



**SCHOOL**
for Development and Impact

Annual Report 2021-22



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Message from the CEO

Globally, a discussion continues that the world is facing a situation without precedent: We soon will have more older people than children and more people at extreme old age than ever before. These statements are based on the increasing proportion of older people and the increase in the length of life throughout the world. The subsequent questions that emerge pinpoint the need for longer period of good health, well-being, social engagement and productivity versus the fearful situation of prolonged illness, disability, and dependency.

While all of these aspects stand true for India, there is much more to it, if we delve into the varied landscape of our country, be it geographical, social, cultural and economic. SCHOOL's flagship initiative 'Healthy Ageing' aims at building an age-friendly ecosystem for the elderly population in India. This ecosystem can be founded with diverse pillars, starting from dynamic policies; efficient implementation of those policies through effective programs; creating physical and social infrastructure to foster better health and wellbeing in older age; and of-course a stronger and sensitive cultural milieu that enables in creating a happy and fulfilling world for the older people.

We have thought through all of these aspects, not only on the basis of what we are seeing around us, but by interacting with the older people in India in round-tables; by serving the most vulnerable older people in different pockets of the country and last but not the least by dealing with the challenges of the older people on a day to day basis. We the team of 'Healthy Ageing' feels as though we are living the lives of elderlies by being with them, by finding solutions to their challenges and by bringing to fruition their small wishes, which unfortunately are turned down by the very generations that got nurtured by the elderlies of the day.

Turning 'ageing' into a positive experience calls for efforts that focus on improving the quality of life for older people. Ignoring their needs and challenges is denying them their rights.

Through 'Healthy Ageing' we empower the elderlies to share their challenges; we sensitize the family members, communities, policy makers and program implementers regarding their vulnerabilities; we facilitate various linkages and services to ensure care and support and we continue to create champions for the cause that needs immediate attention.



Dr. Benazir Patil
Chief Executive Officer - SCHOOL

About SCHOOL

Society of Community Health Oriented Operational Links, popularly referred to as 'SCHOOL' and at times as 'SCHOOL for Development and Impact', was founded in the year 2007, wherein a lot of thinking had gone in while defining the objectives and purpose of the organization. With a strong focus on empowerment, equality and participation, SCHOOL works towards achievement of 'SDG-3 – Good Health and Wellbeing' as the last mile and reaches out to the most vulnerable populations across India. SCHOOL applies the mantra of 'reciprocation' between social systems, economy, culture, education, and livelihoods and builds an ecosystem that provides ability to pursue healthy lives. With a strong focus on empowerment and participation, SCHOOL practices a unique approach of addressing all the social determinants that impact human lives.

Our Vision

To bring about inclusive development to achieve sustainable development goals (SDGs)

Our Mission

To work with vulnerable populations in ensuring good health and wellbeing as the last mile by addressing every single social determinant.

SCHOOL through its flagship initiative 'Vriddha Mitra' works with vulnerable older people in India. The flagship program envisions an India in which older people can lead dignified, wholesome, and secured lives. It focuses on building an age friendly ecosystem for the elderly population in India. This translates into the 'change' in: how we think, feel and act towards the older people; how we build support structures that foster the abilities of older people; and how we deliver care, support and services that are responsive to the requirements of older people.

Vridha Mitra (Earlier known as Healthy Ageing)

Our experience and understanding informs us that older age group is invariably associated with health problems accompanying several socio-cultural, economic, and psychological challenges faced in their day-to-day life:






- Socio-cultural: Nuclear family patterns are resulting into lack of social security – further causing isolation and loneliness
- Economic: Lack of pensions and any kind of livelihood resulting into inability to avail nutritious food, health services, medication etc.
- Psychological: Lack of sensitivity among family members, lack of self-care, depression and anxiety are common aspects affecting their mental wellbeing
- Fear and stress of being dependent on others is also a challenge

Program strategy that addresses these problems:

- Reaching the elderlies directly by establishing ‘Community-based Mechanisms’ for the bottom of the pyramid, those residing in slums and also in rural areas.
- Creating champions/ spokesperson who can advocate for the elderlies
- Creating livelihood options, not just for income but also for keeping them engaged
- Collaborating with the government at all levels (national, state, district/ city level)
- Building linkages with varied other stakeholders that will help us in improving the quality of life of the elderlies

a. Structure and governance

‘Vridhha Mitra works with older people in India through the summarised five divisions

Community Based Mechanism (Field projects) <p>It encompasses our community based comprehensive support model, which has been tested in 2 slums of Pune city, further scaled up to 65 more slums in Pune based on the request of the Pune Municipal Corporation (PMC). This model has also been scaled up to 4 slums in the cities of Mumbai and 15 slums in the city of Bhopal and one block in Gwalior district of MP. Today, the direct reach is 11000 elderlies in 86 slums of 3 cities and 15 villages of one block.</p>	
Policy-Advocacy <p>It focuses on dialogue at the national, state and district/ city levels on two aspects, one is increasing the uptake of existing schemes and programs and the other is introduction of newer and better policies and programs for the elderly.</p>	
Championing: <p>It involves two core activities, one, creating some platforms that help in promoting the cause of elderly and two, creating champions/ spokespersons of all ages to support and advocate for the cause of elderlies.</p>	
Livelihood/ productive engagement/ Life-long learning: <p>In this division, we highlight the need for work, and active as well as productive engagement of the elderly along with demystifying the perception that a person above 60 years needs to retire and live a life without new activities, skills or contribution to the country and self. This division reinforces the need of elderlies, to be engaged, have sense of fulfilment and achievement, and ensures life-long-learning.</p>	
Research: <p>There is a dearth of understanding regarding the challenges of the elderlies that emanates from scientific studies. Our community-based projects work towards improving the quality of life of the elderlies, and this is being scientifically captured. We also see a great need to initiate many more studies across the country for better understanding.</p>	

b. Expansion and Coverage

We started with 2 slums in Pune city in January 2019, and today we are in 65 slums, reaching 7000 older people.

The next two cities we expanded to were Mumbai in Maharashtra and Bhopal in Madhya Pradesh in early 2021.

In April 21, we rolled-out our first rural project in one block (rural area) of Gwalior district



Reach of the Program

- **10000 elderlies in 80 slums and one rural block (7000 in Pune; 1000 in Mumbai; 1000 in Bhopal; 1000 in Gwalior)**
- **63% females and 37% males**
- **8% elderlies living alone (without any single family members)**
- **12% elderlies living alone (only with their spouse)**
- **12% elderlies having any kind of pension**
-

Geriatric Units: Dedicated spaces for extending health care and other services to older people

A decision to set up 'Geriatric Units' in Pune was taken up in a joint meeting held between PMC, SCHOOL and WHO on 3rd June 2020. A Geriatric Unit is a dedicated space for geriatric population, aged 60 years and above, which imparts health care and other services. A plan to set up one such unit in secondary hospitals of each zone of Pune city was thus chalked out. These units serve as exclusive centres that assess their physical and mental health conditions and offer them customised care.

The care provided comprises:

- Physiotherapy services (need support for establishment)
- Ambulance to bring elderly for physiotherapy from the slums to the units

The first of its kind Geriatric Unit was established in Dr. Dalvi Hospital in Shivaji Nagar zone of Pune city. The financial support for this unit has been provided by **SBI Capital Markets Limited**.

While everything pertaining to the Geriatric Unit was ready in April 2021, the services could be started only at the end of July 2021, as the PMC hospitals were functioning as Covid Centers during the 2nd wave of Covid-19, and it was risky to have elderly around.

This was also the reason why a separate/ stand-alone space was dedicated for the unit which has separate entrance and is away from the main entrance of Dalvi Hospital. This was also decided in view of the situation that if at all there are any more complications similar to the pandemic, the elderly will always remain safe and secure in a separate space and the unit will always be able to provide essential care and services. Since the inception of the unit, the patient flow and sessions conducted are continuously showing increasing trends.



Referral from home visit and virtual OPD:
For Physiotherapy at the community level



Referral from community level physiotherapist:
To Equipment-based physiotherapy at Geriatric Unit



Patients aged 60 years and above were escorted from more than 55 slums of eight big slum clusters of Pune city to Dalvi hospital in two shifts per day. Most of the elderly are escorted by the ambulance service provided by SCHOOL from the clusters which are included for 'Vridha-Mitra' program. However, more than 10% of elderly are availing services of geriatric unit from the areas other than the program clusters.

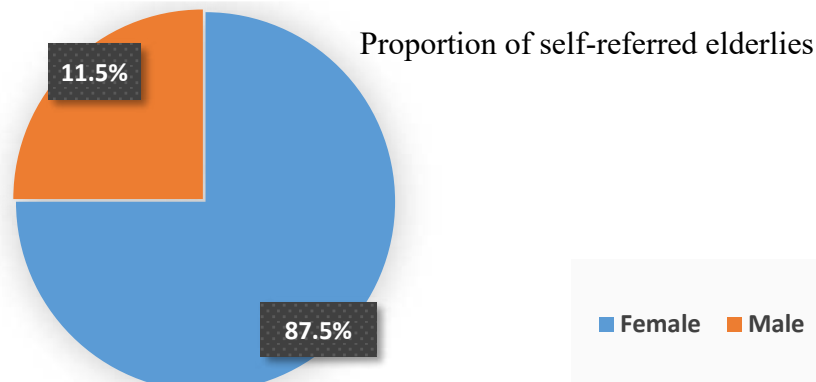
Total number of patients served and sessions conducted: Starting from 27th July 2021 to 31st March 2022, total patients that have been escorted to Dalvi hospital for physiotherapy are 608 with an average of 68 patients per month. Since every patient receives multiple number of sittings/ physiotherapy sessions, a total number of 2247 physiotherapy sessions were held during this period, with an average of 250 sessions per month and 14 sessions per day.

Further to this, it is important to note that there are approximately 4 new patients along with 8 to 10 follow up patients every day.

Month wise number of patients escorted to the unit and the number of physiotherapy sessions held.

Month	Patients	% Patient s	Session s	% Session s
Jul 21	14	2.3	20	1
Aug 21	77	12.7	202	9
Sep 21	58	9.5	213	9
Oct 21	80	13.2	254	11
Nov 21	70	11.5	256	11
Dec 21	93	15.3	400	18
Jan 22	62	10.2	271	12
Feb 22	80	13.2	308	14
Mar 22	74	12.2	323	14
Total	608	100.0	2247	100%

Elderlies attending Geriatric unit: Most of the elderlies are escorted by the ambulance service provided by SCHOOL. Those are from the clusters which are included for 'Vriddha-Mitra' program. However, more than 10% of elderlies are availing services of geriatric unit from the areas other than the program clusters. They are self-referred. Following graph gives a clear idea of the proportion of patients:



Although the number of self-referred elderlies is comparatively less, it is increasing day by day. These elderlies are mostly from nearby areas like Shivajinagar, Narveer, Tanaji, wadi, Mula Road, Khadki, Peth area, and Market yard etc. They have come to know about the services at geriatric unit by word of mouth.

Impact of the services on elderly population

The elderlies from entire Pune city undergo physiotherapy at the Geriatric Unit. A lot of changes are seen in them apart from the relief they receive from the treatment. A positive attitude has got instilled

in them, they look forward to coming to the unit, for treatment as well as for interacting with the team in the unit. They encourage other elderly to come forward and take treatment especially the ones that are scared of equipment and have lost hope that they will ever find some relief from their pain.

A positive impact is also visible because of the location of the unit, because it is almost equidistant to many slum communities around. Since it is housed in Dalvi hospital, a number of other services can be mobilized for the elderly, especially those who suffer from hypertension and diabetes.

A number of elderly coming for the treatment have also been fully vaccinated by SCHOOL team in the vaccination unit at Dalvi hospital.

Elderly who were unaware of a treatment like this, which is without any medication, now value the inputs given by the doctors in the unit. They also value the assistive devices and nutritional supplements like calcium and D3 they are extended by the unit based on doctors' advice.

For an elderly who resides in the slums, those who have no pensions and no source of livelihood, a no-cost service, which includes transportation and escorting them to the unit and provision of services at the unit, it impacts them hugely as this keeps them free of any economic burden.

Apart from all of these aspects, SCHOOL as an organization and PMC as an administrative body, has jointly witnessed the value in these services and is working towards establishment of more such units near the slum communities so that the most vulnerable and the poor can benefit from these services.

Ambulance services at the Geriatric Unit

The ambulance services have been activated for the elderly patients, these include bringing the patients and dropping them back to their homes, those referred by the physiotherapists that do the sessions in the slum communities and also the ones referred by other doctors.

d. Services to improve quality of life

A good quality of life includes being pleased with life and being happy. When we work with the older people in the communities, with every passing day their situation unfolds and we witness their peace, their sense of satisfaction and their inclination towards us, which is nothing but a result of improvement in their overall quality of life.

This realization has helped us in aligning all our activities with the ‘Quality of Life’ domains as defined by WHO and has also given us a sense and an understanding of how we can measure a change or an improvement in their lives.

Improving ‘Quality of Life’

WHO defines quality of life through six domains

1. Physical Health
2. Psychological state
3. Level of independence
4. Social Relationships
5. Environmental features
6. Spiritual concerns

Our Individual Care Plan focuses on different factors related to these 6 domains

Domains	Activities that address these domains
1. Physical Health	<ul style="list-style-type: none"> - Home based health-check-ups - Disbursement of medicines and supplements - Virtual OPDs - Referral to higher facilities for treatment
2. Psychological state	<ul style="list-style-type: none"> - One on one Counselling with the elderly - Following mhGAP tool to understand their mental wellbeing - Talking and sensitizing the family members
3. Level of independence	<ul style="list-style-type: none"> - Providing assistive devices to the elderly - Providing basic necessities such as diapers, ration, etc. - Providing multi-vitamins to improve physical strength to move around
4. Social Relationships	<ul style="list-style-type: none"> - Community level meetings - Encouraging youth engagement - Creating volunteers Inter-generational bonding - Putting up IEC and BCC messages in the community to create an understanding of the elderly’s need
5. Environmental features	<ul style="list-style-type: none"> - House repairs for improving living conditions and providing ease and comfort - Home visits, for building enabling environment - Counselling of the elderly and their family members - Providing assistive devices to reduce their dependence and improve freedom
6. Spiritual concerns	<ul style="list-style-type: none"> - Coming together as a group and sharing their beliefs - Singing, Lunching and engaging with each other

The following activities describe the efforts we make to improve their quality of life:



Home Visit

Addressing the attitudinal issues of elderly and their family members

Communication challenges within the family

Counselling on life-style and nutrition



Home Health Check-up

Prioritization of elderlies based on their health conditions (High, mid & low)

Provide information related to special camps and community meetings

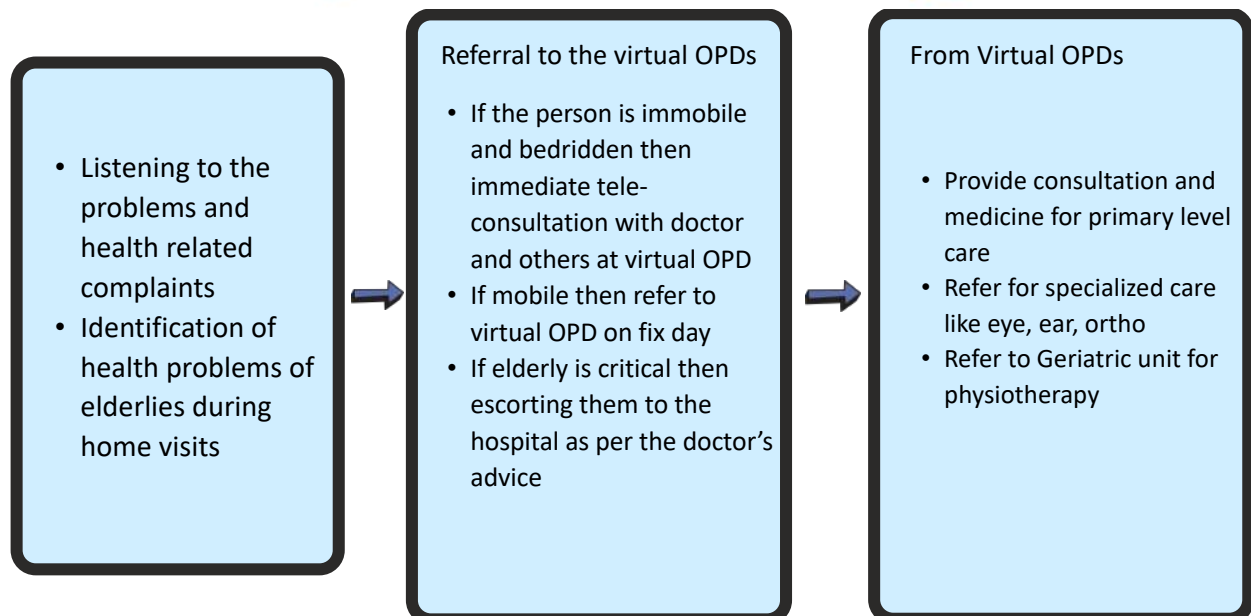
Follow-up on treatment for chronic illnesses

Needs assessment and distribution of essential supplies

Referral for virtual OPD and community-based physiotherapy sessions

Discussions on availability of documents and eligibility for different schemes

Comprehensive health care support



Mental Wellbeing



Issues that get identified at home level

- Behavioral problems like violence
- Environmental issues
- History of mental illness

Basic counselling by CO along with supervisor

Advanced counselling by professionals either at home or in the center located at the site of referral organization

Referral to a secondary hospital for seeing a psychiatrist or any other expert

Referral for all other services



Legal aid

Rehabilitation of elderlies or their family members.

Issues pertaining to violence at home

Entitlements:
Ration card; Aadhar card; Income certificate; bank accounts etc.

'Healthy Ageing' Network provides the above valuable services which help in improving the quality of life for the elderlies.

House repairs for improving living conditions

It is not just a proverb, but the truth, "There's no place like home."

A house is all about four dimensions:

- The physical structure that shelters us
- The home we find through social, economic and cultural construction around us.
- The community and the environment
- and the services we can access near us.

Many elderly live in dilapidated homes that have broken ceilings; broken floors; and no toilets; at times there are termites and rodents roaming around, with severely unhygienic conditions.

Hence, efforts are made to improve their living conditions through: house repairs, and reconstruction of houses right from the scratch, by razing the dilapidated structures to the ground. We also make architectural modifications for their ease and comfort.



Social security entitlements and schemes



A number of social security schemes include:

- Sanjay Gandhi Niradhar Pension Yojana, Pradhan Mantri Bima Suraksha Yojana,
- Ayushman Bharat Card, Senior Citizens Card.
- Disability certificates

To ensure social security entitlements and schemes, we work on the following:

- Applying for all social entitlements for the first time (Aadhar, PAN, Ration card etc.)
- Applying for updating the existing entitlements with correct name, age, address etc.
- Seeking income & domicile certificates
- Ensuring the completion of application at e-Seva Kendra for pensions or any other social security scheme.
- Escorting the elderly for physical verification of documents

Livelihood: Establishing 'Elderly Employment Bureau'



Started with Skill-Mapping:

Need support to start short-term programs:

- to assess 'How we can engage the elderly,
- ensure that they feel enthusiastic about learning something new
- and also have a sense of achievement and fulfilment

Need support for group based activities; with few trainers and some raw-materials for short courses like:

- Jewelry making;
- gift envelopes; letter pads;
- and cloth bag making

We have now started a rotating fund which provides small support of Rs.500 to Rs.1000 as seed fund to the elderlies for starting small businesses like vegetable selling, garland making etc.

Last Mile Connectivity in Pune:

- **Support through home visits:** Totally 38433 home visits were paid during the last Year to provide support to elderlies through counselling on improving life style, mental well-being, psychological support, nutrition; interactions with family members to discuss about elderlies' health issues and care required, delivered the information health issues, nutrition, exercise, and medication; information on government schemes especially, *Shahari-Garib Yojana*; and information on physiotherapy sessions being held in the field.
- **Support through assistive devices:** 2839 different assistive devices such as walking sticks, walkers, commode chair, wheelchair, asthma pumps, hearing aid, spectacles, knee caps, etc. were provided to make their life easy. 77 Table fans were provided on special demand during the summer season. 107 blankets were provided in winter season.
- Total 16104 elderlies were provided with medicines and nutritional supplements.
- Total 4404 elderlies were provided Ration kits.
- Routinely we had 170 bedridden elderlies every month, for whom the support comprised: instructions regarding special care to be taken in terms of nutrition, hygiene, medication and exercises; along with diapers and multi-vitamins.

- 3052 elderlies were provided consultation and medication through the virtual OPDs held near their homes.
- During this Year 2783 elderlies got physiotherapy in the community and 665 elderlies got physiotherapy at the Geriatric unit.

Last Mile Connectivity in Mumbai, Bhopal and Gwalior: -

- **Support through Home visits:** Total 11932 home visits and follow-up visits (Mumbai-4767, Gwalior-3612, Bhopal-3553) were conducted during this year to provide support to elderlies.
- **Distribution of assistive devices:** Total 2216 assistive devices (Mumbai-342, Gwalior-546, Bhopal-1328) were provided to the elderlies
- Total 1077 elderlies (Mumbai-327, Gwalior-268, Bhopal-482) were provided consultation through Virtual OPDs
- Medicines and multi-vitamins were extended to 6415 elderlies (Mumbai-946, Gwalior- 1074, Bhopal-4395)
- Raw ration kits were distributed to 1946 elderlies (Mumbai-702, Bhopal-669, Gwalior-557)
- 228 elderlies were provided with blanket, pillows, bedsheets and clothes (Mumbai-47, Gwalior-181)
- Total 391 elderlies (Gwalior-226, Bhopal-165) were provided home health check up
- 93 elderlies received physiotherapy in the community and 28 elderlies got physiotherapy at Geriatric unit in Bhopal.

Special Services in Pune City:

- Intestinal cancer screening camps were conducted where 396 elderlies were screened and provided information and support. out of which 2 elderlies were detected and referred for treatment
- Cervical and Breast cancer screening camps in 7 slums clusters where 378 female elderlies were screened and provided information and support.
- 778 elderlies received eye check-up services at H.V. Desai hospital and eye check- up camps.

- 192 elderly patients were escorted to HV Desai Hospital for cataract surgery.
- 2919 patients received physiotherapy services at their doorstep by the experts in Pune city.
- 636 elderly patients received mental health counselling services. Mpower NGO from Mumbai conducts online sessions for the mentally ill patients in Lohianagar and Ramtekdi clusters. Alongwith, Parivartan Trust and Swadhaar are also in the network to provide counselling services for mental health in other slum clusters.

Initiation of housing project for elderlies in Pune

On a day-to-day basis we meet with the elderlies who are facing the challenges of living in dilapidated homes that have conditions like: broken ceilings; broken floors; no toilets in the house; presence of termites and rodents; and severely unhygienic conditions. As Vriddha Mitra sees 'good housing conditions' as a prerequisite for inclusive, equitable, safe, resilient, sustainable and quality life for our elderlies, an effort was made to reach out to donors for supporting this activity. During the last quarter, 5 houses that belonged to the elderlies living along were repaired and reconstructed, this included reconstructing 3 houses completely, in one house a toilet was constructed and for one house the roof was replaced. The team has identified many more houses that need reconstruction and is making attempts to raise funds for this activity.

Special Events

- International Elderly Day was celebrated on 1st October 2021 at the Geriatric unit in the presence of PMC officials and other dignitaries.
- On the occasion of Navratri festival, Pune team organised a traditional Maharashtrian cultural activity. Our elderly men and women and non-elderlies participated in various activities of the programme.
- An initiative to create a network of organizations has been embarked. First meeting of 'Vriddha Mitra Network' was organized on 6th January 2022 in Pune with 21 organizations
- Three Volunteers' Workshop were held during the months of Jan, Feb and March, and a total of 71 volunteers were trained and oriented on aspects and challenges related to elderlies
- Cooking competition of elderly women from all the clusters in Pune was organized on the occasion of 'International Women's Day'. Total 350 elderlies attended the event and out of

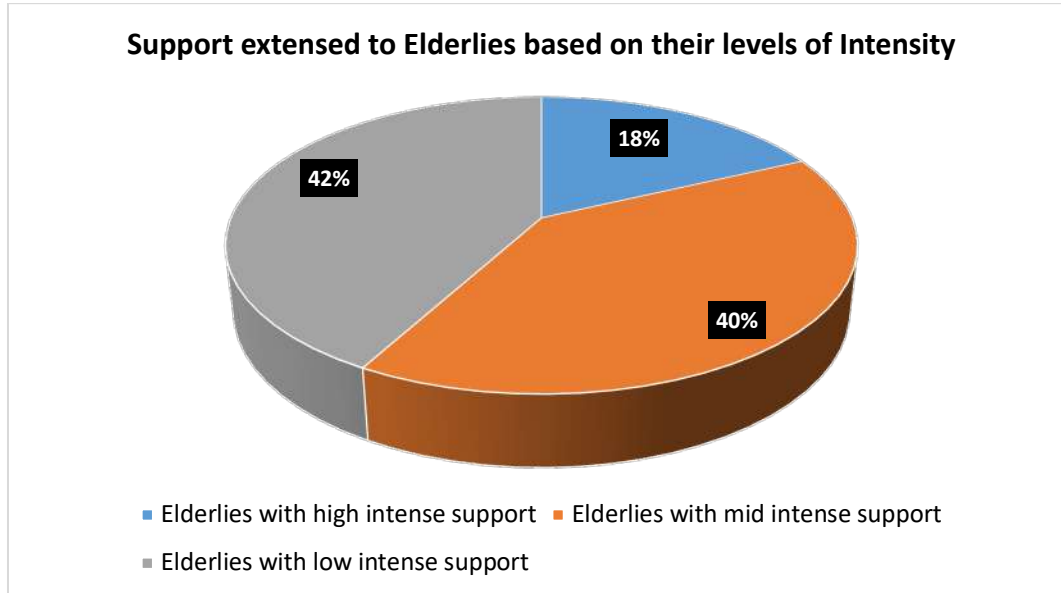
those, 170 women participated in the competition In Ambojwadi slums in Mumbai, the Law students oriented the elderlies on the rights of elderlies on this very day

- With the support from Rotary Club, Pune, the first picnic after Covid situation was organized for 30 elderlies at Empress Garden, Pune, which proved to be a good recreation for elderlies

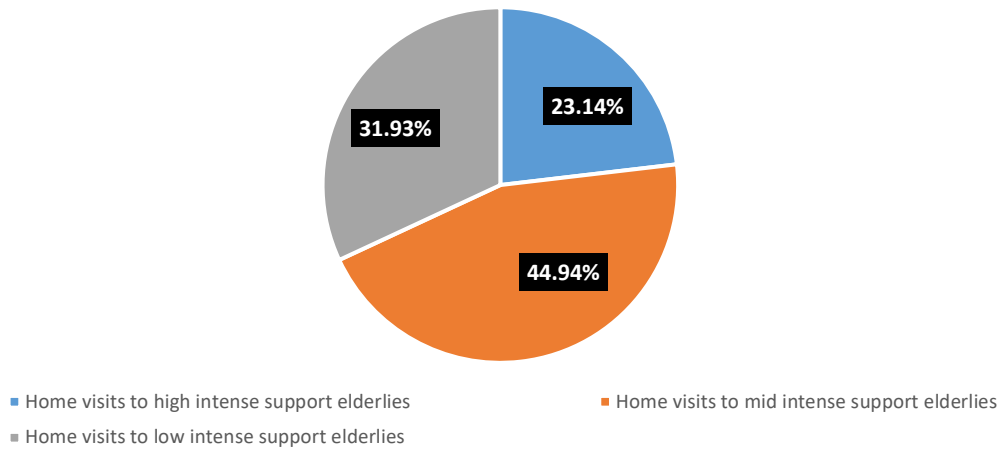
Social Security Schemes:

- Shahari Gareeb Yojana is a Pune Municipal Corporation health scheme to cover the annual medical expenses up to Rs. 2 Lakh in a year. 457 elderlies have received the cards through the program, out which 406 were sponsored by SCHOOL.
- In Mumbai Senior Citizen Card Scheme has been introduced and support is being provided by an organization called YUVA. 37 elderlies received senior citizen card with their support
- 35 elderlies started with pension (Gwalior-26, Bhopal-9) under government schemes and 44 elderlies (Gwalior-22, Bhopal-22) received support to get Ayushman (health insurance) card.

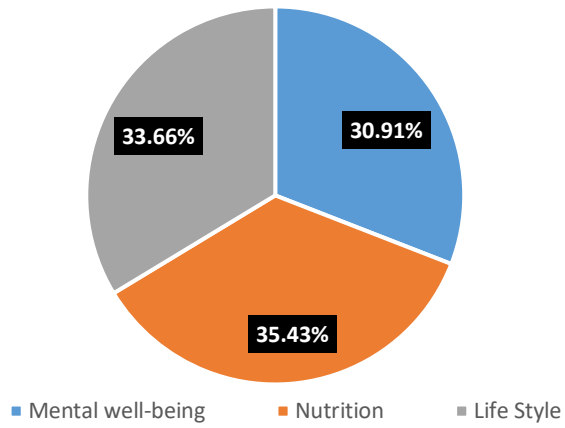
e. The Visible Impact



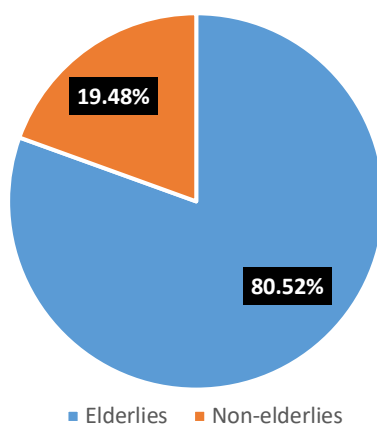
Home Visits by Intensity of Support, N = 48410



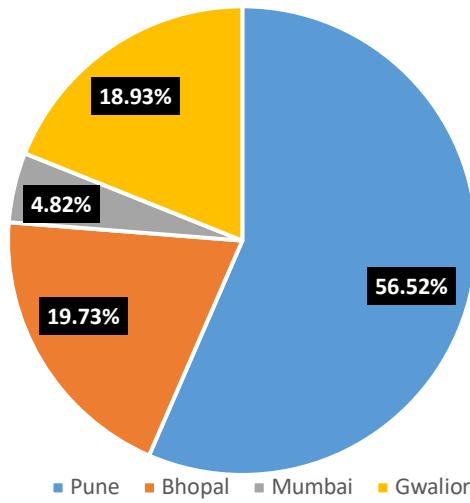
Counselling Sessions, N = 68546



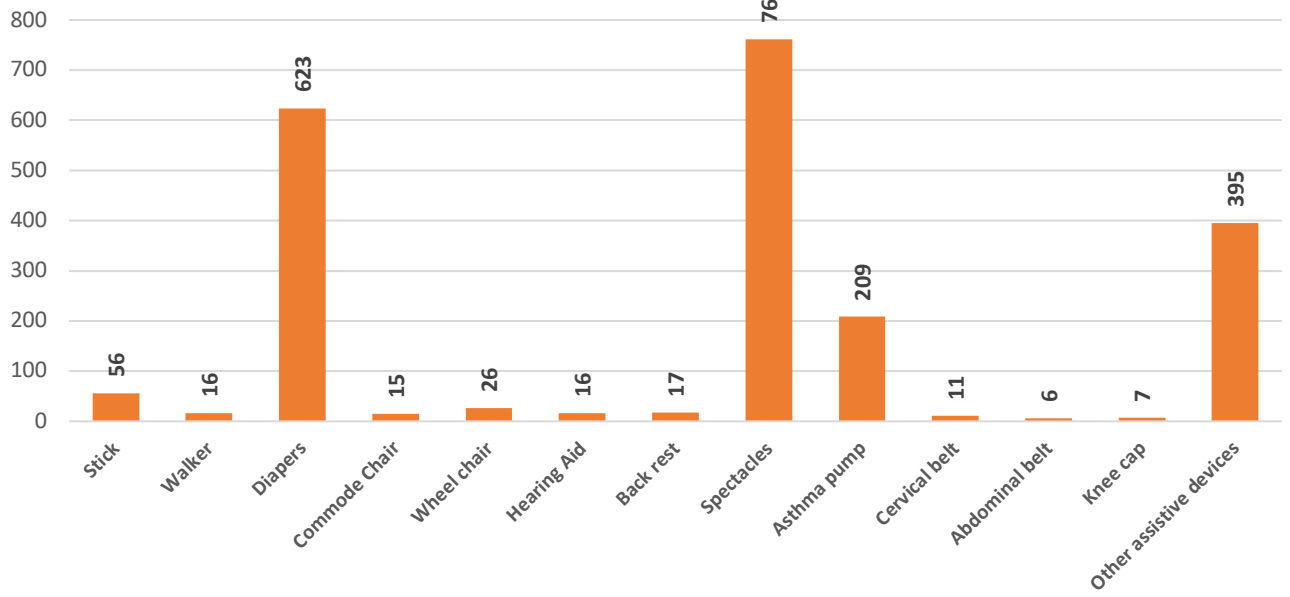
Participants of Community Meetings, N = 4205



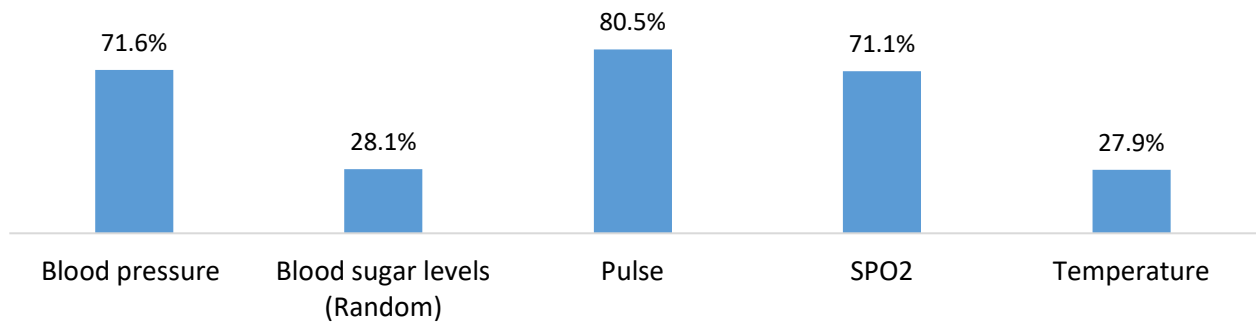
Essential supplies: Ration, Medicines and Diapers



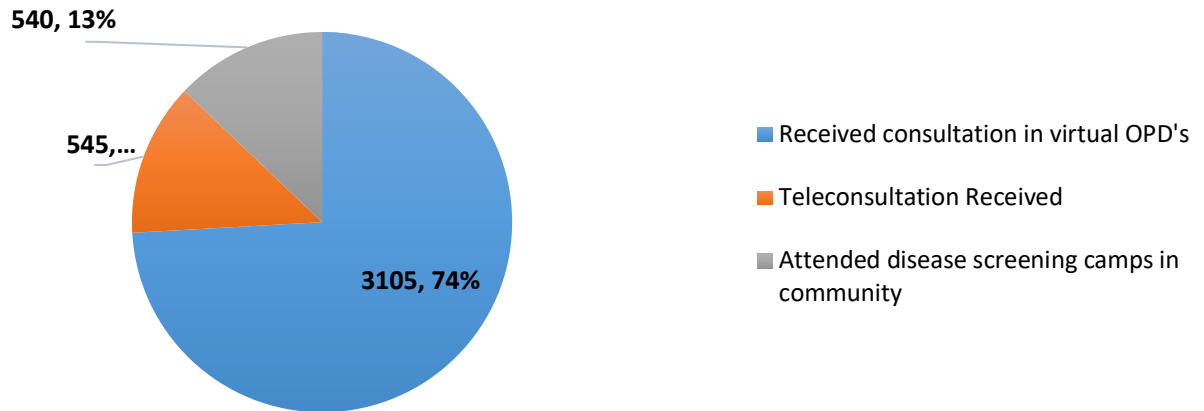
Essential supplies: Distribution of Assistive Devices



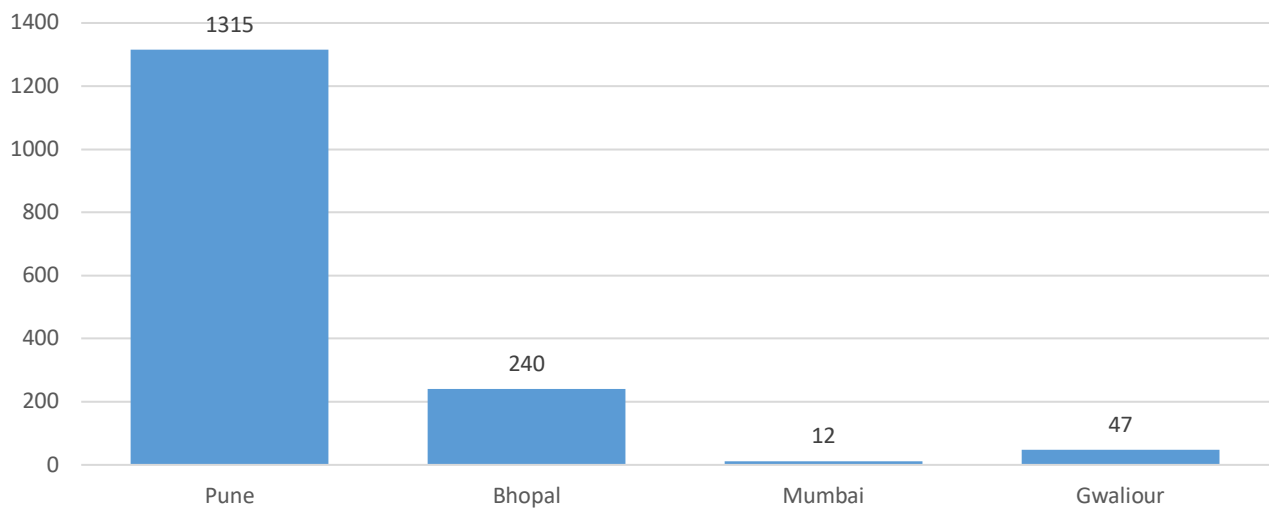
Different Services Provided During Home Health Checkup



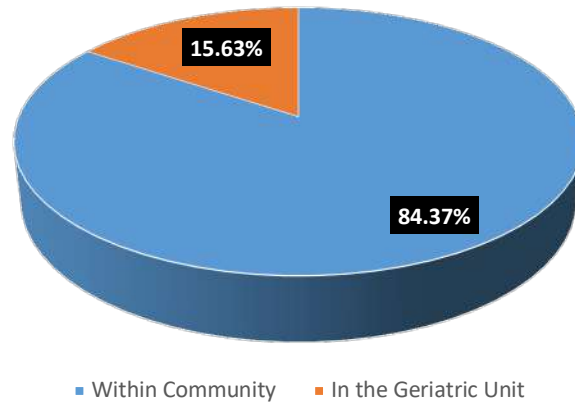
Medical Consultation through Various Sources



Number of elderlies escorted to the hospital

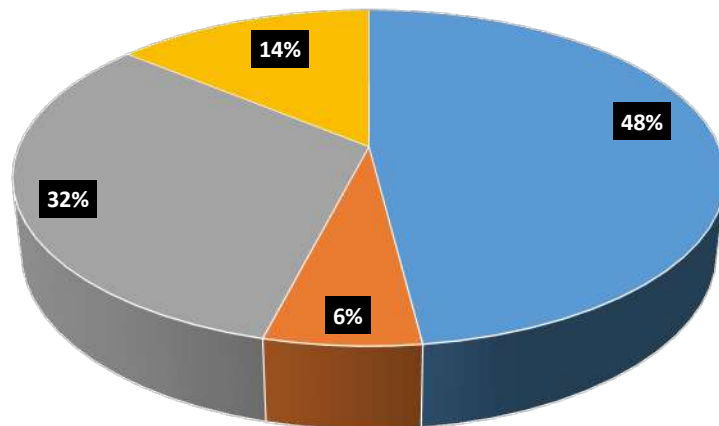


Proportion of beneficiaries received Physiotherapy Services at the Geriatric Unit and in the community (N=3505)



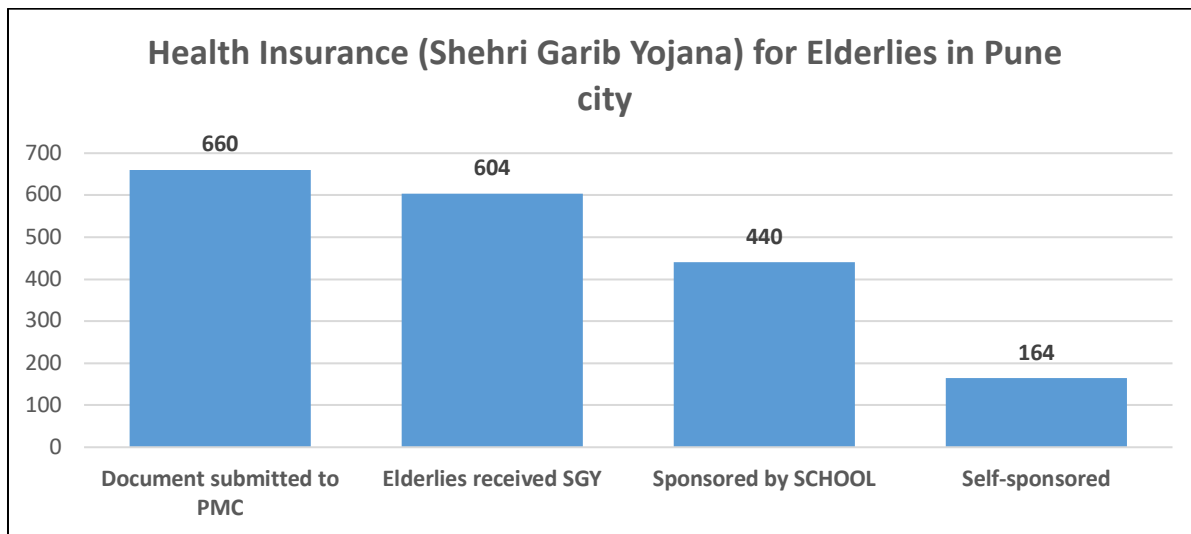
Referrals

Referrals



- Number of elderlies referred to the nearest government OPD
- Number of elderlies referred to private clinics / hospitals for treatment
- Number of elderlies referred to other organizations for different services
- Number of elderlies who were referred to the higher health facilities

Social security entitlements and schemes:



Shahari Gareeb Yojana is a Pune Municipal Corporation health scheme to cover the annual medical expenses up to Rs. 2 Lakh in a year. 457 elderlies have received the cards through the program, out of which 406 were sponsored by SCHOOL.

In Mumbai Senior Citizen Card Scheme has been introduced and support is being provided by an organization called YUVA. 37 elderlies received senior citizen card with their support.

35 elderlies started with pension (Gwalior-26, Bhopal-9) under government schemes and 44 elderlies (Gwalior-22, Bhopal-22) received support to get Ayushman (health insurance) card.

Research Studies

Quality of Life (QOL) Study

Quality of life (QOL) is one of the most studied aspects regarding the older people. It implies, better the quality of life, greater the chances of a longer, healthier life with reduced risks of diseases and disabilities. WHO defines quality of life as “the individuals’ perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns.” This definition includes six domains: physical health, psychological state, levels of independence, social relationships, environmental features, and spiritual concerns (WHO- QOL Group 1995).

This research study aims to measure the improvement in the quality of life for the vulnerable older people through: engagement with older people and their communities; utilisation of tested tools and scales devised by WHO and other stakeholders that focus on quality of life theme; and the data captured in the Saving Life Checklist as the baseline figures.

In doing so, it intends to test the proof of concept that personalized "Individual Care Plans" (ICPs) based on the "Saving Life Checklist" (SLC) which is aligned with the six domains of QoL, improve Quality of Life for older people residing in vulnerable conditions.

Recognitions and Awards:

1. **SCHOOL-Healthy Ageing was awarded Covid Social Champion by CSR Health Impact Awards on 15th July 2021.**
2. On 6th January, 2021, we participated in the launch of the report of 'Longitudinal Ageing Study in India (LASI)'. This report is released by Dr. Harshvardhan, the Union Minister of Health & Family Welfare (MoHFW), focused on addressing the need for Comprehensive Geriatric Care Assessment & Delivery through various National Health Programmes. We compiled the processes of this launch and captured a number of suggestions from the academia, researchers and various other stakeholders.
3. **In recognition of our work which is dedicated to improving the lives of the elderlies at the bottom of the pyramid, we were invited by WHO India on 28th September 2021, as an expert and panellist for the discussion on "Health of Women Beyond Reproductive Age" amplifying and addressing the life-course approach for the health of women in India.**
4. **Visit by Mr. Azim Premji Sir:** And the greatest moment of the year was when Padma Vibhushan, Honourable Mr. Azim Premji Sir visited us on 30th October 2021 in our Pune Project. Mr. Vikram Kumar Sir, the Municipal Commissioner of Pune Municipal Corporation also graced the occasion with his presence. Mr. Premji appreciated our non-institutional approach of providing love, care and support to the vulnerable older people within their own homes.



Other programs

Health System Strengthening



WHO-FIC Project

About the Project:

- The project assessed the implementation status of World Health Organization (WHO) Standards for the Family of International Classification (WHO-FIC) of Mortality, Morbidity, Functionality, Disability, and Clinical Intervention in India.
- The usage of the WHO-FIC is to enable coding of health data which would allow for advanced epidemiological analysis of country's health data leveraging its usage in health policy and planning for the country.
- The project was awarded to SCHOOL by WHO India Country Office with the duration being January 2021 to June 2022.
- The assessment carried out in two selected districts - Faridabad in the state of Haryana and Raipur in the state of Chhattisgarh was also supported by Central Bureau of Health Intelligence (CBHI), (collaborating Centre from India to support the implementation of WHO-FIC).



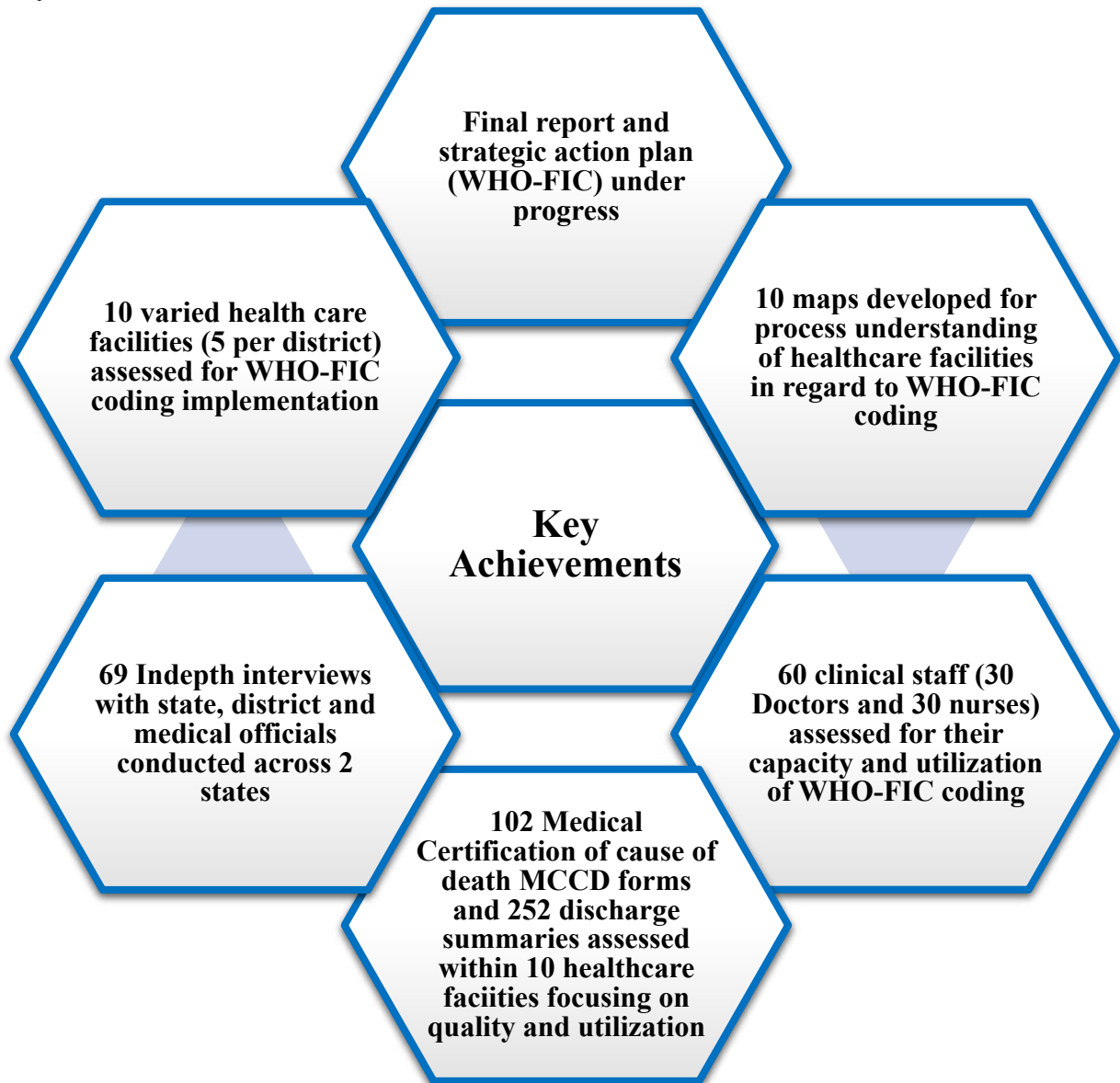
Activities undertaken:

Assessment of deaths, disease prevalence functionality, disability, and interventions as per WHO-FIC were done at all levels of health care ranging from medical college to Primary Health Centres (PHC) in the states of Haryana and Chhattisgarh.

In depth interviews with health personnel across Haryana and Chhattisgarh

Developed maps to understand the processes for the healthcare facilities assessed to map the process of data generation, collation, WHO-FIC coding, and reporting

Key Achievements



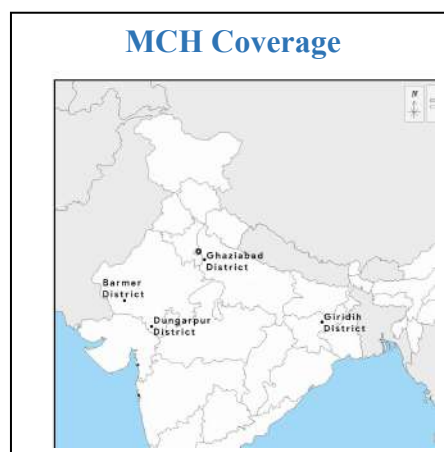
PRI engagement



UNICEF-Jharkhand Project

About the Project:

The project is about community mobilization intervention to promote covid appropriate behaviour and sustain engagement of Panchayati Raj Institution (PRI) and Urban Local Body (ULB) to enhance routine immunization services. The project was implemented in 3 tribal blocks Pirtand, Tisri, and Dumri and urban slums of Giridih district, Jharkhand and is awarded by UNICEF Jharkhand 9office and project duration is 15th April 2021 to 31st December 2022.

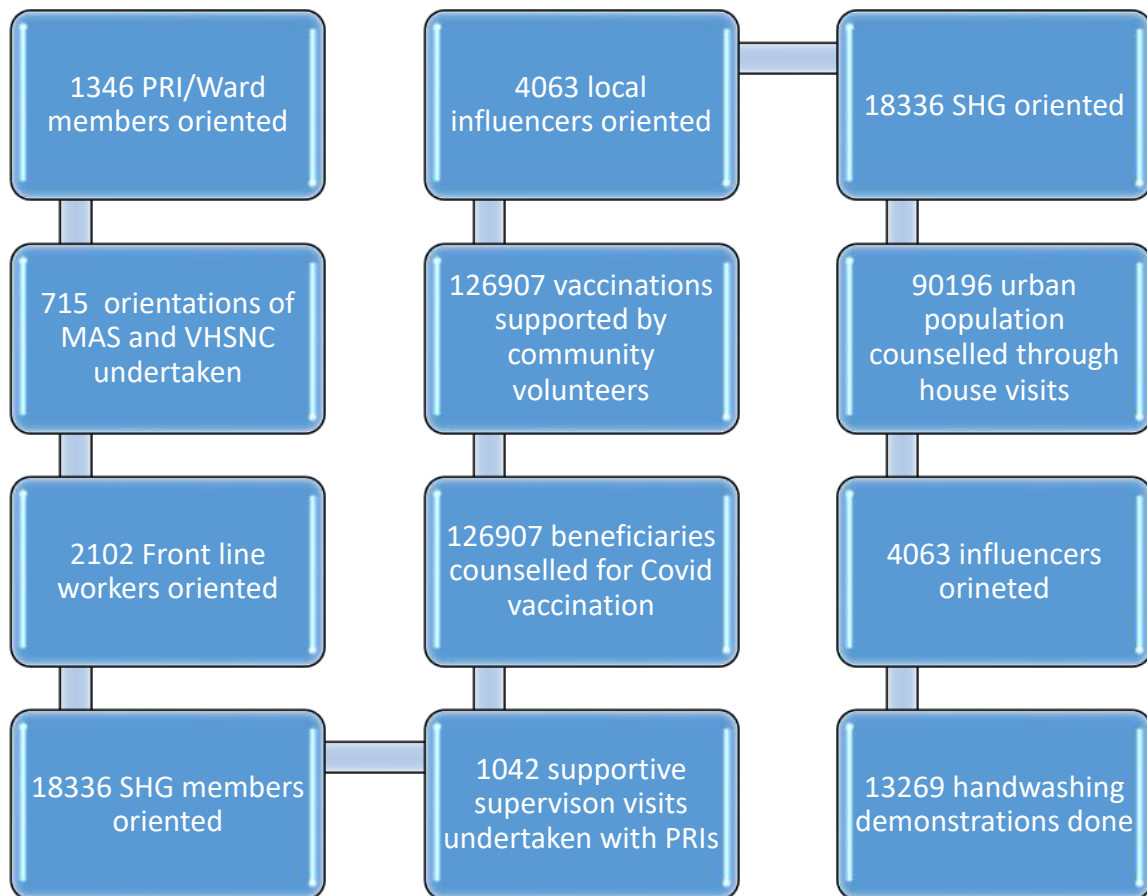


About Project Activities:

1. **Training and engaging Panchayati Raj Institute (PRI)/ Ward members** during Village and Urban Health Sanitation Nutrition Day (VHSND and UHSND) to increase percentage of COVID vaccination and Routine Immunization (RI) in the area, to motivate people to participate in COVID vaccination and RI sessions and to support in logistics.
2. **Training of Self-Help Group (SHG) members, Mahila Arogya Samiti (MAS) members, VHSNC/UHSNC members** in COVID vaccination and RI session and community mobilization
3. **Supportive supervisions** undertaken to facilitate ANM, AWW, ASHA workers in improving COVID vaccination and RI sessions
4. **House visits for community mobilization** in COVID vaccination, CAB (Covid appropriate behavior) and RI
5. **Orientation of Government officials** in COVID vaccination, RI sessions and CAB
6. **Handwashing demonstrations** undertaken to promote sanitation and hygiene

Key Achievements:

Trainings and orientation of the following were undertaken to orient the following on COVID vaccination, RI services, CAB, and their role in strengthening health services



SCHOOL team orienting PRI members across villages of Dumri block, Tisri and Pirtand blocks

Quality Improvement

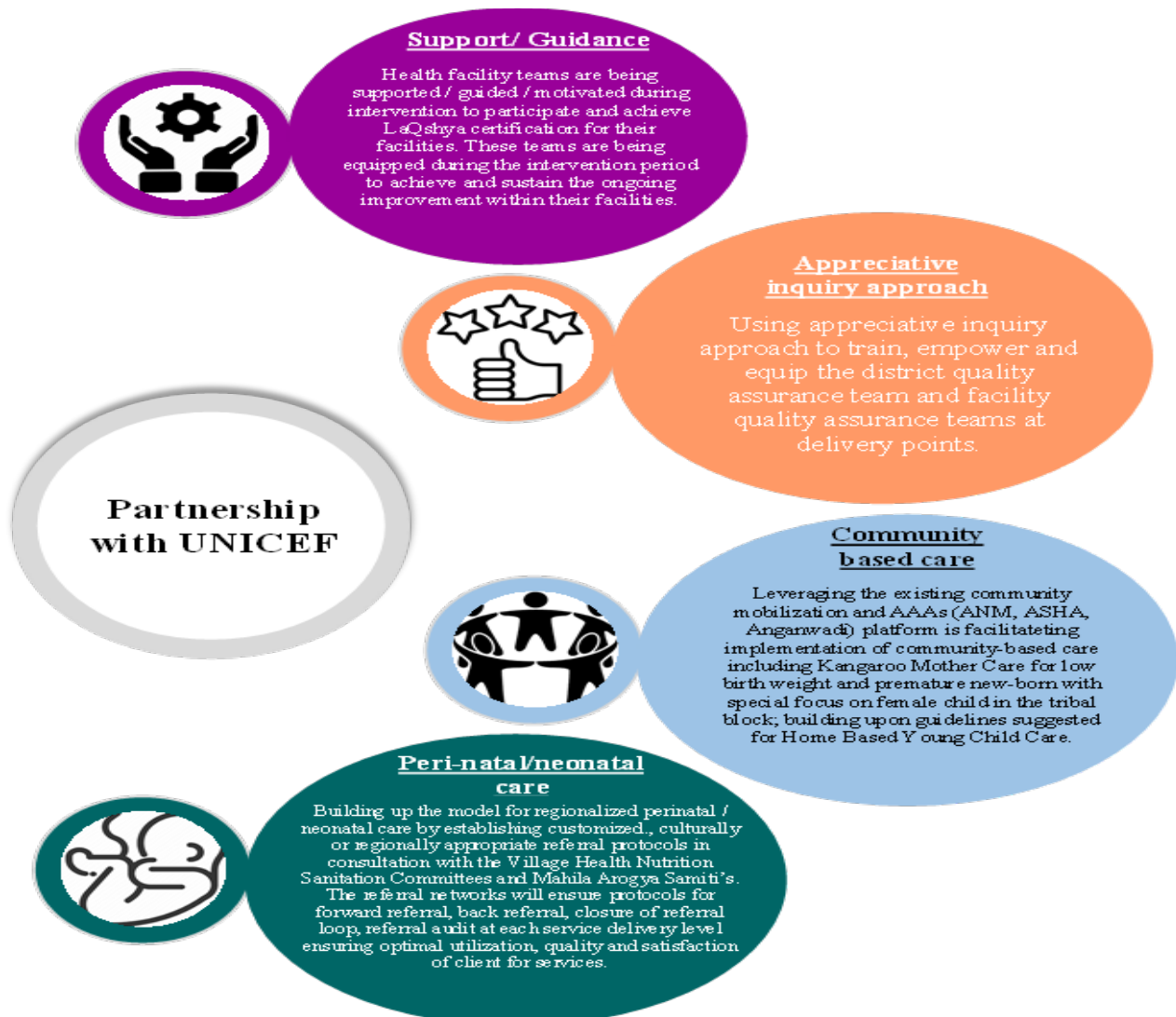


UNICEF-Rajasthan Project

About the Project:

The project is about strengthening maternal and newborn care services at facility and community level by using quality of care approach and is being implemented in Dungarpur and Barmer District of Rajasthan, India. It was **awarded by United Nations Children's Fund (UNICEF) Rajasthan Office** with the duration being 19th July 2021 to 18th April 2022.

About Project Activities:





Key Achievements:

Health facilities at Barmer and Dungarpur districts have been LaQshya Certified
115 mentoring visits done to health facilities for LaQshya Certification
268 Facility staff members of Barmer and Dungarpur districts were trained on National Quality Assurance Standards (NQAS), LaQshya Quality parameters, and appreciative inquiry, latest labour room protocols, quality improvement processes and respectful maternity care (RMC).
157 Front Line Workers (FLWs) have been trained on HBYC, KMC, and referral mechanisms

Urban Health



UNICEF-Uttar Pradesh Project

About the Project:

The project is about to Study urban infrastructure platforms for delivery of nutrition services with focus on Severe Acute malnutrition and demonstrate a doable model in Ghaziabad city. The project was awarded to SCHOOL by UNICEF-Uttar Pradesh Office, Nutrition Division in September 2021. The project duration was September 2021 to April 2022. It was implemented in 2 urban wards of Ghaziabad city.

About Project Activities:



Understanding existing urban nutrition system from the government end, and the challenges that exists related to screening/ identification and management of malnourished children, community and social challenges within the urban slum population that hinder service delivery and adherence to treatment protocols

Identification of possible strategy and methods by which local community level members, external partners (Civil Society Organizations - CSO/ Non-governmental Organizations - NGO) and other related members can be engaged to strengthen urban nutrition.

Key Achievements:

1. **Completed and shared report with UNICEF on current health and nutrition system** existing within a typical urban area, especially Ghaziabad city.
2. **Mapped all key external stakeholders** like NGO, CSO, private providers that can support urban nutrition strategy within the city
3. **Developed a Strategic Action Plan (SAP) document (model) for how Urban Nutrition can be strengthened in a typical urban city**
4. **Implemented the SAP in two urban wards of Ghaziabad for pilot testing and learning.**
 - i. Trained all Anganwadi Workers-AWW (31 total) within the 2 wards
 - ii. 23 Anganwadi Centres (AWCs), 2 Urban Primary Health Centres (UPHCs), 1 Child home and 1 external stakeholder were provided essential equipment for measuring weight of child and adult, infantometer, and stadiometer to help

- identification of malnourished children (weight per age; or length/height per weight)
- iii. Line listing of all children under the catchment areas of 34 AWCs, within the two intervention wards were done.
 - iv. A total of 4089 children have been screened. Out of this, 2548 children were below 6 years of age.
 - v. Out of the total children screened, as per weight for height for under-5 children, 39 have been identified as Severe Acute Malnourished (SAM) and 104 as Moderate Acute Malnourished (MAM).
 - vi. Out of the total children screened, as per weight for age for under-5 children, 48 children were identified as Severe Under Weight (SUW) and 123 as Moderate Under Weight (MUW).
 - vii. For the 39 children identified with SAM
 1. 24 have been provided appropriate treatment
 2. 5 children were referred to Nutrition Rehabilitation Centre (NRC)

Developing an Urban Health Equity Framework

The project is about developing an Urban Health Equity Framework for action on urban health equity and indicators appropriate for India and **was awarded to SCHOOL by WHO India Office** and implemented between August to November 2021.

The Urban Health Equity Framework for action on urban health equity and indicators appropriate for India was developed through:

Conducting desk reviews of existing reports and work; and city stakeholder analysis and shared with WHO India.

Prepared compendium/scoping report of existing healthy city network(s) and their current functions to promote health and address inequities.

Prepared and shared protocol and terms of reference to build Healthy City Network based on reports, findings and interactions with stakeholders

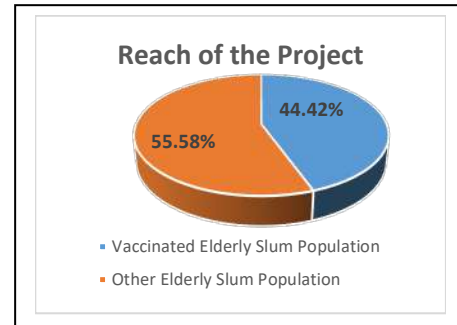
Humanitarian response during the pandemic

COVID-19 Vaccination in Pune

A special project to ensure vaccination of elderlies starting from Sept 21 to March 22, was implemented in the slum communities of 14 wards of Pune city. Total number of elderlies that were reached at their homes were 45312, and 55,458 vaccine doses (1st, 2nd or pre-caution) were administered to the elderlies, which included bedridden,



immobile and hesitant elderlies as well.



- This focused on identifying elderlies who have not got vaccinated and addressing their hesitancy for getting vaccinated.
- 1540 elderlies were counselled and convinced about vaccination, registered in the portal and escorted to vaccination centres.
- Regular vaccination camps nearer to the homes of elderlies were organized. Efforts for organizing vaccination campaigns in the slums in collaboration with PMC.
- A thought through strategy to visit every elderly at their home, speaking to them as friends, making them understand the importance of vaccination and if needed, organizing the same through a mobile vaccine team at their homes, worked very well. Vaccination teams of local governments and teams from 'Vaccine on Wheels' ensured that the bedridden, fragile and immobile elderlies are vaccinated at home with complete ease and without any anxiety and fears. This mantra has brought us to a reality that more and more elderlies can get vaccinated and their fears can be ended.
- Four families that had COVID related deaths in Pune city, a financial aid of INR 30,000 was provided to each family. The fund was provided by Give India Foundation.

Distribution of Raw Ration Kits

The COVID-19 pandemic has had huge effects on the daily lives of most individuals in the first half of 2020.

Widespread lockdown and preventative measures have isolated individuals, affected the world economy, and limited access to physical and mental healthcare. While these measures may be necessary to minimize the spread of the virus, the negative physical, psychological, and social effects are evident. In countries like India, older people are facing the most threats and challenges at this time.

Although all age groups are at risk of contracting COVID-19.



- People living in slums faced severe economic consequences and many of them faced problems in arranging daily meals.
- 4,400 raw ration kits were extended to elderly (more than 60 years of age) slum dwellers of Pune, Bhopal, Gwalior and Giridih in Jharkhand
- 30 elderlies were provided end-to-end support in flood affected areas of Gwalior city. The support included ration kits, cooked food, blankets, medicines and clothes, along with overall rehabilitation in nearest government schools.

Our collaborations

SCHOOL partners and collaborates with:

1. World Health Organisation
2. UNICEF
3. Ministry of Health & Family Welfare, Government of India
4. Ministry of Social Justice & Empowerment, Government of India
5. Government of Madhya Pradesh
6. Government of Maharashtra
7. Smart Cities Mission, Government of India
8. Bhopal Municipal Corporation
9. Pune Municipal Corporation
10. Municipal Corporation of Greater Mumbai
11. World Health Organization
12. Azim Premji Foundation
13. SBI Capital Market Ltd
14. Yardi Software
15. Sevadham Trust
16. Vanchit Vikas
17. Deep Griha Society
18. Pariwartan Trust
19. Prayas
20. Matruseva Hospital
21. Cipla Foundation
22. Bapu Trust
23. H.V. Desai Hospital
24. ASHA
25. Prashanti Cancer Care Clinic
26. Swadhar
27. Salaam Pune

Our Board Leadership



Dr. Benazir Patil, PhD CEO

With specific expertise in policy advocacy and health systems strengthening Dr. Patil has been working in the field of social development for more than 26 years and has led several large-scale projects. She has worked with the World Bank, the EU, the British High Commission (DFID), the UN agencies and various national and international development partners. As a researcher, Dr. Patil has been a Principal Investigator for a number of research studies in India, Nepal, Bangladesh & the UAE, specifically in the domain of RMNCAH, Neglected Tropical Diseases, and Non-Communicable Diseases. Dr. Patil has authored various national and international reports, policy documents, articles and publications with Government of India and international organizations specifically on Health Systems, RMNCAH and Urban Health, with national and international journals like ‘Journal of Perinatology’, ‘Indian Journal of Medical Ethics’ and ‘Indian Pediatrics’. She has authored two academic books: 1. Communication Strategies in Reproductive Health; and 2. Body image, human reproduction and birth control – a tribal perspective.

Dr. Pawan Pathak, MD Director: Program

As technical health specialist Dr. Pathak has contributed to large scale, multi-country, global health programs like MCHIP and MCSP and global health platforms like ‘Call to Action’ for ending preventable maternal and child death and ‘Partnership for Maternal Newborn and Child Health’. He is well versed in addressing implementation level challenges both at the community and facility levels so as to ensure effective program outcomes. With more than 16 years of work experience, he brings in a skill-mix of teaching, training and mentoring on health systems, service provision, and thematic subjects.

Dr. Pramod Gautam, MD Director: Operations

A healthcare specialist with more than 20 years of experience, Dr. Gautam has a strong acumen of attaining balance between Public Health programs and the value addition private health care brings in. Having played an instrumental role in developing & designing implementation of large-scale public health programs from local to national level, he is a strategist at heart and hence provides strategic advice and support in orienting, mentoring and capacitating public health professionals, health systems staff, service providers and field support staff. He brings in core expertise for key thematic areas of RMNCH+A, HIV and NCDs.

Dr. Rahul Singh Bhadouria, MD**Director – Policy & Planning**

A public health specialist with 18 years of techno-managerial experience, Dr. Bhadouria brings in expertise for implementing multi-sectoral programs right from grass root level. He has worked with WHO, UNICEF and many other national and international development organizations. He has contributed to many health care innovations in the country including that of Special Newborn Care Units; Model Maternity Wings; Integrated Paediatric Units; FRU operationalization; and Nutritional Rehabilitation Centres. His technical skill-set pertain to MNCH, Nutrition and HIV/AIDS.

Mr. Sanjeev Goyal**Director Legal Compliance**

Mr. Goyal is a legal expert and graduate in Law, he is leading the business of infrastructure development across India. Mr. Goyal is leading the portfolio of Legal aspects and Compliances.

Our compliances

Registered in the year 2007 under Section 8 of Companies Act (erstwhile section 25)

Registered number: U85100MP2007NPL019346

As a not-for-profit organization, we abide by all the compliances:

- We have certifications 12-A, 80-G and as per the latest guidelines
- We are also registered for undertaking CSR activities (Registration number: CSR00001624)
- Registered with NGO Darpan
- Audited statements and annual reports of last three years