Swasti
THE HEALTH CATALYST

Annual Report
2025-26

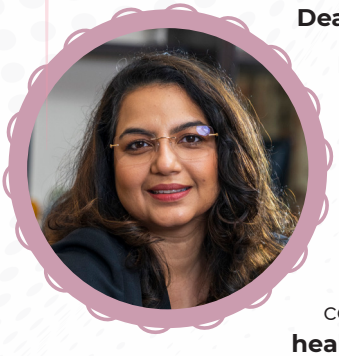




Table of Contents:

A Letter from the CEO	**1**
Executive Summary	**2**
People	**4**
Our Communities	**5**
Towards a 100 million healthy days: Our Projects in FY 2025-2026	**7**
People-Centered Comprehensive Primary Health Care: Alliance and Initiatives	7
Global Health Security, Pandemic Preparedness, and One Health	12
Workforce Wellbeing	13
Health Systems Strengthening	15
Sexual and Reproductive Health and Gender Equity	17
Community Systems Strengthening	18
Social Protection	19
Climate & Health	23
Centres of Strategic Excellence	**25**
Centre for Evidence to Impact (E2i)	26
Centre for Strategic Communications for Public Health	27
Spotlight: Swasti at the World Health Summit Regional Meeting, New Delhi 2025	**28**
Closing Note: From the Incoming CEOs	**29**
Financial Highlights FY 25-26	**30**
Governance FY 25-26 Swasti's General Body Members	**32**

A LETTER FROM THE CEO



Dear reader,

Health has always meant more to us than the absence of illness. It is the possibility of living well, every day.

That belief has shaped Swasti's journey and, over the past three years, our ambition to contribute towards **100 million healthy days in the lives of people who are most marginalised**.

Our 2023–2026 strategy was never simply about reaching a number. **Healthy Days** gave us a way to stay focused on the difference we wanted to make in people's lives. It also kept us asking harder questions: What really contributes to wellbeing? What works? What does not? And what does it take for a good idea to travel further and become part of the way systems work?

Looking back, one idea runs through much of what we have built: **connecting the dots**.

People do not experience health in neat sectors. Health is connected to livelihoods, climate, social protection, gender, place and the systems that surround us. Responding well therefore requires more than a good programme. It requires us to understand how these pieces interact, and to work across the boundaries between them.

Over these three years, we strengthened our work in primary healthcare and wellbeing while building new ways to respond to emerging challenges. From Virtual Project Management Units and public health preparedness, to work at the intersection of climate and health and new approaches to people-centred comprehensive primary healthcare, we kept returning to the same questions: Can we do this better? Can we reach further? Can we make systems work better for the people who need them most?

The final year of this strategy brought many of these ideas into sharper focus. We began to see a shift from delivering good programmes ourselves to helping good approaches travel. Models moved further into government systems. Community institutions took greater ownership. Predictive approaches were tested across new geographies. Partnerships opened pathways to reach populations far beyond what Swasti could reach alone.

Perhaps that is one of the most important changes I see when I look back. We are moving from asking only, "**Does this work?**" to asking, "**How can this work at scale, who needs to own it, and what must we leave behind so that it can continue without us?**"

What I value most is not only the individual programmes or initiatives, but what remains around them: stronger capabilities, evidence that others can use, tools and models that can travel, institutions better equipped to respond, and relationships that make future action possible.

We have also been reminded that some of the most important knowledge does not come from a research paper or a meeting room. It comes from communities and frontline workers. Their experience tells us where systems fail, what people value and what solutions are likely to work in real life. Listening to that knowledge, and allowing it to shape what we do, is essential if we are to remain relevant to the people we seek to serve.

This final year has also been a year of transition in leadership. And I have learnt that transition is not something an organisation simply announces. **It is something you live through together**.

It asks for trust, candour, generosity, the willingness to make space for one another, and sometimes the grace to let go. I have been fortunate to experience that alongside Sudha, Shri and the wider Swasti team this year.

As I hand this chapter forward, I do so with deep confidence in what they will build next, and with gratitude for the spirit of collaboration with which we have navigated this transition together. So, as the 2023–2026 strategic period comes to a close, I do not primarily feel a sense of completion. I feel momentum.

Swasti's greatest strength remains its people: the teams willing to ask difficult questions, the communities and frontline workers who keep teaching us what matters, and the organisations and institutions willing to learn, share and build alongside us.

There is still a long way to go. But we carry forward stronger foundations, clearer questions and a deeper understanding of what becomes possible when we connect the dots.

I wish Sudha, Shri and the entire Swasti team courage, clarity and joy for the chapter ahead.

The work continues. And so does the possibility of what we can achieve when we connect the dots and act together.

Warmly,
Dr Angela Chaudhuri
CEO

EXECUTIVE SUMMARY

FY 2025–26 was a year of scale, systems strengthening and transition for Swasti. As we completed our 2023–2026 strategic plan and entered our third decade, our work increasingly moved beyond individual programme delivery towards strengthening the communities, systems, partnerships and evidence needed to create lasting improvements in health and wellbeing.

Our ambition remains clear: **to add 100 million healthy days to the lives of vulnerable communities.** Healthy Days continues to be our North Star, helping us look beyond services delivered to ask whether our work is contributing to meaningful improvements in people's health and wellbeing. Over the 2023–2026 strategic plan period, Swasti contributed to **4.65 million (46.5 lakh) healthy days** for vulnerable communities. This represents important progress towards our longer-term ambition, while also reinforcing the need to focus on the systems and capabilities that can take effective approaches to scale.

During FY 2025–26, our work **directly reached 19.17 lakh (approximately 1.9 million) people**, spanning primary healthcare, social protection, workforce wellbeing, climate and health, global health security and community systems strengthening. Across these domains, the emphasis was increasingly on connecting health with the wider conditions that shape wellbeing, including livelihoods, financial and social security, climate vulnerability and the strength of local systems.

This shift was reflected in the way Swasti worked with **governments, communities and diverse ecosystem partners**. Rather than building parallel structures, we increasingly focused on strengthening existing systems and creating models that can be adopted, adapted and sustained. In Andhra Pradesh, for example, our partnership with the Government created pathways for people-centred primary healthcare to potentially reach **84 lakh (8.4 million) self-help group households**, while social protection work expanded across **15 states and 26 Aspirational Districts reaching 3.8 lakh individuals.**





A community health worker visits a community member.

Evidence and innovation remained central to this approach. Across the year, Swasti continued to test models, generate evidence, build digital and analytical capabilities, and translate learning into tools and approaches that can strengthen public health decision-making. From predictive disease surveillance and climate-health early warning systems to people-centred primary healthcare and community-led resilience models, the focus increasingly shifted from demonstrating what works to understanding how it can work at scale.

Equally important was the strengthening of **collective action and community ownership**. Alliances such as the **Comprehensive Primary Health Care Alliance**, **Community Action Collab** and **SETU** brought together governments, civil society, practitioners, researchers and other partners around shared public health challenges. Across our work, we saw growing evidence that sustainable impact depends not only on strong interventions, but on the relationships, capabilities and institutions that enable them to continue and evolve.

FY 2025–26 therefore marks a point of transition for Swasti. We enter the next strategic chapter with a stronger evidence base, deeper partnerships, tested models and growing capabilities across health and the systems that shape it. The opportunity ahead is to connect these assets more deliberately, to bridge communities and systems, evidence, innovation and scale, and health with the wider determinants of wellbeing, and accelerate our journey towards 100 million healthy days.

PEOPLE

The year 2025–26 marked an important chapter in Swasti's journey as we stepped into our third decade. It was a year of organisational change and renewal, shaped by a clear focus on building the capabilities we need for the years ahead.

As the organisation evolved, our 70 colleagues came together across the interconnected domains of health, climate, social protection and workforce wellbeing. We reorganised around our areas of strength and expertise, bringing related capabilities closer together and creating greater opportunities for collaboration and interdisciplinary work.

Change also brought the need for stability. Our leaders and managers played an important role in providing continuity and supporting teams through the transition, with no attrition in key leadership roles. At the same time, the year marked the beginning of a new chapter in leadership, laying the foundations for the next generation of leaders at Swasti.

Learning and growth remained central to our people agenda. The organisational transition itself created opportunities for colleagues to work across disciplines, broaden their perspectives and learn from one another. We also continued to invest in structured learning, with a focus on strengthening core capabilities such as partnership building and deepening domain expertise. The Public Health Power 90 forum provided a platform for curated, curriculum-based learning on cutting edge public health technologies and new methodologies - both in theory and in application, bringing colleagues together to learn from experts and each other, reflect together and share experiences that enriched each other's work.

Alongside learning, we remained equally committed to the wellbeing of our people. We believe that a resilient organisation is built when people have the space to contribute meaningfully, learn and grow, while also being supported in maintaining balance and emotional wellbeing. Through a collaborative work environment, we continued to create spaces where people could do meaningful work, take pride in their contributions and care for their own growth and wellbeing.

As we enter another year of growth and impact, our commitment remains simple: to build an organisation where people continue to thrive, learn continuously and do their best work.



Swasti General Body 2025-26 with Swasti Leadership.

OUR COMMUNITIES

- Factory Workers
- Urban Poor
- Rural Poor
- At-risk Adolescents
- Women in Sex Work
- At-risk Gender Non-Binary
- PLHIV
- Other Climate Vulnerable Populations
- Healthcare and Frontline Workers
- Migrant and Informal Workers
- Fisherfolk, Dairy and Small Farmers

Our Projects in FY 2025-2026



TOWARDS A 100 MILLION HEALTHY DAYS: OUR PROJECTS IN FY 2025-2026

PEOPLE-CENTERED COMPREHENSIVE PRIMARY HEALTH CARE: ALLIANCE AND INITIATIVES

Swasti sees people-centered comprehensive primary healthcare as an opportunity to build health systems that are more scalable and resilient. The focus is on making care more preventive and continuous, supporting early detection and treatment while strengthening the safety net available to vulnerable populations. During FY 2025–26, this work began to move beyond individual models towards ecosystem-scale implementation.

The work across our primary healthcare portfolio was delivered in collaboration with community institutions, governments, technology, corporates and implementation partners, academic institutions and supply-chain organisations. During the year, Swasti signed an Memorandum of Understanding with **Society for Elimination of Rural Poverty (SERP), Government of Andhra Pradesh,** to integrate people-centered primary healthcare systems for **84 lakh (8.4 million) Self-Help Group (SHG) households.**

Invest4Wellness (i4We 2.0): Transforming Primary Healthcare for Urban Poor

Primary Health *Health Systems Strengthening*

Invest4Wellness (i4We) is Swasti's flagship initiative, a comprehensive, people-centric, and community-led primary healthcare model designed to address the health and economic challenges faced by the most vulnerable communities. This model targets the social determinants of health, including financial, environmental vulnerabilities and social protection, ensuring that primary healthcare is available, accessible, and affordable for all.

FY 2025–26 saw i4We deepen its impact through stronger collaboration with **community institutions, local public health systems and ecosystem partners**, including **Arogya Deepa Swathya Samiti (ADSS)**. During the year, **2,027 families** were supported, reaching **4,091 individuals through health screenings and 7,650 services**. Alongside healthcare access, i4We strengthened **financial inclusion and community-led health financing**, helping families better manage health-related financial vulnerabilities. **1,671 members saved ₹5.48 crore**, while the programme facilitated **1,204 loans amounting to ₹10.30** crore and mobilised **₹75.29 lakh** through community financing mechanisms, including **₹9.36 lakh through 1,566 member subscriptions**. The community cooperative, **Swathi Jyothi Mahila Vividdodesha Souharda Sahakari Niyamita**, further enabled members to access finance for essential needs, embedding healthcare financing within community-led financial systems and strengthening households' ability to manage health needs without falling into financial distress.



A health camp in progress.

During FY 2025–26, Swasti also continued strengthening strategic partnerships designed to scale integrated community-centered primary healthcare models. Our work with **Fuzhio**, an eco-social venture aiming to enhance value chain efficiencies of products that resolve socio-economic and environmental issues, made this possible. Partnerships supporting i4We increasingly focused on moving from localized implementation toward ecosystem-scale deployment through technology integration, scalable partnerships, and institutional innovation. Within this broader strategy, partner-supported implementations contributed toward strengthening care continuity systems, community-led healthcare access and scalable primary healthcare models designed for replication across diverse geographies.

These were done with the generous contribution of the **Silicon Valley Community Foundation (SVCF)**.

Health@Work: Building Healthier Workplaces and Communities

Primary Health *Workforce Wellbeing* *Community Systems Strengthening*

The **i4We approach extended into workplaces and worker communities during FY 2025–26 through Health@Work in Tamil Nadu and Karnataka**. Health@Work is Swasti's integrated workplace primary healthcare and wellbeing approach, going beyond conventional occupational health by combining **primary healthcare, prevention, nutrition, psychosocial wellbeing, social protection, and workplace systems strengthening**. Collaborating with employers, workers, brands, governments and ecosystem partners.

In **Tiruppur, Karur, Erode and Coimbatore, Tamil Nadu**, the **Auchan Foundation** supported Swasti's efforts to improve nutrition and access to healthy, locally grown food for apparel workers, families and communities. Through the **Healthy Plates, Healthy Lives** initiative, **5,269 workers and community members** were reached through screening and follow-up care for malnutrition and iron deficiency anaemia, nutrition education on balanced diets and food safety, and initiatives such as healthy food exhibitions, kitchen gardens and vegetable shops. A complementary three-month initiative in Tiruppur reached a further **756 people**, including factory workers, school children, farmers and women-led community groups, while promoting sustainable farming, local food distribution and stronger linkages between producers, communities and workplaces. Together, these efforts contributed to healthier food environments and improved access to nutritious food across worker and community settings.

Swasti also partnered with **ITFAS India Fashion Private Limited** to promote the health and well-being of workers and their communities of Tiruppur, Tamil Nadu. During this engagement, the programme reached **100 participants**. The initiative focused on **health and nutrition, emotional well-being, self-care and financial well-being**, using interactive sessions to strengthen workers' knowledge and practices for healthier lives and workplaces. The partnership also supported children from workers' families facing financial or educational challenges, contributing to broader family well-being.

In Bengaluru, Karnataka, and Karur, Tamil Nadu, a five-year project to strengthen the health and well-being of workers across Amazon's supply chain came to a close in June 2025. Supported by **Amazon Services LLC**, the program brought health and well-being services closer to workers through a holistic approach combining preventive and primary healthcare, health screenings, mental health support, financial literacy, social protection, gender equity, and efforts to strengthen workplace relationships. Across six factories, the program reached **6,499 workers** over the course of 5 years, **65% of whom were women**, with **5,751 workers receiving health screenings** and workers supported to access treatment through ESIC, PHCs and telecare services. The programme also trained **70 Wellness Facilitators** who helped sustain health awareness within workplaces. Overall, the partnership contributed **17,839 Healthy Days** to workers' lives. During FY 25-26 the programme reached 930 workers



A factory worker in Bengaluru

Comprehensive Primary Health Care Platform (CPHC) Alliance

Primary Health *Health Systems Strengthening*

The **CPHC Alliance** brings together public and private sector stakeholders to advance a shared vision of comprehensive primary healthcare that is centred on the needs and preferences of individuals, families and communities. With support from the **Silicon Valley Community Foundation (SVCF),** Swasti is strengthening the CPHC ecosystem through collaboration, knowledge-building, and the development of practical approaches to comprehensive and continuous primary care.

During FY 2025–26, the Alliance transitioned from an alliance-governed structure to a **Swasti-anchored platform model**, creating greater space for collaboration, co-creation and knowledge exchange. One such platform is the **CPHC Design Lab**, In collaboration with **Global Development Incubator (GDI), ISB**, which brings together practitioners, innovators and experts to explore the building blocks of a comprehensive, continuous primary care model grounded in the Indian ecosystem. The Lab is working towards articulating a delivery approach that complements established frameworks such as **Community Care Models (CCM)** and **ABDM Enabled Care Continuum (AECC)** while responding to the realities of India's health system. This work is complemented by the **CPHC Learning Series**, which brought together 260 learners through six thematic learning series, and by 20 deliberative dialogues with stakeholders across India's primary healthcare ecosystem.

Among the private-sector collaborations advancing this vision is Swasti's long-standing partnership with **Sevamob**, a health-technology social enterprise and an active member of the CPHC Alliance. Building on several years of collaborative work, in which Swasti has brought Sevamob into large health engagements as a technology and implementation partner, the two organisations continue to pair Sevamob's AI-enabled, field-based screening and care delivery with Swasti's strengths in systems design, capacity building and government engagement. This complementarity has translated into scaled programmes across multiple locations reaching community members, a jointly published study from a Pfizer-supported initiative, and collaborative grant applications. Together, these efforts reflect the platform's wider intent, to build partnerships that connect innovation with the realities of India's health system and extend the reach of comprehensive primary care. Across FY 2025-26, these Sevamob-linked efforts spanned workplace health screening in factory and garment clusters across Jaipur, Tirupur, Karur, Bengaluru and Ludhiana, reaching a largely workforce, alongside an AI-nutrition deployment serving a low-resource community.[1]

[1]Partner-scaled delivery contributed to the CPHC pillar's overall community reach of **2,43,363 individuals** in FY 2025-26.

Call4Svasth(C4S): Bringing Holistic Healthcare to the Margins Through Phygital Innovation

Primary Health *Welltech* *Health Systems Strengthening*

Call4Svasth (C4S) is a phygital primary care model that delivers comprehensive, hyper-localized health care to the most vulnerable communities by integrating technology with frontline health worker outreach. The program focuses on marginalized populations, including the urban poor, rural poor, unorganized workforce, tribal communities, hard-to-reach locations, gender non-binary groups, and sex workers. It provides health awareness, expressed illness support, ongoing followups, emotional health support, and social protection services.

During FY 2025–26, with support from the **Silicon Valley Community Foundation (SVCF)**, Swasti, in partnership with Catalyst Management Services, conducted a baseline and endline evaluation to assess the efficacy of the C4S model, particularly its teleconsultation component. The evaluation covered **1,200 respondents across Puri and Koraput, Odisha**, including a panel of 268 people tracked over time. The findings demonstrated strong uptake and effectiveness of the model: in Puri, **94% of teleconsultation users received same-day care**, **99.1% reported that their health issue was addressed or resolved**, and **95% of those referred to a health facility completed the referral**. Notably, **17.8% of users accessed a qualified doctor for the first time**, while 86% reported avoiding a hospital visit through teleconsultation.

The evaluation also showed that C4S is more than a digital consultation service: the community health worker remains central to enabling access, follow-up and continuity of care. The findings affirmed the potential of a community-anchored, technology-enabled model to make primary care more accessible, timely, affordable and responsive, while also identifying areas for further strengthening—including callback timing, access to affordable medicines, women's autonomy in care-seeking and integration of preventive care.

Complementing this evidence-building, the **Deloitte Foundation** supported C4S to expand the role of community champions in reducing barriers to healthcare access through Swasti's technology and digital solutions. Awareness and screening activities focused on **cancer, anaemia and non-communicable diseases (NCDs)** reached **88,901 people** across **Odisha (Puri and Koraput), Karnataka (Bengaluru Urban) and Gurugram (Mohammadpur)** during the year.



A community member uses Call4Svasth.

G1: Building Resilient Communities

Primary Health *Community Systems Strengthening*

The **G1 programme** is an integrated approach to strengthening the resilience of vulnerable households to interconnected health, climate and economic risks. It brings together primary health care, livelihoods, social protection, financial inclusion and climate adaptation to help households anticipate and manage shocks and maintain their health and wellbeing.

In FY 2025–26, Swasti strengthened and tested this approach with 300 rural farmers households in Kanakapura, with a focus on improving household economic resilience and access to health and social protection systems. More than **90% of households know their resilience status and developed a resilience solution plan to achieve their resilient stage by increasing monthly income**, through preparing agriculture shocks, prevention of potential health issues, plan for children education, diversify income sources through agri and non agri enterprises, and access social protection services.

The work extends Swasti's people-centred comprehensive primary health care approach beyond the health facility by strengthening households' ability to prevent, prepare for and respond to health and livelihood shocks. The G1 programme was supported by the generous contribution of the **Silicon Valley Community Foundation (SVCF)**.



A farmer working on a field

Community Action Collab (CAC): Enhancing Resilience Through Innovation and Collaboration

Primary Health *Community Systems Strengthening*

The Community Action Collab (CAC) is a collaborative platform with 375 partners focused on building resilience for 10 million vulnerable people (VPs) across India. It is a multi-stakeholder collaborative platform designed to strengthen collective action, resilience and community-centered responses to emerging social and public health vulnerabilities. In FY 25-26, the **Silicon Valley Community Foundation (SVCF)** continued supporting Swasti in building coalition-based approaches capable of strengthening local systems, enabling rapid coordination between civil society actors and ensuring communities remain central to resilience-building efforts. Through this programme, CAC reached 2,000 individuals, contributing to its broader mission of strengthening community resilience. The CAC collaborative model reinforced Swasti's broader institutional commitment toward community systems strengthening, partnership-driven scale and distributed models of public health resilience capable of responding to both immediate crises and long-term structural vulnerabilities.

GLOBAL HEALTH SECURITY, PANDEMIC PREPAREDNESS AND ONE HEALTH

Swasti's work in Global Health Security, Pandemic Preparedness and One Health focuses on strengthening health systems and communities to anticipate, detect, and respond to emerging health threats. The approach brings together predictive analytics, disease surveillance, climate and environmental intelligence, animal health, and community-level insights to enable timely action against infectious diseases, zoonotic threats, and climate-sensitive health risks. By connecting data, technology, government systems, and local intelligence, Swasti works to build more integrated, responsive, and resilient systems for health security and pandemic preparedness.

Precision Analytics & Action Towards Climate & Health (PATCH): Pioneering Early Warning Systems

Global Health Security & Pandemic Preparedness *Climate X Health* *Primary Health* *Welltech*

Precision Analytics & Action Towards Climate & Health (PATCH) is an integrated, multi-source early warning system that equips cities and communities to proactively respond to climate-induced health risks. It connects government data, private sector innovation, environmental models, and community intelligence into one powerful platform.

During FY 2025–26, PATCH applied this approach across two key initiatives, spanning infectious disease surveillance, one health, climate-health preparedness, and air quality.

During the year, in partnership with the Skoll Foundation, the platform reached **3.95 lakh individuals** and progressed the development, validation, and operationalisation of predictive surveillance models across multiple states.

- **Tamil Nadu:** The **Scrub Typhus Early Warning System** achieved **85% recall and 83% precision**, strengthening the ability to identify emerging disease risks. Swasti also expanded **state-wide predictive disease modelling for dengue**, with on-ground validation continuing. This work has contributed to saving **more than 1,000 lives since September 2025**.



Operationalising Meghalaya's One Health Mission in partnership with the Department of Health, Meghalaya.

- **Andhra Pradesh:** Predictive models for **typhoid, malaria and dengue** were developed and subjected to validation, performance assessment and operational feasibility testing to assess their potential for integration into routine surveillance and response.
- **Meghalaya:** The **One Health Intelligence Early Warning System** was advanced through predictive modelling for **scrub typhus and typhoid**, achieving **80% recall and 90% recall**, respectively. On-ground validation was initiated, alongside integration of **malaria and dengue dashboards** into the wider surveillance system.
- **Mizoram:** Swasti supported the development of a **One Health approach to animal health surveillance**, strengthening systems for the detection and response to zoonotic disease risks and reinforcing the integration of human and animal health surveillance.

Collaborative partnerships were central to this work. Swasti signed MoUs with the **Department of Health, Meghalaya** and the **Department of Public Health and Preventive Medicine, Tamil Nadu**, while also providing technical expertise to the **Department of Animal Husbandry & Dairying** towards animal health surveillance systems.

WORKFORCE WELLBEING

Swasti's Workforce Wellbeing work brings together health, safety, wellbeing and empowerment for workers and their families, while strengthening the systems and ecosystems that support them. The approach connects gender equity, occupational health and safety, community engagement and access to essential services to create healthier, safer and more resilient workplaces.

In FY 2025–26, our work in this area, focused on strengthening women's health, wellbeing and safety across textile, cotton and spice-sector communities, as well as supporting the wellbeing of workers and their families across supply chains. In FY 2025–26, our work in this domain, in partnership with **UN Women and Inditex**, reached approximately **44,000 individuals** across nine geographies. The work focused on strengthening women's health, wellbeing and safety across textile, cotton and spice-sector communities, as well as supporting the wellbeing of workers and their families across supply chains.



Women working in a garment factory.

Upfront: Enhancing Women Factory Worker Well-being

Workforce Wellbeing *Gender Equity* *Community Systems Strengthening*

In the textile sector of **Tamil Nadu** and **Delhi NCR** and the cotton sector in **Rajasthan**, **UN Women** supported Swasti in enhancing the overall health, wellbeing, and safety of women working in the sectors. This project aimed to improve women's access to healthcare services, financial literacy, digital inclusion, and social protection. It also strengthened workplace systems and addressed gender-based violence through multi-level engagement, capacity building, and strategic collaboration with local stakeholders. In each of the factories onboarded, Joint Project Implementation Committees (JPICs) were formed. Wellbeing Champions and Changemakers selected from the workforce to create safe, inclusive, and equitable environments for women across homes, workplaces, and public spaces. Throughout the course of the projects, local officials were also engaged across the Health, Women and Child Development (WCD), Panchayati Raj Institutions (PRI), and Agriculture departments to support convergence and local ownership. In the last year, the project reached **13,190** women.



Women working in a garment factory in Bengaluru.

In the spice sectors of **Rajasthan** and **Kerala**, the "Ensuring Women's Health, Wellness and Safety in Rural Spaces in the Spice Sector" project focused on strengthening the health, well-being and safety of women workers and small-scale farmers in the region. With the support of **UN Women**, the project combined locally contextualised training and capacity-building with community outreach on health, wellness and legal issues, while also integrating digital and financial literacy into the model interventions. It engaged women workers, farmers, community members, and men and boys, recognising the importance of broader community participation in creating safer and more supportive environments for women. The project also included 20 planned engagements, two state-level dissemination meetings, reaching **25,323 women** workers and small-scale farmers across the two states in the last year.

Happiness4All

Workforce Wellbeing *Gender Equity* *Community Systems Strengthening*

In FY 2025-26, we continued the momentum of our work under the Happiness4All program with the support of **Inditex,** which covers 100 factories that promote the holistic wellbeing, dignity, and empowerment of workers, their families, and communities through a socio-ecological and peer-education approach. The program focuses on financial and digital literacy, social protection, gender equality, POSH, life skills, communication, leadership, and worker wellbeing, while strengthening workplace systems such as Joint Problem-Solving Committees (JSPCs), social protection helpdesks, and POSH mechanisms. Trained worker champions supported peer learning and outreach, helping sustain programme practices beyond the formal intervention. Working across Uttar Pradesh, Haryana, Gujarat, Tamil Nadu, Rajasthan, Dadra and Nagar Haveli, Andhra Pradesh, the project reached **5,632** factory workers during FY 25-26.

HEALTH SYSTEMS STRENGTHENING

Swasti's Health Systems Strengthening work focuses on working upstream with governments and other institutions to strengthen public health governance, generate evidence and support more effective approaches to health system delivery at scale. During FY 25-26, we worked with state governments and foundations to make state health systems more resilient.

Manyata – Technology Assessment and Systems Strengthening for Quality Maternal Healthcare

Health Systems Strengthening

Supported by **Merck Sharp & Dohme Corp (MSD)**, the project was implemented by **Swasti from February 2022 to June 2025** to strengthen the technology and systems underpinning the Manyata 4.0 programme. It assessed existing digital platforms and programme processes across facility onboarding, quality improvement, quality assurance, certification and programme management, and developed recommendations for an integrated, interoperable technology architecture and stronger data systems.

Over the project implementation duration (Between February 2022 and November 2024), the Manyata 4.0 programme cumulatively **enrolled 1,079 private maternal healthcare facilities**, supported 1,000 facilities to complete the quality assurance preparation process, established a network of 17 Centres of Strategic Excellence/QI providers across 25 states, **reached 4,00,925 women** through participating private facilities, and **trained 6,825 health workers**.

In FY 2025–26, the project was in its closing stage, with data validation and consolidation of project information as the main activities undertaken.

Virtual Project Management Unit (VPMU)

Health Systems Strengthening

During FY 2025–26, Swasti continued to provide technical support to strengthen government health systems in Andhra Pradesh through the Virtual Project Management Unit (VPMU), working with government and philanthropic partners to address system capacity gaps, strengthen public health decision-making, and support innovation.

Technical support to establish the VPMU

With the support of the **Silicon Valley Community Foundation (SVCF)**, Swasti, in partnership with Catalyst Management Services, provided technical support to the Government of Andhra Pradesh to establish the Virtual Project Management Unit (VPMU) as a platform to address capacity gaps and drive innovative public health solutions. Key areas of work included:

- VPMU operating architecture & digital platform aligned with Ayushman Bharat Digital Mission (ABDM) and District Development Coordination and Monitoring Committee (DISHA) standards.
- Reproductive, Maternal, Newborn, and Child Health (RMNCH) dashboard
- Heat Action Plan for Ananthapuramu District
- Technical expertise towards MedTech innovation

Together, these systems and innovations are strengthening government capacity to plan, coordinate and respond to public health priorities, with the interventions reaching 486,764 people across Andhra Pradesh in FY 25-26 and supporting more responsive and effective health services.

This initial support helped establish the VPMU and laid the foundation for its continued development under a broader, three-year programme supported by the Gates Foundation to strengthen government health systems in Andhra Pradesh.

Strengthening government health systems through the VPMU

With the support of the Gates Foundation, Swasti continued to strengthen the VPMU as an embedded technical support platform within the Government of Andhra Pradesh. During the year, the VPMU became increasingly integrated into the government system, supporting approximately 40 job cards by March 2026 and enabling collaboration among 14 development partners, bringing together information to strengthen review and decision-making.

The VPMU also supported the Department of Health & Family Welfare to identify and implement innovative initiatives. The work extended across the state and three districts, with direct engagement in Ananthapuramu and Bapatla.

Ayushman Bharat Digital Mission (ABDM) Enabled Care Co-ordination (AECC)

Health Systems Strengthening *Primary Health*

AECC works with existing health systems, using the **Ayushman Bharat Digital Mission (ABDM)** to strengthen coordination between people, healthcare providers and public health institutions across the continuum of care. The approach brings together digital tools, care coordination infrastructure, community access points and provider capacity.

With support from the **Gates Foundation**, Swasti began implementing ABDM Enabled Care Coordination (AECC) in FY 2025–26 to strengthen the use of India's digital public health infrastructure for more connected, coordinated and people-centred care.

The initiative is currently being implemented in partnership with the **Government of Odisha**, beginning in Keonjhar district, with potential for wider state-level replication. The 35-month phased programme combines the Population Health & Wellness Score (PHWS) and real-time RAG dashboards to identify gaps, track performance and support timely action across the health system.

Strengthening Monitoring, Evaluation and Learning (MEL) system across partners

Health Systems Strengthening

Supported by the **Swiss Philanthropy Foundation (SPF)**, Swasti is working with **33 SPF grantee partners in West Bengal** as a learning partner to strengthen their programme design, monitoring, evaluation and learning practices for charitable causes. The initiative supports partners to build practical MEL systems that enable them to track progress against shared outcomes, generate evidence and use learning to strengthen programme implementation and effectiveness.

Swasti is working alongside MEL focal points to strengthen the use of Theory of Change, MEL frameworks, Outcome Harvesting and programme review processes, while supporting partners to develop and operationalise MEL systems suited to their programmes and organisational capacities. The approach emphasises hands-on accompaniment, capacity strengthening and learning-by-doing, with systems progressively transitioned to partners for sustained use. Through this work, Swasti is supporting partner organisations engaged in charitable work to embed evidence and learning into programme management and decision-making, strengthening their ability to adapt, demonstrate results and improve outcomes over time.

SEXUAL AND REPRODUCTIVE HEALTH AND GENDER EQUITY

Swasti's Sexual and Reproductive Health (SRH) and Gender Equity work focuses on improving health outcomes among some of the most marginalised populations, with a particular focus on sex workers across India. The work strengthens access to **people-centred, inclusive health services** and supports individuals to access the information, care and services they need to make informed decisions about their health.

Taaras: Empowering Women in Sex Work to Lead, Thrive, and Build Resilient Communities

Sexual & Reproductive Health *Gender Equity* *Community Systems Strengthening*

Taaras, a coalition of women in sex work (WSW) and their organizations, operates across five Indian states, Andhra Pradesh, Maharashtra, Tamil Nadu, Karnataka, and Telangana through 62 community-based organizations (CBOs). The program empowers marginalized communities to access health and social protection services, reduce vulnerability to HIV and other health risks, and achieve socioeconomic stability.

With the support of the Silicon Valley Community Foundation (SVCF), Taaras reached **3,48,730** individuals, and more than **1.4 lakh women sex workers across 68+ community institutions** were collectivised under the **Taaras coalition**. The coalition successfully completed implementation of the **Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM)** program independently across these community organisations, with the coalition itself increasingly managing the work with minimal support from the Secretariat.

This growing community ownership is reflected in the way the wider ecosystem is now functioning. More than **25+ community organisations are independently running targeted interventions and CSR projects**, across Karnataka, Maharashtra, Tamil Nadu, Andhra Pradesh and Telangana. The work is supported through partnerships with organisations including **NACO** and **PricewaterhouseCoopers (PwC)**, alongside internally mobilised resources.

Recognising the strong link between **economic security, health and well-being**, Swasti, through Taaras, supported supplementary livelihood opportunities for women in sex work through the **Livelihood Opportunities for Women in Sex Work programme**, with generous support from **Alvarez & Marsal**. The initiative reached **450 women in Bengaluru Urban**, supporting them to explore, establish and strengthen alternative livelihood opportunities. Women received enterprise awareness and development support and vocational skills training along with support on business planning, legal compliance, marketing, access to credit, and technical assistance. By strengthening economic resilience and reducing livelihood vulnerability, the programme complemented Taaras' broader efforts to advance health, well-being and access to social protection.



COMMUNITY SYSTEMS STRENGTHENING

Swasti's Community Systems Strengthening work focuses on supporting community institutions with the managerial and technical capabilities they need to strengthen governance, partnerships, resource mobilisation and long-term sustainability. The aim is to enable community institutions to take greater ownership of the work they lead.

Building Health, Resilience and Livelihoods for LGBTQ+ Communities

Gender Equity *Community Systems Strengthening*

Supported by the **Bosch India Foundation**, this initiative strengthens the resilience, health and social and economic inclusion of LGBTQ+ communities across **Thiruvallur in Tamil Nadu and Pune in Maharashtra**. Through the **Know Your Resilience (KYR)** process, community members identify their health, financial, social and livelihood priorities and connect with appropriate services, support systems and opportunities. During the project period, **304 LGBTQ+ community members** completed KYR assessments, highlighting health and basic services, financial preparedness, disaster readiness and social protection as important foundations for individual and community resilience.

Building on these insights, **107 participants** undertook skill development in entrepreneurship, tailoring, beauty services and basic computer skills, while **64 participants initiated alternative livelihood activities**. The project also mobilised **₹33.9 lakh** for livelihood investments, supporting participants to move towards greater economic stability and self-reliance.

At the systems level, the initiative worked with community-based organisations, training institutions and government departments to strengthen pathways to health, social protection, identity documentation and livelihood opportunities. Engagement with around **35 district-level government officials** helped build institutional linkages, while community-led organisations supported trust, participation and locally grounded implementation.

The initiative demonstrates a readiness-based approach to resilience, recognising that access to health and basic services, social protection and financial security can provide the stability needed for people to engage in skills development and pursue sustainable livelihoods.

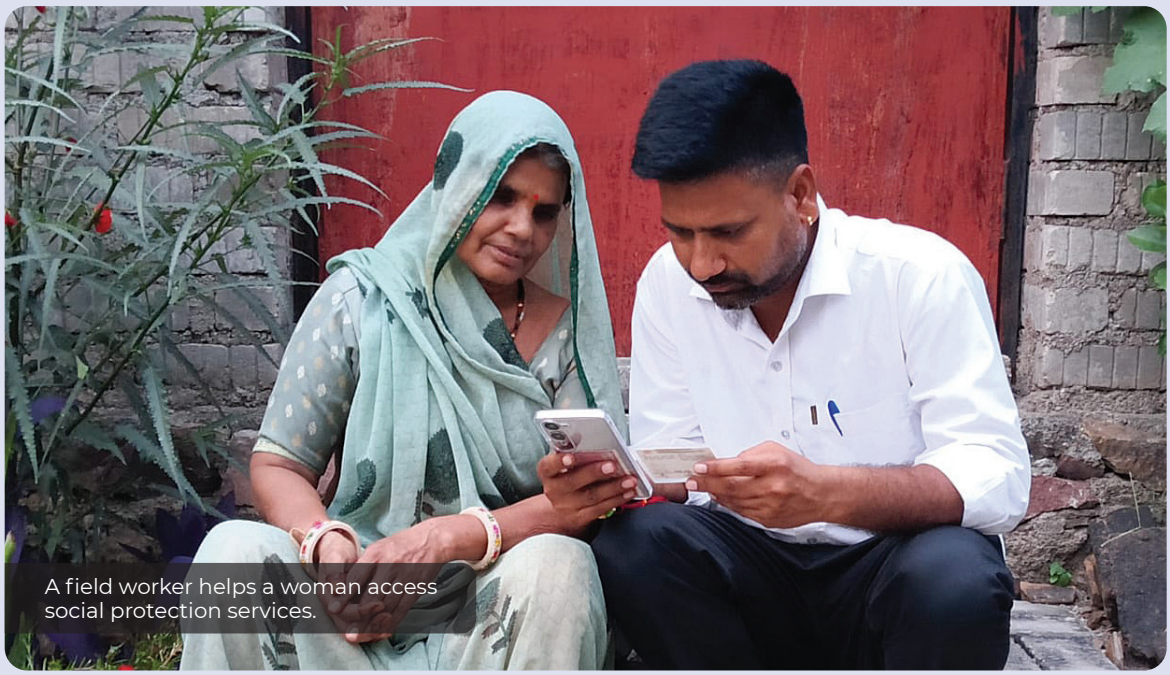


Transkitchen, Chennai, providing an alternate livelihood to LGBTQ+ community members.

SOCIAL PROTECTION

The connection between health and the wider conditions in which people live is central to Swasti's work. By helping underserved communities access social protection schemes and entitlements, and connecting these with health and livelihood support, Swasti works to strengthen the foundations that enable people and communities to be healthier and more resilient.

During FY 2025–26, this work expanded significantly. Swasti grew its engagement to **15 states and 26 Aspirational Districts**, including a scale-up across four states in the North-East. Swasti signed MoUs with the governments of **Nagaland, Mizoram, Meghalaya, Tripura and Maharashtra respectively**, strengthening collaboration with state governments on social protection initiatives. Partnerships with academic institutions also grew, including a new MoU with **Tata Institute of Social Sciences (TISS), Mumbai** and collaboration with the **Delhi School of Social Work**.



A field worker helps a woman access social protection services.

Expanding Social Protection Access for Particularly Vulnerable Tribal Groups

Social Protection *Health Systems Strengthening*

In **Andhra Pradesh and Kerala**, Swasti worked to improve access to government schemes and essential services among **Particularly Vulnerable Tribal Groups (PVTGs)** through digital platforms and community-based facilitation. Supported by the **NASSCOM Foundation**, the initiative reached **42,069 people**, with community digital ambassadors helping families navigate and access schemes related to health, insurance, housing, livelihoods and social protection. The initiative also facilitated e-Shram enrolment, helping informal workers access longer-term social security benefits, while building a cadre of community digital ambassadors to sustain awareness and support within communities.

Strengthening Social Protection for Gig Workers

Social Protection *Workforce Wellbeing*

In **Bengaluru and Gurugram**, Swasti, with the support of Tokopedia, worked to strengthen the financial security and social protection of gig workers by improving awareness, facilitating access to government schemes and bringing services closer through **Unified Help Desks and scheme facilitation camps**. The programme reached **20,285 gig workers**, enabling access to **21,099 government scheme services** and mobilising approximately **₹30 crore in benefits** for the community. Partnerships with Uber, Swiggy, Amazon and Flipkart, along with the **Dattopant Thengadi National Board for Workers Education and Development (DTNBWED)** and the Ministry of Labour and Employment, helped strengthen last-mile access and institutional linkages.

Window of Opportunities: Strengthening Access to Social Protection

Social Protection *Community Systems Strengthening*

In **Bengaluru**, Swasti, with the support of **Rotary Bangalore Midtown**, worked to improve access to government social protection schemes and services for poor and underserved communities through the establishment of **social protection help desks**. The programme combined targeted community outreach, awareness building and scheme facilitation to address barriers to welfare entitlements, including schemes that provide critical support for **healthcare access and financial protection**. By strengthening last-mile linkages between communities and government systems, the programme supported households to better access resources that contribute to their health, wellbeing and resilience.

In FY 2025–26, the programme linked **28,108 community members** to social protection schemes. Across the full programme period, **from October 2024 to September 2025, a total of 51,572 community members** were reached. Women accounted for **31,200 people reached**, while **44.89% of those reached were from SC/ST communities and 33.13% from OBC communities**, reflecting a focus on historically underserved groups. Through help desks and community-level outreach, the programme strengthened awareness, access and utilisation of social protection services, contributing to greater **health, social and financial resilience** among vulnerable communities.

Strengthening Health and Social Security for Slum-dwelling and Migrant Communities

Social Protection *Community Systems Strengthening* *Primary Health*

In **North Chennai**, Swasti, with the support of **Thoughtworks Technologies (India) Private Limited**, is working to improve the **health and social security of slum-dwelling and migrant communities** by strengthening access to preventive healthcare and government welfare schemes. The programme brings together **Unified Help Desks, health awareness and preventive screening camps, referrals, scheme facilitation and community outreach** to address barriers to essential health and social protection services. Community groups and local authorities are engaged to strengthen last-mile access and support, while digital tracking enables the programme to monitor linkages and improve delivery.

Since its launch in **January 2026**, the programme has reached **1,094 community members** between January and March 2026. The ongoing initiative aims to reach 10,000 slum-dwelling and migrant families, with a focus on linking communities to preventive healthcare services, health insurance, pensions and other government welfare schemes. By bringing health and social protection services closer to communities, the programme seeks to strengthen health, financial security and resilience among underserved households.

Building Health, Social Security, and Livelihood Resilience for Rural Women

Social Protection *Primary Health* *Gender Equity*

Across **Ramanathapuram and Virudhunagar, Tamil Nadu**, Swasti is strengthening health and economic resilience among women from marginalised and vulnerable families, including small farmers, Scheduled Castes, informal workers and low-income households. Supported by the **Omega Forum for Social Impact (OFSI)**, the initiatives combine health awareness and access to basic services with social protection facilitation and women-led livelihood opportunities. In Ramanathapuram, the programme reached **10,413 women** across 13 panchayats and 59 villages, who accessed government schemes worth **₹32.21 crore in benefits**. The programme also screened **5,281 people** for hypertension and diabetes and linked those identified with health conditions to Primary Health Centres (PHCs) for continued care. In Virudhunagar, the initiative reached **2,420 women** and supported livelihood pathways such as goat rearing, collective marketing and enterprise development. Across both locations, Unified Help Desks, door-to-door outreach, and partnerships with Panchayats and Self-Help Groups are helping integrate health, social protection and livelihood support while strengthening local systems and capacities for longer-term sustainability.

Strengthening Health Security for Vulnerable Tribal Communities in the North-East

Social Protection *Primary Health* *Health Systems Strengthening*

Across **Nagaland, Mizoram, Meghalaya and Tripura**, Swasti's partnership with **Tata AIG** combined community-based primary healthcare with social protection to reduce both **geographic and financial barriers to care** for vulnerable tribal communities. Through Mobile Medical Units (MMUs), community outreach and facilitation of government health insurance schemes, the programme brought screening, diagnosis and health protection closer to communities in underserved and hard-to-reach areas. These interventions collectively reached **1,93,109 community members**.

The MMU intervention reached **19,628 people**, with **10,637 women** and **19,289 people from Scheduled Caste and Scheduled Tribe communities** among those reached. Screenings identified conditions including **diabetes, hypertension, anaemia and tuberculosis**, enabling earlier diagnosis and linkage to care.

The partnership also strengthened the **health system infrastructure** needed to deliver care closer to communities. In **Mon, Nagaland**, support for blood-bank equipment enabled a fully operational blood bank that facilitated **144 blood donations and 144 life-saving transfusions**, strengthening emergency, maternal and trauma care. In **Mamit, Mizoram**, blood-bank refrigerators enabled decentralised and safe blood storage at peripheral facilities, while portable X-ray machines in Mamit and Dhalai strengthened diagnostic capacity at the primary healthcare level and reduced the need for patients to travel to distant hospitals.

Alongside healthcare delivery, the programme strengthened financial protection for healthcare across Tripura, Mizoram and Meghalaya. Through door-to-door facilitation, community camps, health screening sites and Social Protection Help Desks, 17,099 people were supported to navigate and access government health and social protection schemes. This included enrolment and facilitation under Ayushman Bharat, Chief Minister Jan Arogya Yojana, e-Shram and other relevant schemes, helping vulnerable households reduce the financial barriers associated with accessing healthcare.

Together, the work demonstrates a health-security approach that connects primary care, social protection and public health infrastructure, bringing services closer to communities while strengthening their ability to access and afford care when they need it.

SETU (Social Protection Coalition)

Social Protection *Community Systems Strengthening*

Through **SETU (Social Protection Coalition)**, Swasti works with civil society organisations, research institutions and grassroots actors to strengthen social protection systems and support their effective reach to vulnerable communities. The programme focuses on strengthening awareness, access and last-mile delivery of existing schemes, improving coordination across stakeholders, and bringing community experiences and evidence into programme design and implementation. By connecting grassroots organisations with institutions and systems actors, SETU supports inclusive and responsive approaches to social protection that complement existing government efforts and strengthen health, financial and social resilience.

In 2025, SETU, in partnership with Swasti and coalition partners and with support from the Silicon Valley Community Foundation (SVCF), launched the State of Social Protection in India, 2025. Drawing on consultations with **77 civil society organisations** and networks across Assam, Rajasthan, Tamil Nadu and Delhi, and more than 30 case studies from 27 organisations, the report documented experiences of accessing and delivering social protection programmes, alongside community-led approaches that can support their reach and effectiveness. The work provides a shared evidence base for strengthening implementation, encouraging learning across stakeholders, and supporting the continued evolution of social protection programmes at state and national levels.

Bringing Government Entitlements Closer to Vulnerable Communities

Social Protection *Gender Equity*

In **Bahraich, Uttar Pradesh**, Swasti strengthened access to government schemes and entitlements through Unified Help Desks, helping vulnerable communities navigate services related to **health, livelihoods, agriculture, financial inclusion and social security**. Supported by the **Aga Khan Foundation**, the programme reached **46,259 people** and organised 125 awareness camps during the reporting period. The initiative facilitated access to more than **13,000 skill development and financial inclusion benefits**, supported **16,020 women** to access livelihood, health, pension and other schemes, and enrolled 500 women entrepreneurs under the PM Vishwakarma scheme. Engagement with Panchayat-level functionaries and government departments further strengthened local ownership and the responsiveness of social protection delivery.



Launch of the State of Social Protection in India 2025 Report with SETU coalition partners.

CLIMATE & HEALTH

Swasti's Climate & Health work focuses on building climate-resilient health systems by addressing the health impacts of extreme heat, air quality and other environmental vulnerabilities. The approach brings together frontline preparedness, digital tools, evidence generation and district-level systems strengthening to support governments and communities to prepare for and respond to emerging health risks.

Air Quality Warning System: Early warnings for healthier communities

Climate X Health *Primary Health* *Welltech*

In **Punjab**, Swasti, with support of Clean Air Fund, generated evidence on air quality risk pathways affecting **vulnerable women, infants and children**, adding to the evidence base through early warning systems on environmental determinants of health. Together, the work spanned four interconnected areas: **community and frontline climate preparedness, district heat action planning, digital tools for climate-health preparedness, and evidence generation on air quality and health**.

Working across Amritsar, Ludhiana, Jalandhar and Dera Bassi, the project has reached **715 pregnant women, infants and children** so far and leveraged air quality and health data to enable them to better manage air quality related risks. This work was made possible with strategic collaboration with the Government of Punjab.



Punjab Air Quality and Health Risk Response Pathway Initiaitve.



Participants at the Air Quality and Health Learning Event convened by Swasti and SPCCHH, Government of Punjab.

Building Frontline Capacity for Heat-Health Resilience

Climate X Health *Primary Health* *Health Systems Strengthening*

With support from the **Silicon Valley Community Foundation (SVCF)**, Swasti strengthened the Climate Care Champions Program (CCCP) in **Ananthapuramu, Andhra Pradesh** through a Training of Trainers approach. **90 Community Health Officers, Auxiliary Nurse Midwives and Medical Officers** were trained to recognise heat-related illness, identify vulnerable populations, provide appropriate first response, and support households in preparing for extreme heat. Through cascade training, these trainers subsequently trained **2,356 frontline workers** across Ananthapuramu, enabling them to extend heat-health preparedness and response to **44,926 households**.

Climate Care Champions: Strengthening Heat-Health Preparedness at Scale

Climate X Health *Primary Health* *Health Systems Strengthening*

With support from the **Elsevier Foundation**, the **Climate Care Champions Program (CCCP)** strengthened heat-health preparedness across **Ananthapuramu district, Andhra Pradesh**, equipping frontline health and community workers to prevent, identify and respond to heat-related illness and support vulnerable communities with timely care and referrals. The programme reached **1,10,695 households**, with **2,266 frontline workers trained** through a district-wide cascade model supported by **90 trainers**.

The programme translated this capacity into action during the heat season, with **8,717 suspected or identified heat-related illness cases recorded** and **5,423 individuals referred to health facilities** by trained frontline workers. For the first time, the programme also enabled systematic recording of heat-related illness beyond heat stroke, helping make the district's heat burden more visible for planning and response.

At the systems level, CCCP supported the development of a **district-wide Heat Action Plan** with government and line departments, clarified frontline roles and referral pathways, and introduced locally relevant job aids and IEC materials to support consistent heat-health counselling. Season-long mentoring and peer learning further helped frontline workers translate training into routine practice.

Winter Preparedness: Protecting Communities from Cold-Related Health Risks

Climate X Health *Primary Health*

With support from **the UK Online Giving Foundation**, Swasti extended its climate-health preparedness work to address **winter and cold-wave risks in North India**, while strengthening community preparedness across different frontline settings. The programme equipped frontline teams and communities with practical guidance on recognising vulnerable populations, preventing cold-related illness, maintaining nutrition and knowing when to seek care. A medically vetted **Winter Preparedness Guide**, developed as a frontline job aid and community resource, helped ensure consistent and actionable messaging. In **Chhattisgarh**, the initiative reached **1,287 farmers across 31 villages**; in **Jodhpur**, 45 frontline health workers were equipped to integrate winter-health messaging into community outreach; and in Mohammadpur, 10 community health workers are positioned to reach 500 households with winter preparedness guidance.

The training also showed positive shifts in frontline preparedness, with participating health workers demonstrating improved knowledge of winter risks, vulnerable groups, danger signs, preventive actions and referral pathways, alongside increased confidence in counselling and supporting high-risk households.

Centres of Strategic Excellence



CENTRES OF STRATEGIC EXCELLENCE

Swasti's Centres of Strategic Excellence bring together capabilities that strengthen the organisation's ability to generate evidence, translate knowledge and influence public health practice. With strategic support from the Silicon Valley Community Foundation (SVCF), the Centre for Evidence to Impact (E2i) and the Centre for Strategic Communications for Public Health (CSCPH) continued to develop their work and capabilities as platforms for evidence generation, knowledge translation and public health communication. Specific initiatives within the Centres were further supported through project-based partnerships and ecosystem collaborations.

CENTRE FOR EVIDENCE TO IMPACT (E2I)

Evidence is most useful when it helps people make better decisions. Swasti's Centre for Evidence to Impact serves as a bridge between research, programme learning and action, bringing together evidence, evaluation and knowledge translation to strengthen public health systems.

During FY 2025–26, the E2i team focused on building evidence around strategic models and using data to better understand health needs and vulnerabilities. It conducted comparative analysis of **Call4Svasth and Climate Care Champions Program**, helping establish evidence on the effectiveness of these interventions. They also developed an **outcome-focused integrated RCH dashboard**, using existing health data to examine ground realities and trends and applying **AI and machine learning to support prospective predictions** for more efficient planning within the RCH department.

Another important area of work was understanding the health impacts of **air quality on vulnerable maternal and child health populations**. Population-level evidence was generated across multiple seasons to examine vulnerabilities and health effects, with the aim of informing an early warning system that goes beyond existing indicators such as the Air Quality Index (AQI).

In the last year, the E2i worked with a diverse group of research and academic partners, including **Oregon State University (OSU), All India Institute of Medical Sciences (AIIMS), SRM University, University of California Los Angeles (UCLA), Catalyst X, Institute of Public Health (IPH), Indian Institute for Public Health (IIPH), Solutionec, St. John's Research Institute (SJRI) and Cervical Cancer Elimination Consortium – India (CCEC-I)**.

The E2i team also helped translate Swasti's evidence and learning into publications and wider professional discourse. During the year, it contributed to publications on ***Barriers to child nutrition in Bengaluru slums: Caregiver insights from the SCOPE strategy*** and ***A Community-Based Mixed-Methods Study: Fish Bycatch Protein Supplementation as a Sustainable Solution for Child Malnutrition in Bengaluru, India***. It also supported *Evidence to Impact: 20 Years of Swasti*, capturing the organisation's evidence, innovation, partnerships and systems change.

This evidence was also taken into wider forums. They presented work on **Healthy Days as a people-centric metric for measuring the effect of CPHC initiatives** and a **KAP study on system readiness for cervical cancer prevention and elimination at scale**, which received a best presenter award. Swasti also contributed to panels on primary healthcare transformation and child obesity, resilient public health systems and climate change/disaster preparedness, One Health for planetary health, and climate change, vaccine acceptance and delivery in South Asia.

Together, this work strengthens Swasti's ability to move from **evidence generation to evidence-informed action**, deepening understanding of what works, identifying emerging health needs and translating data and learning into stronger planning and public health practice.

CENTRE FOR STRATEGIC COMMUNICATIONS FOR PUBLIC HEALTH

Public health knowledge creates impact when it can be understood, shared and acted upon. Swasti's **Centre for Strategic Communications for Public Health (CSCPH)** works at this intersection, using strategic communication, social and behaviour change, knowledge translation, storytelling, digital engagement and public discourse to turn complex evidence and programme learning into accessible narratives and tools.

During FY 2025–26, the Centre delivered **35+ strategic communication, knowledge, digital and branding products** across ecosystem partners. This included, but was not limited to, **8 public health campaigns, 5 knowledge products/playbooks/reports, 4 websites and digital platforms, 7 major events and launches, and 7 branding, media and capacity-building products**.

The work ranged from developing knowledge products to creating platforms and experiences that helped make public health issues more accessible. A key highlight was the launch of **Swad Anusar**, a multi-stakeholder nutrition knowledge product co-created with ecosystem partners to advance evidence-based conversations around nutrition and food systems. The Centre also introduced a **gamified learning course on Asset-Based Narrative**, including an interactive card game, to build capacity for more community-based and solutions-oriented public health communication.

The Centre helped capture and communicate Swasti's own institutional learning through **20 Years of Swasti: Evidence to Impact**, a flagship publication documenting two decades of public health research, evidence, innovation, partnerships, and systems change.

This work was underpinned by a growing ecosystem of partnerships. During the year, CSCPH worked with **15+ partners** across philanthropy, public health, nutrition, social impact and development, including Vijayavahini Foundation, the Cervical Cancer Elimination Consortium (India), IPE Global, Vitamin Angels, ChildFund, Asia Pacific Alliance for Sexual and Reproductive Health and Sesame Workshop.

Together, this work strengthened CSCPH as a **public health knowledge and communication platform**, helping make evidence more accessible, enable learning and knowledge exchange, and support informed action across the public health ecosystem.



A community health worker conducts a health camp using Information, Education, and Communication (IEC) materials.

SPOTLIGHT: SWASTI AT THE WORLD HEALTH SUMMIT REGIONAL MEETING, NEW DELHI 2025

In April 2025, Swasti participated in the World Health Summit Regional Meeting in New Delhi, which brought together more than **5,000 participants from 54 countries** around the theme *Scaling Access to Ensure Health Equity*. The three-day meeting provided a platform for practitioners, institutions and partners to exchange perspectives on health equity, resilience and the future of public health.

Swasti contributed to the meeting through pre-event communications and social media toolkits, as well as by **co-hosting more than nine sessions** in collaboration with the **Asian Development Bank, Gates Foundation, WHO SEARO, UNAIDS and Noora Health**. The sessions explored themes including climate-health adaptation, health systems strengthening and collaborative surveillance, bringing together evidence and experiences from across the sector.

Swasti's participation brought together its experience in **implementation, evidence generation and community-rooted practice**, contributing to wider learning and collaboration around health equity, resilience and systems strengthening.



From Policy to Practice: Climate X Health; BFI, Govt of India - PSA, Govt of Andhra Pradesh,Govt of Tamil Nadu, Swasti.



From Wastewater to Action: Novel Approaches to enhance traditional Surveillance for targeted Public Health Interventions (BMGF, WHO SEARO, Swasti)



Inauguration Ceremony hosted by Dr. Angela Chaudhuri, Chief Catalyst, Swasti and Pradeep Kakkattil, Director, Programme Partnerships and Fundraising, UNAIDS



Collaborative Surveillance for Global Health Security (WHO SEARO, BMGF)



Shrirupa Sengupta speaking at Human-Centered Design Panel hosted by Noora Health with speakers from Dalberg Design, Khushi Baby, Noora Health



Leaving No One Behind; Ending Inequities & ending AIDS for a Sustainable Future in Asia (UNAIDS) featuring Alka Narang

CLOSING NOTE: FROM THE INCOMING CEOs



In Closing: From Dr. Sudha Chandrashekar

At the heart of public health is a simple question: how can we enable more people to live healthier lives, for longer?

For me, this is at the heart of Swasti's next chapter. Our ambition to add 100 million Healthy Days to the lives of vulnerable communities asks us to think differently about how health is created, measured and sustained and how what works can travel further.

Swasti brings together deep experience across primary healthcare, climate and health, social protection, workforce wellbeing and health security, grounded in evidence and implementation. Our growing partnerships with governments across Andhra Pradesh, Kerala, Meghalaya, Odisha, Tamil Nadu, Karnataka, and other states are creating opportunities to strengthen policies and health systems, while taking effective approaches to greater scale and replication.

As we move forward, our focus will be on demonstrating what improves health, what creates value, and what can be sustained and scaled equitably.

I am grateful to Dr. Angela Chaudhuri for the foundations she has built and for the opportunity to take this work forward.

Together, we will turn these strengths into greater and more durable health gains, measured not simply by what we do, but by the Healthy Days we create and the lives we improve.

Prof. Dr. Sudha Chandrashekar
CEO, Swasti – The Health Catalyst



In Closing: From Shrirupa Sengupta

Across primary healthcare, social protection, climate and health, workforce wellbeing and health security, we know the aspects that influence people's wellbeing changes over time-and the systems around them must be able to respond.

As Sudha and I step into the role of CEOs, that learning shapes our next chapter. Our ambition remains 100 million Healthy Days.

Swasti is a partner for wellbeing over time: making people-centred comprehensive primary healthcare a reality, responding to Climate and One Health challenges, and strengthening institutions that affect the health of millions.

In a changing world, this will require us to keep learning, adapting and finding ways for what works to travel further.

Having been part of the Swasti family for a decade, I take on this responsibility with respect for what has been built and deep faith in our colleagues, communities and partners.

Together, we will keep building from here.

Wishing you wellbeing.

Always,
Shri

Shrirupa Sengupta
CEO, Swasti – The Health Catalyst

Financial Highlights FY 25-26

Swasti
No. 25, AECS Layout, Ashwathnagar, Bengaluru - 560 094

Balance Sheet

Particulars	Note	Amt in (₹) as at 31st Mar 2026	Amt in (₹) as at 31st Mar 2025
SOURCE OF FUNDS			
Restricted funds			
Earmarked funds	2	19,91,51,492	9,88,58,794
Designated Funds	3		
Employee benefit funds	3.1	2,37,08,208	2,00,03,939
General operating fund	3.2	5,72,43,237	5,89,97,128
Assets fund	3.3	79,64,033	93,78,140
Earmarked funds	3.4	-	20,00,00,000
Unrestricted funds			
General fund	4	20,35,02,887	10,06,87,131
TOTAL		**49,15,69,857**	**48,79,25,132**
APPLICATION OF FUNDS			
Fixed Assets	5		
Tangible assets	5A	52,46,753	54,00,002
Intangible assets	5B	27,17,283	39,78,138
Investments			
Long term investments	6	40,52,83,088	31,89,65,129
Current investments		-	10,72,41,795
Deposits		19,73,269	19,21,000
Current assets	7	8,82,61,969	6,90,98,837
TOTAL ASSETS	(A)	**50,34,82,362**	**50,66,04,901**
Liabilities			
Current liabilities	8	1,19,12,505	1,86,79,769
TOTAL LIABILITIES	(B)	**1,19,12,505**	**1,86,79,769**
NET ASSETS	(A) - (B)	**49,15,69,857**	**48,79,25,132**

Significant Accounting Policies, Notes referred to above form an integral part of Balance Sheet 1

This is the Balance Sheet referred to in our report of even date
For R V K S And Associates
Chartered Accountants
FRN: 008572S

Venugopal C
Partner
Membership No. : 226247

Place: Bengaluru
Date: 11/09/2026

For Swasti

R.Thangavelu
Secretary

Place: Bengaluru
Date: 08.09.2026

For Swasti

Shrirupa Sengupta
Treasurer

Swasti Bangalore Health Catalyst

Swasti
No. 25, AECS Layout, Ashwathnagar, Bengaluru - 560 094

Statement of Income and Expenditure for the year ended March 31, 2026

Particulars	Note	Amt in (₹) for the year ended 31st Mar 2026	Amt in (₹) for the year ended 31st Mar 2025
INCOME			
Restricted			
Earmarked Funds	9	23,19,78,774	42,32,76,154
Unrestricted			
Donations		14,52,261	55,83,155
Bank interest	10	2,82,01,849	3,70,17,922
Other income	11	6,26,818	27,88,959
TOTAL		**26,22,59,702**	**46,86,66,190**
EXPENDITURE			
Restricted			
Grant expenditure	9	21,70,87,598	38,89,15,104
Unrestricted			
Invest for wellness (i4We) & Other health programmes	12	8,93,56,507	9,80,22,743
Establishment and other expenses			
Administrative expenses	13	2,61,14,979	2,93,58,449
Expenses on employment	14	2,62,51,710	2,03,92,735
Depreciation	5	23,79,047	32,58,615
Other expenses	15	14,22,104	17,52,055
TOTAL		**36,26,11,945**	**54,16,99,701**
Excess of Expenditure Over Income - Surplus / (Deficit)		-10,03,52,243	-7,30,33,511
Balance transferred to General Fund		-10,03,52,243	-7,30,33,511

Significant Accounting Policies, Notes referred to above form an integral part of the statement of Income & Expenditure

This is the Statement of Income and Expenditure referred to in our report of even dated
For R V K S And Associates
Chartered Accountants
FRN: 008572S

R V K S AND ASSOCIATES BANGALORE CHARTERED ACCOUNTANTS 11/09/2026

Venugopal C
Partner

Place: Bengaluru
Date: 11/09/2026

For Swasti

R.Thangavelu
Secretary

Place: Bengaluru
Date: 08.09.2026

For Swasti

Shrirupa Sengupta
Treasurer

Swasti Bangalore Health Catalyst

GOVERNANCE FY 25-26: SWASTI'S GENERAL BODY MEMBERS

Name	Constituency	Role in the Society
Dr. Jacob John	Independent Expert	Chairperson*
Alka Narang	Independent Expert	Vice Chairperson*
Thangavelu Ramaswamy ("Thanga")	Staff	Secretary*
Shrirupa Sengupta	Staff	Treasurer*
Krishnamoorthy Kuntini	Staff	CFO*
Dr. Angela Chaudhuri	Staff	Chief Catalyst*
Shiv Kumar	Founder	Chief Mentor*
Narayanan Raghunathan	Founder	Mentor*
Packianathan Rajarethinam	Founder	Member
Masuvathi Ramaswamy Chandrashekaran Ravi	Founder	Member
Siddhi Mankad	Founder	Member
Jonnalagadda Venkata Rama Prasada Rao	Independent Expert	Member
Nandlal Narayanan	Independent Expert	Member
Prerna Mukharya	Independent Expert	Member
Gayathri Vasudevan	Independent Expert	Member
Shama Karkal	Staff	Member*
Joseph Julian K. George	Staff	Member
Shaonli Chakraborty	Staff	Member
Kallan Gowda	Staff	Member
Hareesha B. S.	Staff	Member
Shankar A. G.	Staff	Member

**Members of Swasti's Governing Board*

Swasti, The Health Catalyst
No. 25, Raghavendra Nilaya, AECS Layout, Ashwathnagar,
Bengaluru, Karnataka 560 094.
Phone: +91-80-23419616
Email: hello@swasti.org
www.swasti.org

A not-for-profit society, Swasti is registered under the Karnataka Societies Registration Act 1960 (Registration No.134/2004-05).

Swasti has the following regulatory approvals - Section 12A and 80G of Income Tax Act, 1961, Registration of the Entities for undertaking CSR Activities under Companies (CSR Policy), Amendment Rules, 2021.

Karnataka State Professional Tax Act, 1976

NGO Darpan ID No. KA/2009/0011103

U/s. 1 (4) Employee Provident Fund and Miscellaneous Provisions Act, 1985

Employees State Insurance Act, 1948 and the Foreign Contribution (Regulation) Act, 2010 - which allows it to accept and utilise foreign contributions.
The FCRA registration has been renewed and is valid till December, 2026.

Swasti has Special Consultative Status with the United Nations Economic and Social Council (ECOSOC).

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