Annual Report
2016-17

Tathapi Trust
Our Vision

Tathapi will be known as a small group with a large impact, relevantly engaged at the grassroots level throughout Maharashtra. Communication from us will be seen as giving voice to the people’s perceptions, concerns and needs. Tathapi’s resource centre will be a place that local workers from all over the state call their own.

Our Mission

Tathapi promotes innovative women and health training and advocacy initiatives for community health and development in Maharashtra through special emphasis on women’s empowerment and substantive equality for all.

Our values

- Women’s democratic rights encompass all matters of choice in their life.
- People have a right to health and health care.
- People have a right to conserve and develop their health traditions.
- Justice demands affirmative action for disadvantaged communities.
- Continuous growth in our capacity for effective social interventions.
Introduction

As the year 2016-17 came to an end two of our most significant initiatives also found their logical conclusion. Interventions in the project ‘Sanjeevani: Health Worker Training Program’ got closed in its seventh year. This withdrawal saw that establishing a woman centric community health service can be a possibility. We could create and establish a space for women regarding their concerns on health and well being. A space which is rational, sensitive and inclusive. A gender sensitive women’s health training module was developed and disseminated which is being referred now by many organisations across the state. Tathapi’s another initiative to create a model day care center for children of urban poor also came to end this year. We tried to build a secular, safe, learning space for children that respect local wisdoms and diverse cultures. The efforts to sustain the centers without outside support could not be achieved, but a need and efficacy of such a safe space for kids was underlined. It also worked as a support structure that provides greater independence and freedom to women.

This year most of our time and collective energies were concentrated on the work around sexuality. The website letstalksexuality.com has been receiving an overwhelming response from the users. Another front i.e. content creation along with direct dialogue on the campus has created a greater and meaningful involvement on the part of the youth. We could create a pool of resources (text and audio-visual) which is being used by many individuals and organisations. Maharashtra Foundation from USA, a well known group of people from Maharashtra living abroad agreed to support this work in the year 2017.

Our work on ‘disability and sexuality’ has also gained a good momentum this year. We could reach out to hundreds of parents and care takers of children with intellectual disability through the dialogue sessions organised across the state. Our Support Group, ‘Sweekar’ for parents have become an abode for many parents where they can share their concerns and learn from each other.

The project TARA in Maval block is keeping our touch to the direct field alive. It is a lesson from this activity that no matter what, we need to have a direct dialogue with people we want to work with. Then and there only we can assess the significance and relevance of the work we think we do.
1. Sanjeevani: Health Worker Training Program

The ‘Sanjeevani: Health Worker Training Program’ project supported by AEI Luxembourg through TDH Germany came to an end this year. It was started in 2010 with the larger objective to improve the health status of women and children. While withdrawing from the villages we are leaving behind a trained, sensible and equipped woman health worker who is going to remain with the people, and so her skills and knowledge, as she belongs to the locale.

Through the efforts taken especially during the last year activities, we have ensured that the work done will sustain though in its restricted scope and there will be a constant process of change facilitated by the Sanjeevani and the organization in the villages we were working.

The project was being implemented in 64 villages across 3 states of India (Maharashtra, Madhya Pradesh and Chhattisgarh). The activities such as installation of Sanjeevani Swasthya Sanvad Kendra (SSS Kendra), forming and strengthening of Village Health committees (mandatory for the health department under National Rural Health Mission), Livelihood support for the health workers were planned and executed to make sure that Snajeevani remains in the community and remains active and motivated. Sanjeevani, the Community Health Worker, being the back bone of the project has volunteered and strived hard, for seven long years, in this process of creating a women centric space in her village. Tathapi has documented this struggle in the form of a research paper ‘Understanding the empowerment of health workers-experiences from ‘Sanjeevani project’.

Outcomes of the project

1. **Women centric interventions** - Through the SSS Kendra and crèches, women and children are getting primary health care services locally and do not have to travel far for health related issues. The women groups (SHGs) formed during these seven years actively attend meetings in which they discuss various government entitlements, schemes. In turn these women have become change agents and spread awareness in the village.
2. **Making the Government health services accountable and efficient** - The project staff has been able to build an excellent rapport with the government health institutions. The doctors also provide support in taking the cause ahead. All the project partners have made continuous efforts in liasoning with the government departments. Sanjeevanis also have tried to build a positive association with the village level health workers like Anganwadi worker, ASHA, MPWs, VHSNC members etc. These will ensure the sustainability of the Sanjeevanis in the villages. This constant exchange creates a check and pressure on the functioning of the services in favour of the people.

3. **Community involvement** - The interventions kept the discourse on community health alive on the village level. Inclusion of Grampanchayat, elected representatives and the people at large in the activities planned ensured that the concerns around health remain on the agenda. In most of the villages the Sanjeevanis had been included in the VHSN committees. These committees monitor functioning of local health services and are a part of Community based monitoring (CBM) process under the National Rural Health Mission. They raise various health issues at village level and collectively solve it. We could form and reactivate these committees. This is a great move as this will also help the Sanjeevanis to work more closely with the people.

The experiment of running creches in the villages was a success particularly in dealing with the malnutrition in children below 6 years. A paper ‘Effect of a community based supplementary nutrition intervention on reducing child undernutrition: A case study in select rural areas of central India’ documenting the success and challenges has been prepared and will be published.

When we look back we can see that the health workers have contributed remarkably in improving the health status of women, children and overall population in the respective villages. At the end of this seventh year of the initiative we can say that we could:

- Create and establish a woman centric space for the concerns regarding health and well being. A space which is rational, sensitive and inclusive.
Develop a gender sensitive women’s health training programme
Make the government health system more pro-people and accountable through the discussion and dialogue on health rights among people in the community.

**About the study papers**

1. **Understanding the empowerment of health workers- experiences from ‘Sanjeevani’ project**

   This research aimed at understanding the empowerment of Sanjeevanis. Throughout the project, there were several instances where it was seen that the Sanjeevanis were challenging the dominant power structures at the family level as well as at the community level. In a way, these Sanjeevanis were trying to subvert the patriarchy in their own spheres. Thus, this study was planned to explore the processes of empowerment of the Sanjeevanis.

2. **Effect of a community based supplementary nutrition intervention on reducing child undernutrition: A case study in select rural areas of central India**

   The objectives of this study included measuring the extent of success of crèches in the intervention area, studying the role played by Sanjeevanis and parents in improving the nutritional intake of children and comparing the anthropometric indicators of children from intervention areas to that of control areas.

   A video documentation was done to showcase the work done in the project especially to elaborate on the experiments of day care centers and the community involvement.

   [https://www.youtube.com/watch?v=JoLEkBFj3Y](https://www.youtube.com/watch?v=JoLEkBFj3Y)
2. I Soch – Let’s Talk Sexuality for a safer city

Tathapi initiated a project, ‘I SOCH: Let’s Talk Sexuality’ in March 2014, to create a positive and affirmative environment around sexuality based on rights and responsibilities, equality and diversity. ‘I Soch’ has been involved in a positive dialogue around sexuality with youth and college administration from 25 colleges in and around Pune. Innovative content in different forms, website and social media are also used to generate dialogue and discussion around sexuality.

In this year our main focus was:

1 Website

The website, letstalksexuality.com was initiated in July 2015 as a part of this project to provide a space for positive dialogue around sexuality. It has been receiving overwhelming response since then. This year’s website centric activities have helped us to increase the reach of the website to maximum users.

Salient features of the website:

- This first ever Marathi website which talks about sexuality, provides space for interactions through Q & A section and maintains complete anonymity of the users.
- Crossed 5 lacs + hits in this year.
- Have 65% male users while 35 % are females and majority of them (78%) are from the age group of 18 to 35 years.
- Around 900 questions have answered so far. About 3-4 questions every day.
- The opinion poll, one of the interactive platforms, has voters ranging from 172 to 498 voters.
- Website has worldwide visitors. 45,953 from United States while 13,142 from United Arab Emirates.
- A vast majority (83%) of audience access website through MOBILE PHONES.
- Q&A ‘Sex Bole To’ and FAQs are the most popular sections on website and have maximum viewers.
2 **Content creation and dissemination**
The content we create which is not only entertaining and youth friendly but also gives appropriate messages. The content was created based on issues those have emerged during interactions with college youth as well and through website. We have used various forms like booklet, videos (08), articles, posters etc and disseminated using website and social networking platforms.

*(Please check Facebook: isochpune, Youtube: Tathapi Trust, Website: letstalksexuality.com)*

3 **Resource on Sexual Harassment at workplace**
A kit of resources on the issue of Sexual Harassment at Workplace including a booklet, a video and two posters was created and disseminated mainly in the colleges we were working with in Pune. The booklet and the video are a complete guide, in easy and simple language, of the act ‘The Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013’. We distributed 450 booklets (including 50 CDs and posters) across the state in last one year. This is one of the much acclaimed resources we have created during this project.

The booklet was adopted by State Women’s Commission and they circulated thousands of copies amongst the educational institutions across the state.

Clip with English subtitles:  [https://www.youtube.com/watch?v=_EakdMX5XyU](https://www.youtube.com/watch?v=_EakdMX5XyU)

4 **Activities on college campuses**
We reached out to more than 2500 students for 16 colleges through sessions & campaigns on issues like, how to Say No, Gender equality, Violence against women and women’s health. Many meetings and awareness programs were also conducted with representatives of ICC (Internal Complaint Redressal Committee) committee in all selected colleges to understand the status of committees. We also helped them to strengthen these committees for effective functioning.
Let’s Soch- Ek Naya Nazaria

The concluding event, ‘Let’s Soch- Ek Naya Nazaria’ was organized on Saturday, February 11, 2017 to celebrate the success of the I Soch with youth, organizations and the people who have contributed to this endeavor. Around 300 people including professors, website contributors, representatives of organizations in Pune and youth from colleges attended this program. Volunteers were actively participated in planning and execution of this program.

Panel Discussion, Interactions, session and street play on issues like, Mass Molestation, Body Stereotypes, Beauty Stereotypes, Myths and Superstitions around Sex & Sexuality was organized. Expert panelists, young & renowned artists Sakhi Gokhale & Suvrat Joshi, activist in the field of sexuality and gender Bindumadhav Khire and Gunjana Sharma were present for the program.

This was a much appreciated & successful event, and received good media coverage. Five local Marathi news papers namely, Lokasatta, Lokmat, Pudhari, Maharashtra Times & Sakal covered this event.
Maharashtra Foundation form USA decided to support the website from January 2017 onwards. The main focus of this association is on building a strong infrastructure for the portal. Another objective is to promote the website among rural youth more with an effective use of social media platforms. One to one sessions will be conducted across the state with the youth for a meaningful engagement using the portal and social media platforms such as Facebook, Youtube and Whatsapp etc.

**Plan for the next year**
- Interactions with rural youth and promotion of letstalksexuality.com website in rural Maharashtra
- Content creation in innovative forms like, illustrations, videos, Podcasts and dissemination
- Social media campaigns to encourage a positive dialogue around sexuality and website promotion
- A campaign against sexual harassment at workplace in educational institutes, non profits and corporate.
3. Project TARA

Tathapi initiated a project Tara to improve the status of women and adolescent girls through increased awareness of gender, increased access to health and civic entitlements. We have selected 10 villages at Maval block in Pune district and have successfully reached hundreds of women and adolescents in these selected villages through creating a network of Tara health activists (including ASHA, Anganwadi Tai) and through school interactions.

A. Women and Health

A team of 22 women leaders in these 10 villages is actively helping local women in identifying chronic health ailments especially issues regarding reproductive health and encouraging them to visit government health facilities for better care. This team is trained on the topics such as right to health, access to government health services, body literacy, gender equality, violence, legal provisions from women, mental health, care during pregnancy, safe childbirth, importance of using contraception, safe abortion, vaccination, etc. It is visible now that Tara health activists have successfully engaged in the issue of women’s health as they are being referred as a health activist in their area.

One of main strategy to get connected with the local women is to organise an internal health checkup camp for women. The villages are located at around 50 kms from any health center available in the area. Women from economically poor families can not visit health centers and depends upon solely upon quacks. This activity helps them not just in identifying their ailments by a female gynecologist but we give medicines and refer them to the rational health service also in case of urgency. As a result we could build a strong network of our health leaders as well as an effective bonding with the women in the area.

Continuous trainings have helped in building the women leader’s confidence tremendously. Now they are raising local level issues in the villages such as violence against women. Some of them are so sharp that they are in leading positions in the campaigns to create awareness in their area.
B. Gender Equality

We are also working with four schools in the area to spread awareness on Body Literacy among adolescents. Some of the highlights of this endeavor are as below:

- The dialogue has helped children and especially girls to build confidence and they are more aware on health, body changes while growing up, gender biases in the society.
- Children are more vocal in expressing their emotions, thoughts. They have become bold enough to ask questions and find answers on their own.
- They are confident in sharing their concerns and aspirations. The students do share that girls, boys are equal and have equal rights, and they deserve equal treatment in and out of the family.
- The program has brought a comfort and ease among the students, which was not there before, while discussing subjects such as being in love, friendship, equality and attraction.
- We also have initiated dialogue with parents about the need of body literacy program and the importance of communication with their children.
4. Body Literacy for Special Needs

Since March 2013 Tathapi Trust has focused on developing resources on body literacy and sexuality education for special needs. This initiative is being conducted with the support of Smt. Vimalabai (Jiji) Jatar Fellowship program. Currently we are working to develop resources and conduct training programs for parents and teachers of intellectually disabled children.

The book ‘Sharir Sakshtra Sarvansathi (Body Literacy for All)’, a resource developed by Tathapi aiming to reach out to the parents and caretakers of intellectually disabled children has reached up to 250 parents/teachers/ organizations/ schools /individuals and government sectors across the state so far.

The State Level Meeting on ‘Disability and Sexuality’, organized by Tathapi Trust in Pune in Feb. 2016, helped us to decide our direction of work. We started to conduct training programs on ‘Intellectual Disability and Sexuality’ with teachers, parents and caregivers. Body literacy, introduction of Sexuality, love and attraction, physical and emotional changes at puberty stage, issues related to menstruation, issues related to marriage, affirmative ways of sexual expressions, sexual abuse and safety, etc. are some of the topics we have tried to cover in the module. This year, we conducted 5 training programs with Keshav Seva Sadhana School for the Special children, Bicholim (Goa), Prerna Gram Vikas Sanstha, Ralegoan, (Yawatmal), Navjeevan Society for Mentally Retarded, (Aurangabad), Jivhala Society for the Mentally Handicapped, (Solapur), Jeevdan School for the Intellectually Disabled Children, Zarap, Tal. Savantwadi, (Sindhudurg). Throughout these training programs we reached up to 200 parents, teachers, and counselors/caregivers.
Outcomes of the Training Program -
1. We could reach 165 teachers, parents and social workers through trainings only within a short period of six months.
2. The training is successfully creating healthy and scientific approach regarding sexuality among the parents, teachers, caregivers and other workers.
3. This training is a space for everyone to share and find their own solutions on the issues such as marriage, sexual abuse, fulfillment of sexual needs, health concerns of these children.

Some Observations
There is a possibility that a trained, active team will emerge from the current trainees who might be participating in future interventions in their local area. A small but effective network of sensible and sensitive trainers in this area of work can be an important contribution by Tathapi.

There is an intense need to develop more resources on intellectual disability and sexuality and that is our learning from all these trainings. Our future work will also go in this direction where a good pool of resources for the adolescents as well as for the care givers will be made available.

A video resource for the parents and teachers
We developed a set of video clips where a single female parent of a special child, Sunita Kulkarni from Pune and an educationist by profession shares her experiences and opinions on disability and sexuality. She shares about how she addressed her son’s sexual expressions and needs. How she teach him the meaning and importance of privacy and being safe. She also shares her thoughts things such as masturbation, companionship and marriage etc. in these clips.

Support group for the Parents of intellectually disabled children
A ‘support group’ named ‘Sweekar’ has been formed for the parents of disabled children form Pune city and around. The support group is helping the parents in finding space and peers with similar concerns and trying to learn from each other’s experiences. This year we conducted 5 sessions on various topics related to intellectual disability and sexuality. Along with parents, a couple of psychologists and many professionals working in the area of disability are also connected with Sweekar support group.
Other Activities

Kamayani School and Workshop for the Mentally Challenged, Gokhlenagar, Pune invited us to deliver a speech / lecture on ‘Intellectual Disability and Body Literacy’ for the parents and teachers on the occasion of ‘International day of persons with disabilities.’

Kamayani Teacher’s Training College Gokhlenagar, Pune also invited us to conduct a session on ‘sexuality education for special children – ways and approaches’ for the special educators.
5. Zilmil Crèches for Nutrition and Early Education

With the support of Volkswagen Worker’s Council through TdH Germany, Tathapi Trust implemented the project ‘Early childhood care and education of migrant children’ in Pune city’s Pimpri Chinchwad area. It was a pilot program and came to an end in December 2016. Tathapi run Zilmil crèches were a model to demonstrate the highest possible standards in child health, nutrition, early education, overall development and child care. We tried to build a secular, safe, learning space for children that respect local wisdoms and diverse cultures. It also worked as a support structure that facilitates a change in KAPS (related to child care) that provides greater independence and freedom to women.

In last 4 years we could reach out to 1250 children below 12. We ran 6 day care centers in three different locations in Pimpadi Chinchwad Municipal Corporation. These centers would run for 6 days a week and would be in operation for 10 hours a day (8 am to 6 pm). A well planned, nutritious menu, clean, healthy surrounding and active, child friendly environment in the centers was the reason behind the positively changed scenario in our area. Whether it is about the improved grades of malnourished children, improved health status of chronically ill kids or about their overall psycho social development we had observed that such a space is very crucial in the life of children and their families in poor localities. We collaborated with a renowned organisation named Center for Learning Resources (CLR) and developed a curriculum and a plan for day to day educational activities to implement in the centers. It proved to be an impact initiative and we saw a qualitative improvement regarding developmental milestones such as motor, sensory, and communication skills.

**Achievement of the pilot**

1. Successfully established a safe space for children with highest possible standards in child health, nutrition, early education, overall development and child care including safety from accidents and abuse.
2. It proved to be a crucial support for the families with low income living in the areas where a very few effective child care services are available.
3. The centers proved an important intervention in the interest of women as many of them started working again and found a greater independence in making personal choices.

4. We cared for child rights and tried to build a secular space for children from a diverse background. May it be a normal or special child, from any caste, sub caste or religion or community with what so ever background we welcomed every child.

5. The staff was a backbone of this project. We trained and appointed local women as teachers and attendants and the strategy proved to be very crucial and useful for the success of the centers. Also the skill set they acquired along with changed perspective towards life has brought a life changing transformation in the lives of these women along with stability.

**Sustainability of the pilot and challenges**

It was a supported program. Last year we concentrated our efforts on a experimentation of making this model a self sustained one. We collaborated with All India Democratic Women’s Association, Pune Chapter and designed a program for the women in their contact. It was about imparting skills and knowledge with some financial support to the women to start an independent day care center in their own locality. A seven day training module was implemented with an exposure visit to the existing crèches run by Tathapi. But it could not achieve expected success.

There were many reasons. Families form the vasty are incapable to pay even a nominal fees for the service offered. The concept of a day care center is still distant for a society like us where child care is a prime responsibility of a mother or a woman. It was difficult to find a good enough place to start a center in the slums. The cost for the space was not viable. Sustaining this kind of activity without any income for even a couple of months initially was not possible for the women. It was our observation that this kind of initiative for the economically marginalized section will need to have an outside support, whether it comes form government or a private institution.
A video film to document and showcase the work being done in the project was made and disseminated.
Link on the YouTube for the clip –
https://www.youtube.com/watch?v=hjZFbgwrRIc

Do visit our you tube page for more videos on the project
https://www.youtube.com/results?search_query=tathapi+trust+creches

Tathapi stopped it’s involvement in the project as the objectives of the pilot were achieved. We handed over the centers to an organisation named New Vision, Pune form March 2017 onwards. The centers are in operation and are benefiting the children and the families as well.
Resource center

Following are some of the non project activities Tathapi as a resource center is continuously involved in or initiated in the last year.

A. Process Work sessions
Anandi Self Help Center is an initiative Tathapi has undertaken to promote self help among women. As a part of this initiative Tathapi organised two ‘Process Work sessions’ at AFARM Training center near Pune city. The sessions were designed especially for the professionals and activists working in social and development field.

This is a sharing based format where a non judgmental and ‘Open’ space is created for the participants to share their thoughts and concerns. A space that helps them link theory and practice. We call it वैयक्तिक गतिशिल्ते साठी आत्मचयां सत्र in Marathi. Two sessions were conducted in this year where 15 participants participated including the facilitators. Dr. Ashutosh Bhupatkar from Pune and Ms. Reva Malik from Bengaluru facilitated the sessions.

B. A resource set for UNFPA and Health department of Maharashtra Government
A set of 7 posters and two jingles was prepared under an assignment for UNFPA and Department of Health, GoM. The main focus was on domestic violence and response by the government health services. The message these resources delivers is that there is a need to identify different forms of domestic violence against women and women can seek help from government health services near to them. We also translated a set of two posters prepared by CEHAT, Mumbai for UNFPA on the same issue.

C. ‘Women and health’ module for the staff of Tara Mobile Crèches
We prepared a five days module on ‘women and health’ and conducted trainings for 30 participants, mostly supervisors and group leaders from ‘Tara Mobile Crèches’. This organisation runs ‘onsite day care centers’ for the children of construction labors in and around Pune. In their day to day work they come in regular contact of the mothers of these children. The organization requested us to conduct this training as a perspective and knowledge building exercise for their staff so that they can plan their interventions more sensibly and in an organised manner to help these women.
D. **A poster set (4 posters) on Child Rights** including a leaflet containing a summary of the United Nations Convention on the Rights of the Child, was compiled and designed for Gramin Mahila Vikas Sanstha, an organisation from Marathwada. The organisation is working in the rural area of Latur district in partnership with TdH, Pune.

E. **Trainings on call**

a. Two training sessions on women and health, menstruation, hygiene, and misconceptions around menstruation was conducted for the workers of Disha Foundation at Talegaon. It was a perspective building exercise they had requested us to conduct for their staff and women in the villages they are working with. We also compiled and designed a leaflet on the same topic for them.

b. We conducted a session on ‘PCPNDT Act and Sex selection’ for ICDS supervisors at KEM Hospital.

c. Prajakta, one of our colleagues, was also a part of a team of trainers at MAVA who conducted a training program for the staff of Seva Mandir organisation at Udaipur Rajasthan on Gender, Masculinity and Health. MAVA had requested Tathapi to send a trainer for this training program. She was responsible for the Gender component.

F. **Jivala**

We published two issues (including a joint issue) of Jivala this year. We always receive encouraging remarks from many of us readers. This year we discussed a range of topics including current issues such as women’s struggle to enter inner sanctum of temples in Maharashtra, appreciated the film ‘Sairat’ a milestone film in Marathi entertainment industry and ‘Dangal’ a Hindi film. Our joint issue has a special story to discuss Tathapi’s work in the project ‘Sanjeevani: Health Worker Training Program’. All our partners in three states contributed in this issue and shared their experiences and achievements. We also published an article on PCOS, a health problem in women. We appreciated the work Ms. Chaya Gaikwad is doing in Marathwada in the form of a sanitary napkin producing unit. We covered Maharashtra Mahila Arogya Hakk Parishad at Chiplun, Konkan. One of the participants, Vedika, shared her struggle against domestic violence and social boycott by Jat Panchayat in the edition. As usual, our column ‘Pargaonchya Paravarun’ was also appreciated by the readers. This year Prajakta took the responsibility of Jivala on her shoulders.
## A-Summary  Balance Sheet

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<td><strong>4,283,674.47</strong></td>
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## B-Annual Income and Expenditure

<table>
<thead>
<tr>
<th></th>
<th>15-16</th>
<th>16-17</th>
<th></th>
<th>15-16</th>
<th>16-17</th>
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<tbody>
<tr>
<td><strong>Income</strong></td>
<td></td>
<td></td>
<td><strong>Expenditure</strong></td>
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<tr>
<td>Donations</td>
<td></td>
<td></td>
<td>Grant - FCRA</td>
<td>10,885,004.32</td>
<td>8,969,481.45</td>
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<tr>
<td>Grants(local)</td>
<td>1,600,421.32</td>
<td>693,900.00</td>
<td>contingency Fund</td>
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<td>304,688.00</td>
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<tr>
<td>Grants(FCRA)</td>
<td>10,287,405.73</td>
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<td>Non FC Donation Utilised</td>
<td>247,945.00</td>
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<td>146,369.97</td>
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<td>contingency Fund</td>
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<td></td>
<td>Misc. Expenses</td>
<td>155,057.00</td>
<td>110,098.00</td>
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<td>Donations</td>
<td>461,248.00</td>
<td>301,015.38</td>
<td>Depreciation</td>
<td>2,616.00</td>
<td>1,776.99</td>
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<tr>
<td>Miscellaneous income</td>
<td>175,108.80</td>
<td>363,705.52</td>
<td>FC Fund Utilised</td>
<td>1,122.00</td>
<td>11,677.00</td>
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<tr>
<td>Staff Welfare</td>
<td></td>
<td>343,184.11</td>
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<tr>
<td>Deficit</td>
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<td>Surplus</td>
<td>79,847.00</td>
<td>20,491.65</td>
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<tr>
<td><strong>Total Income</strong></td>
<td><strong>12,670,553.82</strong></td>
<td><strong>10,852,024.09</strong></td>
<td><strong>Total Expenditure</strong></td>
<td><strong>12,670,553.32</strong></td>
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<td>Receipts Non FCRA</td>
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<td>16-17</td>
<td>Payments</td>
<td>15-16</td>
<td>16-17</td>
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<td>-------------</td>
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<tr>
<td>Cash &amp; Bank bal</td>
<td>1,498,335.49</td>
<td>1,989,812.59</td>
<td>Trusts Objects: JRD Tata Trust</td>
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<td>Outstanding Liabilities-SBI</td>
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<td>Grant-Utilised</td>
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<td>109,646.00</td>
<td>157,348.00</td>
<td>Creche</td>
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<td>Donations Publication</td>
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<td>MGMG hono.</td>
<td>90,151.00</td>
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<td>Donations Received</td>
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<td>301,015.38</td>
<td>Anandi</td>
<td>1,140.00</td>
<td>28,715.00</td>
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<td>Tata Power Company Ltd.</td>
<td>237,769.00</td>
<td>957,709.00</td>
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<td>Fixed deposit</td>
<td>632,851.00</td>
<td>1,186,167.00</td>
<td>Capital exp</td>
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<td>Grants: local</td>
<td>480,000.00</td>
<td>693,900.00</td>
<td>TDS Deducted</td>
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<td>Other Sources</td>
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<td>Investment</td>
<td>1,186,167.00</td>
<td>1,680,981.00</td>
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<td>Investment Realised</td>
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<td>Staff Welfare Fund</td>
<td>571,983.32</td>
<td>343,157.11</td>
<td>Miscellaneous income</td>
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<td>Staff Adv. Recovrd</td>
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<td>Donation towards Publication</td>
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<td>Miscellaneous income</td>
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<td>363,705.52</td>
<td>Fund utilised: Staff welfare</td>
<td>514,615.00</td>
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<td>Income on the Object</td>
<td>1,128,286.89</td>
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<td>Fixed Deposit</td>
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<td>Cash &amp; Bank Bal.</td>
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<td>1505527.6</td>
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<td><strong>Total</strong></td>
<td><strong>4,882,350.70</strong></td>
<td><strong>5,035,105.60</strong></td>
<td><strong>Total</strong></td>
<td><strong>4,882,350.70</strong></td>
<td><strong>5,035,105.60</strong></td>
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# C-Receipts & Payments Summary _ FC

<table>
<thead>
<tr>
<th>Receipts,FCRA</th>
<th>Payments</th>
<th>15-16</th>
<th>16-17</th>
<th>15-16</th>
<th>16-17</th>
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</thead>
<tbody>
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<td>Grants Utilisation :Hivos</td>
<td>1,975,410.21</td>
<td>1,287,020.64</td>
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<tr>
<td>TDH-Sanjeevani HW</td>
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<td>4,989,100.00</td>
<td>5,034,414.00</td>
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<td>TDH- Creche</td>
<td>FCRA Renewal Exp.</td>
<td>2,644,026.41</td>
<td>1,348,487.29</td>
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<td>ICRW-MGMS</td>
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<td>NFI-I Soch</td>
<td>Investment</td>
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<td>Maharashtra Foundation</td>
<td>Maharashtra Foundation</td>
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<td>76,103.50</td>
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<td>Other Received</td>
<td>TDH-Sanjeevani HW</td>
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<td>61,864.63</td>
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<td>5,034,414.00</td>
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<tr>
<td>Advance received MGMS</td>
<td>TDH- Creche</td>
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<td>654,795.00</td>
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<td>Donation-Anandi Centre</td>
<td>Child Birth in Laman comm.</td>
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<tr>
<td>Staff Welfare Account</td>
<td>Advance towards Projects</td>
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<td>Population Council</td>
<td>Advance -MGMS</td>
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<td>Interest FD</td>
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<td>Cash &amp; Bank Bal.</td>
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<td>1,287,020.63</td>
<td>933,767.12</td>
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<td><strong>Total</strong></td>
<td></td>
<td><strong>9,931,569.56</strong></td>
<td></td>
<td></td>
<td><strong>9,931,569.56</strong></td>
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</tbody>
</table>
Other Associations

**Maharashtra Mahila Arogya Hakka Parishad**
Every two years a state wide conference is held in different regions of Maharashtra on women and health rights issues. This year the conference was organised in Chiplun town of Konkan region. Tathapi was part of the organising, planning and fund raising team of the Parishad. Our team also participated in the Parishad and we distribute many of Tathapi’s resources among the participant women and organisations coming across the state.

**Maharashtra Women’s Commission (Mahila Ayog)**
Maharashtra Mahila Ayog adopted Tathapi’s booklet on Sexual Harassment at Workplace Act. It was published as a part of our I Soch Project and was circulated among colleges and organizations in and across Pune. Mahila Ayog published this booklet and it is being circulated among hundreds of colleges in Maharashtra. They also have acknowledged Tathapi’s contribution to the booklet.

**Tathapi’s Resources**

<table>
<thead>
<tr>
<th>Publication</th>
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<tbody>
<tr>
<td>Violence against Women Booklet Marathi</td>
<td>159</td>
</tr>
<tr>
<td>Violence against Women Fact sheet Mar.</td>
<td>35</td>
</tr>
<tr>
<td>Anemia mirror Chart</td>
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<td>Anemia Fact Sheet</td>
<td>48</td>
</tr>
<tr>
<td>Menstruation Cycle Wheel set (Mar)</td>
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<tr>
<td>Menstruation Cycle Wheel set (Hindi)</td>
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<tr>
<td>Sharir Saksharata Sarvansathi</td>
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<td>Committee Against Sexual Harassment - Booklet</td>
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<tr>
<td>Body Puzzle (Mar)</td>
<td>206</td>
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<td>Body Literacy (a set of three work books - Mar)</td>
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<tr>
<td>Manasopachar Tadnya Nasel Tithe</td>
<td>13</td>
</tr>
<tr>
<td>Sanjeevani Training Manual</td>
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</table>
Thank you....

**Partners**
1. Chhattisgad Gramin Seva Samiti, Pithora, CG
2. Gram Seva Samiti, Hoshangabad, MP
3. Lok Astha Seva Sansthan, Gariyaband, CG
4. Prakruti Mahila Vikas Kendra, Chandrapur, MH
5. Prerana Gram Vikas Sanstha, Yavatmal, MH
6. Sanjeevani Sanstha, Amarwada, MP.

7875070422

**For your support and donations**
Sunit Kulkarni
Amitabh Bhupatkar
Ashutosh Bhupatkar
Bhargav Bhupakter
Nilima Bhupatkar
Nitin Pangam
Maeflower Consulting Pvt Ltd
Suvrat Joshi
Sakhi Gopkhale
Bindu Madhav Khire
G/o Ind Logistics Pvt. Ltd.
Parents of children in Zilmil crèches

**Artists**
Raju Deshpande, Sushma Durve, Namdev S H, Shilpa Ballal and Nihar Sapre
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Pradnya Shende
Prajakta Dhumal
Tanuja Tamboli
Trishul D. N.
Gouri Bobade
Sadhana Sawant
Sushma Kharade
Falcy Fernandes
Achut Borgavkar
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Mangal Kalokhe
Swati Patole
Kalpana Khanwe
Seema Jogdand
Kirti More
Nirmala Lokhande
Shobha Dhotre
Savita Sarode
Jyoti Dhivar
Amaruta Choudhary
Noushad Sayyed
Aarti Dongare
Vasundhara Ghonge

Field Staff of the Sanjeevani project
Bharati Ramteke
Rajim Ketwas

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