteers (Arogya Mitra), local health care providers and health centres.

### **Establish consultation & treatment** pathways

The team of 200 trained "Aarogya Mitra" (community health volunteers) screens 400,000 young adults for risk of Hypertension and Diabetes. The at-risk patients are referred to preferred local health centre for confirmatory tests and treatment thereon.

Americares mobile health centres offer need-based consultation, treatment and advise for DM & HTN to the communities. We establish referral pathways with Govt & Charitable Health Centres.

### **Educate through Behavior Change** Communication

Trained Aarogya Mitra (AM) through regular visits help raise awareness about causes, prevention, access to testing and treatment and treatment compliance.

During every visit, the AM measures the vitals of the at-risk patients and provides them appropriate guidance.

### **Engage the Local Health Care Providers**

NC-DISHAA works closely with the local health care providers within the communities. We build capacities of private healthcare providers on diagnosis and management of diabetes, hypertension and malaria. Each HCP is equipped with specifically developed health education material to enhance their capacities for quality service delivery.

We also partner with MCGM health posts to build the HCP capacity and referral strengthening

### **Encourage Community Ownerships**

NC-DISHAA facilitates the formation of community groups to engage into community partnerships and initiatives of cleanliness, sanitation and hygiene for prevention of the malaria. These groups will support MCGM interventions of surveillance, prevention and community support activities and are aimed to strengthen the communities for further ownership of their communities and sustainability by building their partnership with the MCGM health department.





## **Establish**

Consultation & **Treatment Pathways** 

- Americares Mobile Health Centre offers need-based consultation, treatment and advise for DM & HTN
- Establish referral pathways with Govt & Charitable Health Centres



## **L**ducate

Behaviour change communication

Through trained health worker and community health volunteers (Arogya-Mitra), reach communities to: Raise awareness about

- Causes
- Prevention
- Access to testing and treatment
- Treatment compliance



## **L**ngage

Capacity building of Local HCPs

- Educate the local, Health Care Providers (HCPs) on NCD, Malaria diagnosis and referral
- Equip Local HCPs with health education material to display in the clinic – to reach the unreached
- Partner with MCGM Medical Teams & Health Posts



## Encourage

**Communities** 

- Engage into community partnerships and initiatives on
- Sanitation
- Cleanliness
- Hygiene
- Drive a movement in line with Swach Bharat supported by the local MCGM authorities





Source : National Diabetes and Diabetic inopathy Survey report, 2015-19).



## 10<sup>th</sup> Spirit of Humanity Awards

Americares India Foundation believes in recognizing and honouring those who make exemplary contributions in serving the Indian society. This philosophy has inspired the inception of Spirit of Humanity in 2010. In 2019, Americares celebrated a decade of Spirit of Humanity, serving as a national level platform for collaboration, capacity building, rewards, and recognition within the social sector.

The platform brought together thought leaders from corporate, government, health, academia, development, and CSR sectors. All under one roof, they unite and share their knowledge and proficiency while evaluating the social impact created by the participating organizations. The 10th Spirit of Humanity Awards witnessed interactions among various stakeholders for sustained engagement, increased knowledge, and cross learning.

In 2020, NGOs across India were engaged in supporting the communities with the COVID-19 pandemic. The organizing team of the SOH Awards found it appropriate to allow them to focus on the relief efforts and not distract them by the award process. The SOH Platform therefore took a break and is expected to return with new format in 2021.

### **Collaboration & Participating Benefits**

- Zonal Winner Certificate
- National Winner Certificate
- Trophy
- Cash prize of Rs. 1 Lakh
- Collaboration & Networking: Capacity Building

### Winners of 10<sup>th</sup> Spirit of Humanity Awards

Organization	<b>Award Category</b>
Karm Marg Charitable Society	Child Care
Adventures Beyond Barriers Foundation	Disability
Jhamtse Gatsal Children's Community	Education
Shree Sai Healing Trust	Health
Sense International India	Social Impact
Jabala Action Research Organisation	Women's Empowerment

### **Pre-final Evaluation Round** (at SPJIMR, August 2, 2019)







### **Impact Sectors 2019**

Organizations with Annual Budget < 3 Cr.





**Education** 



**Women's Empowerment** 

Annual Budget > 3 Cr.



**Social Impact** 

### **Highlights**

Categories

**Nominations** 

Jury Members

**Finalists** 

Winners



## **Our Team**

## Our Board of Trustees:

President & Trustee

Mr. S. K. Mitra

Chairman, QSK Advisory Pvt Ltd

Secretary & Trustee

Mr. Ranjit Shahani

President Emeritus, OPPI

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 Leader, Program Operations

Dr. Harshwardhan Dere

Program Leader

## **Professional Standards**

### **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, store, 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)
- Member of Charities Aid Foundation (CAF) India

### **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 Medical College and General Hospital (LTMMC & GH)
- Directorate of Health Services
- Department of Health and Family Welfare
- Sashastra Seema Bal
- 14 Rashtriya Rifles, Indian Army



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Received as donation from Americares Foundation Inc. @ Donations received as of 9th August, 2021 are considered for this report



## **Awards and Recognition**

Mahatma Award 2020 India for demonstrating excellence and the highest standard of ethical conduct, integrity, civic and social responsibility.



### **Mission Dharavi Award**

for providing unconditional support in COVID 19 a global pandamic.



Indo-American Corporate Excellence Award for being the best NGO in India. The award was given on the 40th Anniversary celebration of the Indo-American Chamber of Commerce (IACC).

Americares India received the NGOs in **Healthcare Leadership Award 2019** 



Certificate of Appreciation for selfless service to community towards COVID-19





# Our Mission

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



### **Americares India Foundation**

B-706, Mittal Commercia, Chimatpada, Off MV Road, Marol, Andheri (E), Mumbai- 400 059 022-28598748 americaresindia.org info@americares.org