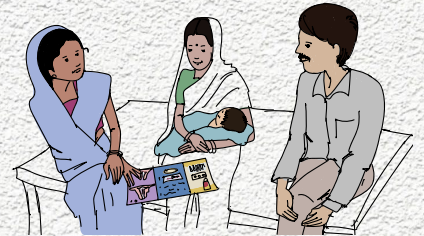
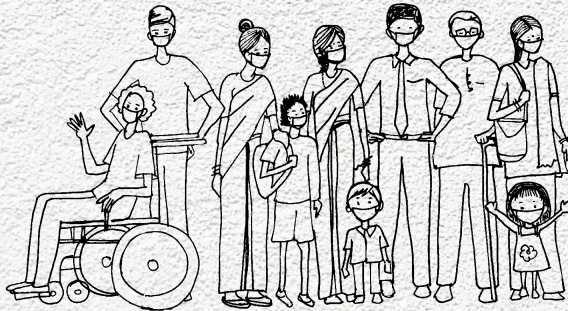




Annual Report 2024-25

*Everyday Wellbeing for Everyone
Toward 100 Million Healthy Days*

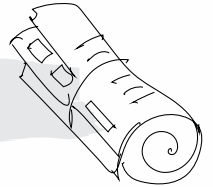


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Letter from the Desk of the Chief Catalyst



Resilience is a Choice

To our partners, colleagues, and friends,
Let's be clear: the world's focus has shifted. Official Development Assistance is tightening. The singular global fight to end AIDS has faded from the headlines, threatening to leave key populations behind. Meanwhile, the climate crisis is no longer a future threat—it is a present-day multiplier of health and economic vulnerability, making last-mile delivery more dangerous and complex.

In this landscape of receding priorities and increasing risk, the easy choice would be to retract. Instead, we doubled down.

Why? Because the women in sex work we partner with still face violence and stigma. Because fishing and farming communities are watching their livelihoods vanish to warming seas and erratic rains. Because a health shock should not plunge a family into generational poverty.

This report details how we turned this defiance into action. It is a record of our choice to deepen our work where it matters most, not where it is easiest.

We integrated relentlessly, weaving health safeguards into social protection, livelihoods, and climate adaptation. Our Invest4Wellness clusters are now proof that community-owned models can deliver dignity and health security, even without traditional aid flows.

We deployed technology as a shield. Our Precision Health Platform evolved into an AI-powered early-warning system, giving communities the foresight to protect themselves from outbreaks and extreme heat.

We refused to abandon our commitments. Our work with the Taaras Coalition and sex workers continued unabated, proving that our resolve does not waver with shifting donor agendas.

The result? We created **nearly 1 million healthy days¹** for those who need them most, directly reaching 6,97,354 people and further benefiting 12,43,794 others indirectly. That translates into ₹100 crore of income saved for communities. This number is our answer to the polycrisis, our evidence that resilience is a choice, and we are choosing to build it every day.

The work ahead demands more courage, more innovation, and deeper solidarity. We step into it with a clear-eyed view of the challenges and the unshakable belief that a healthier, more equitable future is possible.

This is not the end of the story. It is a critical new chapter. We invite you to read it and join us in writing the next one.

With warmth and solidarity,

Dr Angela Chaudhuri
CEO

¹ Healthy Days is a metric that measures the number of days individuals perceive themselves as healthy—physically, mentally, and socially. It serves as a holistic indicator of wellbeing beyond traditional disease-based measures. To know more, visit <https://swasti.org/100-million>

Executive Summary:

Anchoring Health, Equity, and Climate Resilience | FY 2024-25

The past year unfolded against a backdrop of extremes—longer heatwaves, sudden floods, and outbreaks that reminded us how fragile health systems can feel when climate and disease collide. For many of the families we walk alongside, these weren't headlines. They were daily interruptions—missed wages, closed schools, and choices between food and medicine.

The answer was not a single programme but an approach: **resilience in every home and in every community**. That meant strengthening primary health, linking it to social and financial protection, and embedding climate preparedness into the routines of communities, cities, and states. The evidence we gathered on the ground from our various interventions gave us insights that guided the impact we were able to create. This journey from evidence to impact laid the foundation of our approach to community resilience.

Organisationally, Swasti's vision of adding 100 million healthy days to the lives of the most vulnerable is met through a layered pathway where each element feeds into the next, creating a cycle of thought, action, and transformation. At the core lies Thought, Action, Transformation—which translates into strategies that bring together innovations through action research and implementation, collaborative platforms, thought leadership, scalable health solutions, and policy engagements. Transformation is then advanced by partnering communities in building resilience that enables scale and continuity beyond projects. Importantly, this is not limited to systems and structures alone; transformation also means community leaders and system actors themselves becoming champions, ensuring that resilience is owned, sustained, and multiplied from within.

In Bengaluru and Gurugram, **Invest4Wellness (i4We)** clusters showed how families thrive when health care, insurance, savings, and entitlements are offered through institutions they already trust.

In cities and states like Meghalaya, Ananthapuramu (Andhra Pradesh) and Tamil Nadu, our **Precision Health Platform** matured into an early warning backbone. Climate, weather and health signals, media scans, and GIS maps became actionable intelligence—giving administrators time to prepare, health facilities time to stock up, and communities time to protect themselves. We strengthened this further with **AI integration**, delivering timely, actionable insights for decision-makers and communities alike. Along the coast, from Puri and Balasore in Odisha to heat-prone districts in Bihar and Tamil Nadu, frontline workers were trained as **Climate Care Champions**. They carried messages about safe water, early signs of illness, and heat preparedness into homes that might otherwise have been left exposed.

Resilience, of course, is not only about health. Through **Walmart Vridhhi**, over fifty thousand small and medium enterprises gained digital skills, export readiness, and market linkages—proof that dignified livelihoods buffer families against health shocks. And in the **Amazon-supported i4We cluster**, we surpassed our planned reach, showing that enterprise-linked health can extend deeper care pathways for workers and their families.

Across all of this, the common thread was partnership: local leaders converting surveillance into action, MSMEs opening doors for worker wellbeing, and governments aligning district plans with SDG-linked indicators. In Bhopal, this took the form of a **Healthy City initiative** shaped not only by data but by community participation.

Together, these efforts translated into what we call *healthy days*—days when people could learn, earn, care, and contribute without the weight of illness or crisis. Our North Star remains the same: **100 million healthy days for those who need them most**.



As we look ahead, the lesson of this year is clear: resilience is not abstract. It is a child staying in school during a heatwave because her community had early warnings. It is a mother able to work with confidence because her factory offered both fair wages and health protection. It is a neighbourhood recovering faster from floods because frontline champions had prepared drills and entitlements in advance.

This is what it means to anchor health, equity, and climate resilience. And this is the journey we invite you to continue with us.

Our People

The year 2024-25 was special to us. In 2024-25, Swasti marked two decades of impact and at the heart of this milestone were our people. Our 146 colleagues, working across four interconnected domains, carried forward our mission with commitment, care and courage.

The future of our organization rests on how deeply we invest in our people's growth. Over the past year, learning took many forms, like structured training and leadership programs, and peer learning and cohort-based learning initiatives building trust, collaboration and shared responsibility. Knowledge-sharing platforms and mentoring helped ensure that insights and experiences were not only captured but also transformed into collective wisdom. Together, these approaches nurtured critical thinking and adaptability, qualities that enable us to meet challenges with resilience.

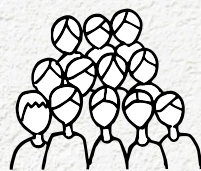
Equally important has been our focus on wellbeing. By fostering a supportive and collaborative work environment, we create spaces for our people to learn, contribute meaningfully, and take pride in their work, while also caring for their personal growth and balance, and emotional wellbeing.

As we step into another year of growth and impact, we remain committed to strengthening this culture of continuous learning and holistic wellbeing, ensuring that our people, and Swasti as an organization, continue to thrive.



Evidence2Impact

.....From data to decisions



Recognizing its catalytic powers, the evidence from our work was not left on shelves; it was shaped into tools for change. **The Healthy Days modelling** illuminated urban and workplace health under Comprehensive Primary Health Care. Epidemiological modelling in Andhra Pradesh linked climate and maternal health, while the national series highlighted the primary health needs of India's most vulnerable populations.

Primary research deepened this picture: communities and providers in Jewargi opened pathways to create evidence-driven models for community-based cervical cancer screening; farmers and fisherfolk in Rajasthan and Odisha revealed how innovations in health like telecare could bridge distances and inequities; and heat resilience studies in Ananthapur mapped the frontline of climate adaptation.

From insights came impact. Publications on wastewater-based public health surveillance, child nutrition, fish protein supplementation, cervical cancer, and menstrual health reframed knowledge. Further, submitted work on peer-assisted COVID self-testing and community-led HIV monitoring pushed policy frontiers, while pipeline studies - from Climate Care Champions to vaccine inequity across South-East Asia - carried the promise of resilient, equitable healthcare systems.

Each dataset, each study, and each publication in the year 2024-25 moved evidence closer to impact, towards a world where communities, providers, and policymakers act together for healthier, more resilient futures.



1. Evidence Validation

- Completed healthy days (HD) modelling and estimation for urban and workplace health programs under the CPHC initiatives.
- Comprehensive evidence synthesis of strategic programs - Call4Svsth and Climate Care Champions
- Epidemiological modelling to establish the climate health interaction with a focus on maternal health, service delivery, and infectious diseases in collaboration with the Govt. of Andhra Pradesh.
- National series on the comprehensive primary health care needs and status of targeted vulnerable groups in India.
- Primary research studies to:
 - Assess knowledge, attitudes, and practices of communities and providers towards cervical cancer and screening in Jewargi, Karnataka.
 - Explore health care access, health-seeking behaviors, and willingness to adopt and invest in innovations like telecare (C4S) among farmers and fisherfolk in Rajasthan and Odisha.
 - Estimate the heat resilience of communities and providers in selected mandals of Ananthapur, Andhra Pradesh.

2. Publications:

- Making Waves: A justice-centred framework for wastewater-based public health surveillance** (<https://doi.org/10.1016/j.watres.2024.122747>)

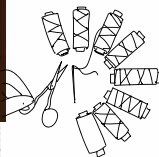
Finding: Wastewater-based public health surveillance must be anchored in principles of justice to effectively promote global access to safe water and equitable health outcomes.

- Barriers to child nutrition in Bengaluru slums: Caregiver insights from the SCOPE strategy** (<https://doi.org/10.1016/j.evalprogplan.2025.102612>)

Findings: The study calls for integrated, community-based programs that prioritize protein access, child-friendly engagement, and caregiver empowerment to sustainably tackle child undernutrition in urban slums and low-resource settings.

- A Community-Based Mixed-Methods Study: Fish Bycatch Protein Supplementation as a Sustainable Solution for Child Malnutrition in Bengaluru, India** (<https://doi.org/10.3390/nu17111751>)

Findings: Fish bycatch protein supplementation significantly improved growth, nutrition, and cognitive outcomes among malnourished children in Bengaluru's slums, offering a sustainable solution to child undernutrition.



2024-25 Snapshot: Our Year in Review

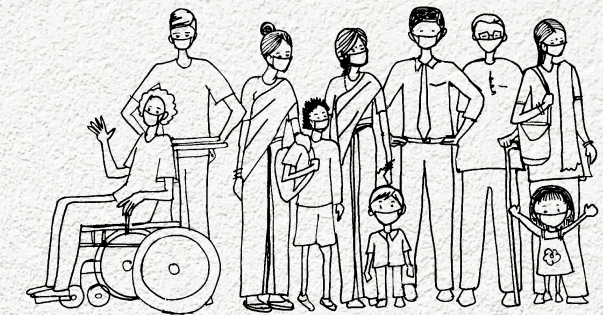
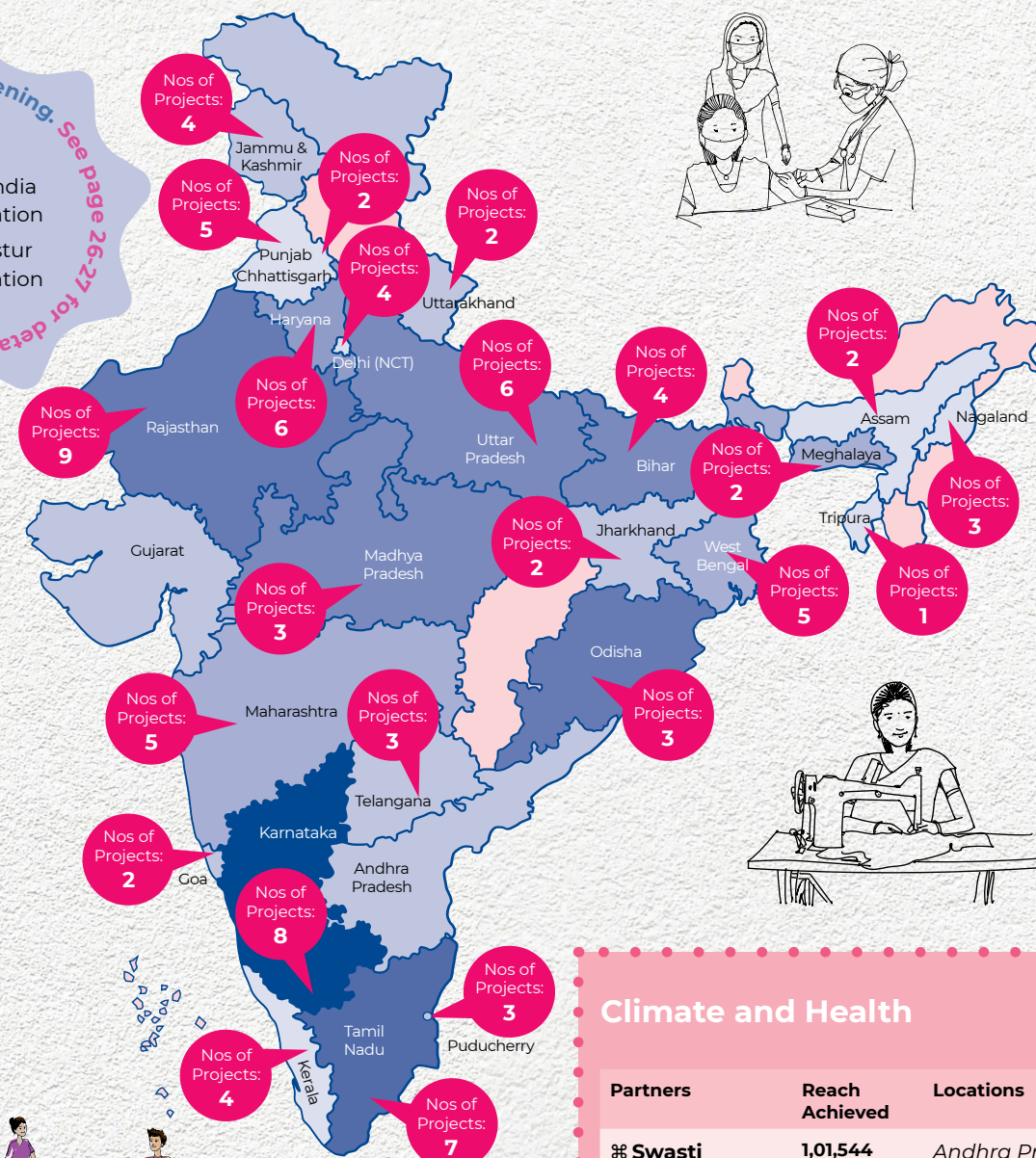


Health Systems Strengthening

Partners	Reach Achieved	Locations
Merck Sharp & Dohme Corp, Indchemie Health Specialist, Arisma Charitable Trust	2,02,325	Pan-India
Skoll Foundation	4 cities	
Swiss Philanthropy Foundation	10,800	
Foundation For Innovative New Diagnostics (FIND)	500	

Support to Health Systems Strengthening. See page 26-27 for details

- British Asian India Foundation
- KM Dastur Foundation



Social Protection

Partners	Reach Achieved	Locations
Professional Assistance for Development Action (PRADAN)	19,673	
Aga Khan Foundation	40,758	Andhra Pradesh, Bihar, Delhi, Haryana, Karnataka, Kerala, Maharashtra, Nagaland, Rajasthan, Tamil Nadu and Uttar Pradesh
Watershed Organization Trust	45,853	
Tata AIG	2,32,755	
Tata AIG General Insurance Company Limited	4,844	
Nasscom Foundation	40,029	
Rotary Club of Bangalore Midtown Charitable Trust	23,464	



Invest4Wellness (Primary Health)

Partners	Reach Achieved	Locations
Amazon.com Services LLC	1,617	Andhra Pradesh, Bihar, Delhi, Haryana, Karnataka, Kerala, Madhya Pradesh, Maharashtra, Nagaland, Odisha, Puducherry, Punjab, Rajasthan, Tamil Nadu, Uttar Pradesh, West Bengal
Foundation De France	450	
Lifestyle International Private Limited	53,697	
Swasti	99,091	
Deloitte	15,969	



Climate and Health

Partners	Reach Achieved	Locations
Swasti	1,01,544	Andhra Pradesh, Haryana, Karnataka, Punjab, Rajasthan, Tamil Nadu and Telangana.



Sexual and Reproductive Health

Partners	Reach Achieved	Locations
Swasti	1,07,556	Andhra Pradesh, Karnataka, Kerala, Maharashtra, Tamil Nadu, and Telangana.
GIVE		
Alvarez and Marshall Private Limited		

Workforce Wellbeing

Partners	Reach Achieved	Locations
ITX Services SA	11,098	Uttar Pradesh, Haryana, Gujarat, Tamil Nadu, Punjab



Multi-domain Projects

Partners	Reach Achieved	Locations
Walmart Vriddhi	18,700	Pan-India



Swasti's healthy days calculation follows a workbook method that tracks health conditions that our communities are living with. In FY 24-25, we added nearly 1 million (approximately 99.01 lakh) healthy days to the lives of our communities. We do this in our Primary Health program.

Our Communities

Women in
Sex Work

Urban Poor

Rural Poor

Factory
Workers

At-risk
Gender Non-
Binary

At-risk
Adolescents

Migrant and
Informal
Workers

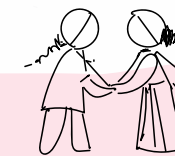
PLHIV

Healthcare
and Frontline
Workers

Fisherfolk,
Dairy and
Small
Farmers

Other
Climate
Vulnerable
Populations

Highlights

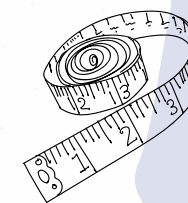


Community Action Collab (CAC) is a backbone platform that strengthens community resilience by orchestrating coalitions, driving innovation, and coordinating emergency responses. In FY 2024–25, CAC supported **6 active coalitions**, provided support to **111,000 people** through disaster response, and enabled over 0.2 million service instances this year, bringing the cumulative service instances to **3.8 million across health, social protection, and livelihoods**. Through its Impact Canvas initiative, CAC facilitated people-first innovations such as Anaemia Level Up and Zyenika Inclusive Fashion, preparing them for real-world piloting and scale. By connecting 400+ members across 34 states and UTs, CAC continues to prove that systems change is possible when collaboration becomes infrastructure, scaling resilience for millions while shaping policy, practice, and community action.

The domains of health, livelihoods, climate, and social protection are deeply interconnected. That is why our focus has always been on collaboration and a shared mission.

Our role as a collaborative has never been more important, bringing together small grassroots organisations, national-level technical institutes, government and private allies, and funders to solve problems collectively, each playing their part. This is not easy work, but it is necessary. It requires attention and investment, because collaboration and partnership are not just approaches, they are the future of how the social sector must respond to complex challenges.

Swasti's flagship program, **Invest for Wellness (i4We)**, reimagines primary health care beyond conventional medical services. It places people at the center of care-moving from reactive treatment to a comprehensive approach that integrates prevention, early detection, treatment, and health insurance ensuring coordinated and continuum of care. By addressing the complete spectrum of care, i4We not only improves health outcomes but also protects families from catastrophic health expenditures. In FY 2024-2025 i4We deepened a model of care that is community-owned and invested, linking primary health with social protection and cooperative finance-proving that dignity and design go hand in hand. Swasti supported community institutions in shaping i4We to become an enterprise platform for communities to access primary, preventive, and promotive health care at the last mile. Also the i4We cluster program that operated in workplaces, with a Call4Svasth layering for families supported by Amazon, saw an outreach to close to 2000 supply chain workers and their families (SDG 3, SDG 10).





The **Precision Health** Platform matured into an early warning backbone, giving communities and local systems the power of foresight and informed action. In FY 2024-2025, it expanded to an additional four locations, making it a **total of nine locations**. It provided technical assistance to state and district governments to strengthen and build the early warning backbones of Meghalaya state towards One Health, Ananathpuramu (Andhra Pradesh) towards heat and typhoid, Tamil Nadu towards scrub typhus. The Precision Health Platform also worked towards supplementing vaccination and local governance this year. The platform's true power to turn complex environmental and public health signals into hyper-local, time-sensitive, and community-driven action will soon be utilised for Air Pollution.

Multi-domain Project: Our work with MSMEs, through **Walmart Vriddhi**, expanded dignified livelihoods and economic resilience-reminding us that wellbeing is as much about earning and enterprise as it is about health (SDG 8, SDG 9).

Launched in December 2019, the Vriddhi program set out to equip Indian MSMEs to become supply chain-ready for both local and global markets. Initially designed as cluster-based training, it rapidly adapted during the pandemic into a digital-first model, ensuring that even during crisis, small businesses could continue learning, sustaining incomes, and contributing to local economies across 200+ cities.

Since then, over **70,000 MSMEs** have engaged in self-paced learning, with **15,000 sellers onboarded on Flipkart Marketplace**. Beyond business growth, the program has supported **12,000 women entrepreneurs** and helped build a more resilient MSME ecosystem. For many enterprises, Vriddhi marked their first step into structured e-commerce, unlocking visibility, brand recognition, and wider customer reach.

The program's impact has been significant:

- ❖ **Knowledge & Skills:** 64% reported better knowledge of digital selling; 58% gained confidence in managing their businesses.
- ❖ **Income & Resilience:** Nearly half reported increased annual sales, with over half of these seeing 20–30% growth. 36% improved profitability, while many reduced costs – directly strengthening household income and long-term business survival.
- ❖ **Jobs & Community Strength:** More than one-third added new sales channels, and one in five expanded their workforce, showing how enterprise resilience translates into new jobs and stronger local economies.

The Vriddhi journey demonstrates that when training, mentorship, digital tools, and market access converge, MSMEs can scale with confidence and generate sustainable livelihoods and withstand economic shocks. For many, it has been more than a learning program – it has been a lifeline to build resilience, create opportunities, and thrive in India's digital economy.



The Year That Was In...



...People Centred Comprehensive Primary Health Care

We lean into the simple idea that **health should not be something people travel far for, or postpone until it becomes severe**. It should live where they live, and work where they work.

Everyday wellbeing for everyone is thus strengthened through interconnected models that meet people where they live and work.

Invest4Wellness (i4We) integrates affordable primary care with addressing social determinants of health such as social protection and financial inclusion, making wellbeing sustainable through trusted community health workers and institutions. **Health@Work** embeds health into workplaces, ensuring workers find care, psycho-social support, and protection in the very settings where they earn their livelihoods. **Health@Work** embeds health into workplaces, ensuring workers find care, psycho-social support, and protection in the very settings where they earn their livelihoods. The **Health@Work** programme with Auchan brought this ethos into production settings in Karur, Tirupur, Bangalore, and Delhi- showing how wellbeing can become part of everyday workplace design. **Happiness4All**

(H4All) extends this to supply chains, as seen in partnerships like Inditex in Noida, touching thousands of workers and families with holistic wellbeing anchored in dignity and happiness. Complementing these, **Call4Svasth** offers a “phygital” bridge- a helpline of nurses, counsellors, and social protection facilitators so that access is always within reach, even by phone.

Our efforts went beyond direct implementation. It used a collaborative approach, leveraging each model's strength in order to amplify scale and deepen impact, rather than doing it in silos.

Together, these reflect Swasti's philosophy of people-centred comprehensive primary health

care: **building systems around people, not just diseases**. This means co-creating prevention, treatment, and protection with communities and ensuring that resilience is lived daily, in homes, factories, and neighbourhoods.

Through our models-Invest4Wellness, Health@Work, and the Happiness4All model- and with the layered support of Call4Svasth, we bring together clinics, counselors, and navigation so that care is not fragmented. What emerged was not a project map, but a fabric of access, in ways that fit their lives.

The financial year FY24-25 saw us extend our telecare services across Karnataka, Rajasthan, Madhya Pradesh, Tamil Nadu, West-Bengal and Odisha-logging 2,034 call instances. While the figures reflect call episodes rather than unique users, they show how counsellors, nurses, and navigators are becoming a dependable first point of contact for both CBO members and i4We families. By blending helpline support with local partners, Call4Svasth is turning remote advice into timely, practical care.

Instrumental and intentional partnerships carried this vision forward. With **Amazon.com** Services LLC, our i4We clusters in Karnataka and Tamil Nadu exceeded their target – reaching over 1,600 people against a projection of 1,500. In addition, Swasti's partnership with Lifestyle extended the Primary Health Care program to 53,697 people across i4We locations

in Karnataka, Tamil Nadu, Rajasthan, Punjab, and West Bengal. Interventions included Non-Communicable Disease (NCD) management, vision and oral health screenings, and telecare services, delivered at both factory and community levels.

Urban clusters in Bangalore and Gurgaon, supported by donations, reminded us that resilience is built carefully, in partnership with communities, over time. Although some exceeded projections while some fell short, each left behind systems that will outlast the reporting cycle.

For communities, good health is inseparable from good nutrition. Evidence shows that when **nutrition** counselling, supplementation, and **behaviour change** support are embedded within primary health care, families experience lasting improvements in diet, maternal and child outcomes, and overall wellbeing. Swasti brings this insight to practice by making nutrition part of everyday care. At the frontlines, community health workers are supported to integrate growth monitoring, micronutrient supplementation, and nutrition education into routine services, ensuring families don't have to navigate parallel systems.

Our commitment to evidence also guides innovation. In collaboration with **Oregon State University (OSU)**, we explored the potential of fish **protein supplementation** to address malnutrition. This research strengthens our understanding of how locally available, culturally appropriate nutrition solutions can be woven into primary care.

We linked nutrition, livelihoods, and health-looking at people and ecosystems together. Our study saw us engage deeply with 150 participants (plus family members) over 90 days for us to understand fish-based protein's role in diets and health behaviours.

This people-centred approach treats food and nourishment as fundamental to health, while linking households to both preventive and curative care. By doing so, we address not just illness, but the root causes of poor health, enabling communities to thrive with dignity and everyday wellbeing.

We also began blending models: digital navigation alongside community-owned health care in Madhya Pradesh and Rajasthan with **Swiss Re**; workplace health services with **Auchan** and **Fondation De France** in Bangalore, Karur, Tirupur, and Delhi; and a multi-state expansion of Happiness4All with ITX Services, touching factories and worker communities from Noida to Tirupur.

All of this contributed to our Healthy Days North Star. A total of **0.9 million healthy days (equivalent to 99 lakh days) were achieved during FY 2024-25**, as calculated using workbook-based methodology. Of this, 2.58 Lakh days came from the i4we program, 6.59 Lakh days from CO Support to Vulnerable Communities and 72,091 days came from the Health@Work program.

Together, these strands tell us something vital: when health care, protection, and work are stitched together, everyday wellbeing stops being fragile. It becomes something people can count on.

Read more about our work in this domain:

Health@Work



Call4Svasth



Nutrition



...Workforce Wellbeing

Workforce wellbeing is the foundation for dignity, productivity, and resilience in the workplace. Over the past year, this came alive through partnerships that spanned from factory floors in Karnataka to clusters in Gujarat, Rajasthan, Uttar Pradesh, Haryana, Tamil Nadu and Punjab and across various other supply-chain ecosystems.

The projects carried workforce wellbeing deeper into the spaces where workers spend their days-shaping environments where health and fairness stand alongside production targets. **UpFront** makes wellbeing tangible by bringing health, safety, equity, and protection to both formal and informal workers. Such interventions help us meet people where they work and make wellbeing an everyday part of productivity and dignity.

The **H4All 2.0** programme, an initiative by Inditex (bold Inditex) in collaboration with Swasti and UpFront carried its socio-ecological model to scale, weaving wellbeing via gender equality, financial inclusion, and agency building into everyday workplace culture. This initiative started in 2023 and will conclude in 2027, focuses on 100 supplier units across India.

Reaching **11,098** workers (in FY 24-25) directly and influencing their community through peer education and community outreach, it shows how leadership and equity can become embedded amongst workers and indirectly into their families, creating value that goes well beyond training rooms. Other workplace interventions, namely the Health@Work program, which layers on the Invest4Wellness model and reached **55,764** individuals in FY 24-25, have been detailed in the primary healthcare section.

Our work in this domain proves that when workers and management co-create healthier environments, wellbeing is no longer fragile. It becomes everyday, reliable, and woven into the fabric of work itself.



Read more about our work in this domain:

Upfront Website



Health@Work Website



Workforce Wellbeing x Climate Change



Role of Private Sector in Workforce Wellbeing



...Sexual Reproductive Health (SRH), Gender and Equity

Women's health and wellbeing require dedicated focus that is anchored in quality care, access at scale, and confidence in everyday systems. Our SRH work this year spanned facility upgrades, collective action, and leadership building-rooted in systems that bring quality and access closer to women's everyday lives. Women who were once refused care now find doors open, pensions secured, and livelihoods stabilised. Instances like a widow in Srikakulam re-enrolling her son in school after launching a vegetable business, or a trans woman in Bengaluru accessing the Mythri Pension Scheme, show what resilience looks like when agency and support come together.

As Secretariat for the Taaras Coalition, Swasti supported a national platform of 68 community-based organisations led by and for women in sex work and other underserved identities - -anchoring local health access, financial inclusion, and social protection while amplifying community leadership.

Across six states, the program reached more than 1.49 lakh women and trans persons this year. Taaras also demonstrated the power of integration: 437 health camps, 55,000+ social protection linkages, 41,000 people connected to financial services, and over 2.3 lakh healthy days² added

This illustrates Swasti's SRH domain in practice: upgrading health quality at scale, strengthening women's collectives as anchors of access, and enabling women and trans leaders to claim their place in systems and communities.

² Healthy Days is a metric that measures the number of days individuals perceive themselves as healthy—physically, mentally, and socially. It serves as a holistic indicator of wellbeing beyond traditional disease-based measures. To know more, visit https://swasti.org/100_million



Read more about our work in this domain:

Taaras Website



Cervical Cancer



Menstrual Health



...Community Systems Strengthening

Investments in community capability platforms, partners, and networks ensured that care and livelihoods keep moving. From urban collectives to rural cooperatives, community-led systems turned vulnerability into resilience, and resilience into continuity.

Highlights

- ❖ **Swathi Mahila Sangha (SMS) (Bangalore Urban)** reached **14,000 beneficiaries** with 180+ leaders. Through training in organizational development, legal rights, livelihoods, and social entrepreneurship, they advanced HIV care, primary health, and financial inclusion. By implementing the GFATM grant across six states and training over **300 women entrepreneurs**, SMS embedded dignity in both care and commerce.
- ❖ **ADSS (Bangalore Urban)** supported **6,000 people** through 35+ leaders. With training in community health entrepreneurship, financial literacy, and organizational strengthening, they wove social protection into everyday life. By adopting the i4We 2.0 model and reaching **65% financial self-sufficiency**, they showed that community institutions can sustain themselves beyond grants.
- ❖ **SKS (Gurugram)** engaged **3,000 people** with 30+ leaders, working across primary health, livelihoods, and financial inclusion. They too adopted the i4We 2.0 model, reaching **35% self-sufficiency**, and leveraging CSR partnerships to anchor resilience in governance and growth.
- ❖ **Janadhanya (Kanakapura)** reached **2,000 people** with 25+ leaders. Their focus on regenerative agriculture, coupled with primary health and social protection, birthed, millet and oil units, solar-drying enterprises, and a **Bio Resource Center**. With a ₹12-lakh e-vehicle for marketing of 83+ products, they shifted from grant dependency to a thriving social business model.
- ❖ **Taaras Coalition** (6 states, 68 CBOs, 1,49,000+ members, 1,000+ leaders) brought together women in sex work and marginalized groups into a national voice for rights, health, and livelihoods. In FY24-25 alone, they added **2,36,343 Healthy Days**, delivered **55,442 social protection services**, and ran **437 free health camps**. Taaras mobilized **INR 4.3 crore**, enabled **803 members to start supplementary livelihoods**, and ensured leaders regularly mitigated violence cases. From influencing NACO and GFATM policies to providing flood relief in Andhra Pradesh and Maharashtra, Taaras demonstrated how community-led coalitions can shift from margins to the mainstream.

Together, these platforms and coalitions show that when communities hold capability - through leaders, training, enterprises, and networks - care keeps moving, livelihoods keep growing, and rights keep advancing. (SDG 3, SDG 5, SDG 8, SDG 10, SDG 17)

Read more about our work in this domain:

Taaras



Swasti Mahila Sangha



Janadhanya



...Health Systems Strengthening and WellTech

By improving the quality, reach, and design of maternal and newborn care across cities and states, health systems saw a strengthening.

Manyata, a FOGSI-led program, addresses the quality gap in small private maternity hospitals by implementing 16 WHO-defined quality of care standards to ensure safe, respectful, and consistent care for mothers and newborns. Since 2022, Swasti has served as the National Quality Improvement Coordinating Agency (NQICA), focusing on scaling Manyata sustainably across India, thereby strengthening governance, and leveraging innovative technological solutions for effective program management.

Manyata 4.0 with MSD for Mothers scaled maternity and newborn care quality across 25 states, reaching 38.3 million people and directly engaging 107,556 program instances across 62 CBOs in Karnataka, Tamil Nadu, Maharashtra, Andhra Pradesh, and Telangana, with projections set to reach nearly 196,500. It set new standards for private facility care and equipped providers to deliver safer births and healthier beginnings.

This intervention was successful due to the collaborative support from our partners like Jhpieho, Centre for Skill Excellance (CSE), Catalyst Management Services (CMS), PharmAccess Foundation,

Maternity Foundation, Aastrika Foundation, Nivi, Dhvani: Rural Information Systems, TogetHER for Health, Sattva, Ariadne Labs and Weber Shandwick.

Complementing this, under the FIND-supported HPV project, we engaged over 250 women and 40 service providers in Jewargi taluka, Gulbarga, Karnataka, to identify gaps in awareness, attitudes, and practices regarding cervical cancer and screening. The initiative revealed critical misconceptions and systemic barriers, informing the development of tailored IEC materials and provider training modules.

These efforts laid the foundation for stronger community engagement, improved health system readiness, and the future scale-up of HPV DNA testing in India.

Throughout our interventions, technology was not an abstraction but a lifeline. Through Call4Svasth, Swasti has reimagined access to primary healthcare by integrating community-led outreach with technology-enabled services to deliver care at the last mile. By pairing digital helplines with on-ground engagement, the program addresses the physical, emotional, and social determinants of health.

With Call4Svasth, spanning Karnataka, Rajasthan, Madhya Pradesh, Tamil Nadu, Odisha, Punjab, West Bengal, Haryana, Bihar and Puducherry, over 18,000 call instances connected individuals to verified information, referrals, and reassurance – bridging the gap between doubt and care. This year, the program expanded to new geographies in Puducherry, Bihar, and Tamil Nadu, while strengthening interventions in factory settings. Continuous capacity building remained a cornerstone with over 25 training sessions for nurses, counsellors, and community health workers built skills in telecare delivery, emotional health, and community engagement.

Through integrating WellTech with

community-based systems, it is evident that technology in health security is not just about apps or dashboards, it is about giving people the confidence that questions will be answered, symptoms will be acted on, and crises will be met with coordinated care.

Read more about our work in these domains:

Health Systems Strengthening x Climate Change



Call4Svasth



...Social Protection

Social protection is a foundation for public health, ensuring that everyday wellbeing is accessible for workers, families, and communities, not just in moments of crisis but as part of daily life. Across India, our initiatives combined financial protection, access to entitlements, and rapid response during shocks, creating safety nets that hold dignity at their core.

Health shocks, sudden loss of income, or gaps in entitlements can push families into cycles of debt and poverty, undoing years of progress in nutrition, education, and wellbeing. Protecting everyday lives through access to entitlements, risk pooling, and financial security enables people to live with dignity and health.

Equally critical is addressing the vulnerabilities of women in supply chains. As part of the earlier mentioned work with Taaras Coalition, women were supported with documentation, crisis response mechanisms, and pathways to entitlements. For many, this meant their first identity card, access to maternity benefits, or the confidence that if a crisis struck, support systems were within reach.

In 2024-25, our partnerships expanded the reach of social protection systems across multiple states, blending the strengths of community organizations, corporates, and foundations. With **PRADAN and IndusInd Bank**, we deepened access to food and social security entitlements in Virudhunagar, Tamil Nadu. Here, more than **19,673 community members** accessed their rightful benefits, demonstrating that targeted facilitation can bridge the last-mile gap in state systems.

Insurance-based protection became a cornerstone of our work with **Tata AIG General Insurance in Ayodhya**, Varanasi, Mathura (Uttar Pradesh), Nagaland, Nagpur (Maharashtra) and Darrang (Assam). Over **2,37,000 households** (plan 2,17,000) were connected to schemes that reduce the financial burden of illness and accidents, preventing catastrophic health expenditure.

In Rajasthan, our partnership with **NASSCOM Foundation** enabled **40,029 households** across districts like Dholpur, Sirohi, Karauli, Jaisalmer, and Baran to access entitlements and build resilience to everyday vulnerabilities.

Recognizing the need for sustained expansion, Phase 2 partnerships with **PRADAN, Aga Khan Foundation** (Baran, UP), and **Watershed Organization Trust** (Begusarai, Bahraich) built on earlier learnings, extending entitlements and welfare schemes to new geographies. These collaborations illustrate our belief that social protection is not a one-time intervention but an ongoing, evolving commitment to families' wellbeing.

Swasti also supported the launch of **Social protection coalition-SETU** to advance access to social protection for the most vulnerable populations in India.

Across these partnerships, we touched **5,79,301 individuals** in 15 states, reaffirming that social protection is everyday public health in action. By embedding entitlements, insurance, and crisis response into the fabric of public health, our work in social protection ensures that a health setback does not spiral into financial ruin.

...Global Health Security & Pandemic Response

Preparedness is only meaningful when people can feel it in their everyday lives—through trust in systems, timely information, and access to care. Global health security systems were humanized by translating big concepts of surveillance, vaccination, and early warning into tangible community protection.

Through our continued partnership with the **Skoll Foundation**, we have operationalised pandemic preparedness and early warning systems across nine locations since 2021 including Meghalaya, Tamil Nadu, Andhra Pradesh and other locations in 2024-2025 alone. A new partnership with **Asian Development Bank (ADB)** was built, with leadership from Swasti spearheading the strategic direction for Advanced Warning and Response Systems across Asia. The capacities of local communities and local administrators were also strengthened across four locations to own and sustain localized early warning systems..

In FY 2024-25, we prioritised **AI integration** into our early warning tools. Our Event-Based Surveillance (EBS) system leverages advanced AI, including cutting-edge Natural Language Processing (NLP) models like Bidirectional Encoder Representations from Transformers (BERT), to monitor climate-related health events and disease outbreaks. By aggregating data from diverse sources such as Google Alerts, news portals, and web pages, EBS delivers real-time insights through an intuitive web portal. Additionally, we used AI tools for generating customised animated graphics for communication products, translating English content into local languages for regionally adapted videos, and using transcription AI to convert videos into text to develop structured scripts with distinct sections. The platform has prioritised AI integration across all our early warning systems and tools, enhancing their ability to generate timely, actionable insights for communities and decision-makers alike.



Read more about our work in this domain:

Precision Health Platform



Wastewater Surveillance



...Climate X Health

We seeded everyday climate action that protects health and homes. In a year marked by rising heat, shifting seasons, and unpredictable rains, Swasti's Climate and Health work focused on equipping people and systems to anticipate, absorb, and adapt to climate risks. Our efforts spanned internal capacity building, program integration, government partnerships, and frontline tools that bring resilience closer to communities.

Swasti convened multi-stakeholder workshops on climate and **sexual & reproductive health (SRH)**, bringing together government officials, community health workers, program managers, and youth champions. Participants co-created context-specific response plans for diverse terrains, identified strategies to integrate SRH into Family Planning, WaSH, and adolescent health programs, and called for SRH to be embedded in climate adaptation policies. The impact was clear: **over 90% of participants improved their understanding of climate-SRH linkages**, and all affirmed the need for integration into policy.

Through a structured **Climate X Health training**, **17 program managers** strengthened their capacity to weave climate into primary healthcare, SRH, NCDs, communicable diseases, and mental health. Case studies of vulnerable groups and strategies for mitigation and adaptation sharpened Swasti's ability to mainstream a climate lens across all programs.

At the community level, **50 Call4Svasth nurses and Community Based Organisations(CBO) staff** were trained in Hindi, Kannada, and Odia on the health impacts of heat and cold. Reaching urban poor in Haryana and Karnataka, and fisherfolk in Odisha, the nurses now counsel families and spread preventive actions, embedding climate-health awareness in everyday care.

The flagship **Climate Care Champions Program (CCCP)**, in partnership with GCCHE, scaled to Ananthapuramu District, Andhra Pradesh. A Training of Trainers with **90 Medical Officers, CHOs, and ANMs** cascaded to **2,266 frontline workers** across **76 PHCs and UPHCs**, reaching **4.5 million people**. Within the first month, workers **sensitized 45,773 households, identified 4,387 heat illness cases, and referred over 2,000 individuals**. Knowledge of heat symptoms rose from **19% to 70%**, and infant-specific signs from **32% to 89%**. Sustained by an iECHO Community of Practice, CCCP showed how localized, evidence-based, government-supported training can rapidly build resilience, with clear potential for national scale-up.



The successful implementation of the Climate Care Champions Program (CCCP) directly led to **the development of the Ananthapuramu District Heat Action Plan (HAP) and Heat Early Warning System** by the Government of Andhra Pradesh. Rooted in health, the HAP emphasizes treating extreme heat events as recurring public health challenges rather than isolated emergencies. Drawing on CCCP's training curriculum and schedule, the plan created clear protocols for frontline preparedness. A working draft **was launched at the World Health Summit** – Regional Meeting in

April 2025, marking a significant recognition of this effort on a global platform. The plan was formally discussed through a multi-departmental meeting convened by the District Collector and is currently in the process of securing consensus from all district line departments to ensure clarity of roles and responsibilities. This represents a major outcome of CCCP, demonstrating how community-based health initiatives can inform government policy and strengthen systemic readiness for climate-induced health risks.



Swasti further collaborated with the Community Action Collab (CAC) and the Indian Alliance for Public Health Preparedness (IAPHP) to strengthen collective resilience against the growing threat of seasonal health risks.

In this collaboration, through three dedicated awareness sessions, nearly **120 professionals** from government and civil society came together in dialogue, building a shared understanding that public health preparedness is not just a technical exercise but a collective responsibility.

These efforts were reinforced with tailored IEC (Information, Education, and Communication) materials that grounded knowledge in practice.

Resources for Resilience, our seasonal advisories for heatwaves, monsoon, and winter, are designed as job aids for frontline health workers (FWWs) and information resources for communities. Available in multiple regional languages and tailored for resource-limited settings, these advisories helped people recognize symptoms, take preventive measures, and adopt timely health-protective actions.

In 2024-25, Swasti released two climate guides - the **Winter Guide** in partnership with **AIIMS Bathinda** and the **Heat Guide** in partnership with **GCCHE at Columbia University**. The climate guides, designed as simple yet powerful job aids, enabled both frontline health workers and community members to translate insight into everyday protective action-bridging the gap between awareness and resilience.

Together, these initiatives demonstrate Swasti's Climate and Health approach in practice: strengthening systems, equipping providers, and enabling communities to thrive despite a changing climate.

Read more about our work in this domain:

Climate x Health



Climate x Health Resources



Climate change and Polycrises



Under the Indian Sky: Tales of Climate and Health

Climate change is one of the most pressing health challenges of our time, with India facing rising disease burdens and mortality from premature heatwaves, floods, and storms. To see how these shifts are affecting health and well-being, our Chief Catalyst, Dr. Angela Chaudhuri, led a journey with our team across locations in Assam, Chhattisgarh, Karnataka, Madhya Pradesh, and Tamil Nadu. Communities and health workers in these regions are already experiencing the effects of rising temperatures, floods, and other extreme events, changing how people live, work, and care for each other.

This journey came to life in a short film series, **Under the Indian Sky: Tales of Climate and Health**. The first film shares the stories of community healthcare workers who witness daily how the climate crisis affects the health of those they serve. The second film amplifies the voices of people living on the frontlines of climate change and highlights the urgent need to build resilience and protect well-being. This film premiered at the **Big Picture Film Festival at Catalysing Social Impact 2024**, carrying these voices to a wider global audience and sparking dialogue at the intersection of climate and health.

Together, these films remind us that **climate change is not an abstract concept** – it is a lived reality for millions, and addressing it is key to safeguarding human health and dignity.

Watch our films here:



Part 1: Our Carers



Part 2: Our Communities



Catalysing Social Impact 2024: Turning Aspiration into Action

Adding 100 million healthy days³ for the most vulnerable is not just a goal—it is the heartbeat of our mission, and the rallying call for systemic change.

The second edition of Catalysing Social Impact (CSI 2024), in August 2024, hosted at Dr. Ambedkar International Centre (DAIC), located at 15 Janpath, New Delhi, became the crucible where community, innovation, and partnerships converged to accelerate people-centered primary health care.

Every dialogue, coalition, and action at CSI 2024 was deliberately designed by the Centre For Strategic Communications For Public Health at Swasti to translate aspiration into action—so that each vulnerable day could be transformed into a healthier one.



A Community of Change-Makers

Over **737 participants** came together, representing a powerful cross-section of the social impact ecosystem:

- ❖ **Civil Society & Foundations:** Grassroots NGOs, advocacy groups, and philanthropies amplified local wisdom with national reach.
- ❖ **Private Sector Stakeholders:** Corporates contributed expertise in governance, innovation, and sustainability for social ventures.
- ❖ **Government & Multilaterals:** National and sub-national agencies aligned policy, health systems, and public priorities.
- ❖ **Community Champions:** Self-help groups and local leaders brought grounded, lived solutions for resilience and protection.
- ❖ **Academia & Media:** Thought leaders, researchers, and journalists translated evidence and narratives into systemic influence.

What made CSI 2024 extraordinary was not just the numbers, but the diversity and unity of this coalition—each constituency contributing a unique lens toward the shared mission of extending healthy days.

Thematic Anchors and Outcomes

Collaboration for Health and Resilience



CSI 2024 convened cross-sector change agents to forge coalitions like the **Social Protection Coalition** and the **India Health Collaborative**—together representing over 117 organizations. These platforms are building comprehensive systems to address health inequalities and safeguard the most vulnerable.

Innovation in Finance for Health Equity

Breakthroughs in financing—social stock exchanges, blended finance, micro-equity, outcome-based models—were spotlighted as game-changers. These mechanisms are unlocking capital flows where they are needed most, enabling preventive and primary care to reach marginalized communities.

Climate and Health Integration

Recognizing the nexus between climate stressors and disease burden, CSI 2024 launched tools like the **Weather and Disease Tracker**, designed to provide early warning and data for frontline action. Local, community-driven initiatives were elevated as proof that resilience must be both climate-aware and people-centered.

Amplifying Community Voices with Data

Sessions emphasized participatory storytelling, dashboard-driven decision-making, and human-centric design. By placing lived experience at the center, data is transformed into action, ensuring that progress in health outcomes translates directly into healthier days for vulnerable groups.

Systemic Change and Policy Advocacy

Government partnerships, digital infrastructure for MSMEs, and outcome-based financing featured as pathways to durable reform. The message was clear: systemic change must make frontline workers, community leaders, and local institutions not just implementers, but true custodians of long-term health.

The Larger Story

CSI 2024 was a page out of co-creating a resilient ecosystem for those who need it the most and yet are often the most left behind.

Every theme, partnership, and session became a deliberate step toward a future where:

- ❖ **Health is people-centered, not institution-centered.**
- ❖ **Communities are not just beneficiaries, but resilient leaders of change.**
- ❖ **Every vulnerable day can be reclaimed as a healthy one.**

³ Healthy Days is a metric that measures the number of days individuals perceive themselves as healthy—physically, mentally, and socially. It serves as a holistic indicator of wellbeing beyond traditional disease-based measures. To know more, visit https://swasti.org/100_million

Swasti in Partnerships for Health Solutions

At Swasti, we believe that no one organization can achieve health equity alone.

While this belief is what sees us actively involved in various collaborative approaches; as a public health organization, our role is also to support our partners with our core people centered public health systems expertise so they can in turn support their communities towards achieving good health and wellbeing.

And in FY 2024-2025 this had us support partners across governments, multilaterals, civil society, and private sector actors so that together we can add 100 million healthy days to the lives of the most vulnerable by 2030.

Here are some highlights.

Supporting Systems to Be Resilient

We walked with our partners to build systems that last.

- ❖ In **Myanmar**, we supported our partner working with UNAIDS by helping strengthen the financial management capacity of community-led organizations, ensuring they can deliver robust HIV responses.
- ❖ In **Botswana**, together with government and stakeholders, we supported our partner review district-level HIV coordination, sharing training manuals and contracting guidelines that sustain impact long after the project closes.

With Partners, Building Climate and Health Pathways

We collaborate widely with global and regional partners to prepare for tomorrow's health challenges.

- ❖ With **IDRC (International Design Research Conference)**, we supported our partner in reviewing proposals for the **ARCH (Advancing Research for Climate and Health) program**, shaping the future hubs of climate-health research.
- ❖ With **CORE Group**, we supported our partner work with grantees in **Nepal and Cambodia** to capacitate them in using the lens of sexual and reproductive health into climate resilience strategies.
- ❖ With the **Asian Development Bank**, we co-facilitated the India Climate and Health Conclave and contributed as **Advance Warning Systems And Response (AWARE) Experts in India and** supported our partner on the same **in the Philippines**, helping develop early warning and response systems for climate-health risks.

Advancing Equity, Together

Health equity becomes real only when partners act together to remove barriers.

- ❖ Across **South East Asia**, with **Sattva and UNAIDS/PEPFAR**, we supported our partner in strengthening **community-led monitoring**, amplifying the voices of key populations in HIV policies.
- ❖ With **UNAIDS**, we partnered across **Fiji, Indonesia, Papua New Guinea, and the Philippines** to embed **gender equality, disability inclusion, and equity (GEDSI)** in national HIV responses.

Shaping National and Global Strategies with Partners

We join hands with global institutions to align strategy with community realities.

- ❖ In **Bhutan**, with WHO, we supported our partner to evaluate the current Country Cooperation Strategy and co-developed the 2026-30 plan to align with both global priorities and Bhutan's 13th Five-Year Plan.
- ❖ In **Bhopal**, we worked with the Health Systems Transformation Platform to research and strengthen urban primary health care, generating evidence for policy change in fast-growing cities.

Healthy Days at Work

Partnership also means engaging with private sector actors who care about worker well-being.

- ❖ In **Sri Lanka**, with **English Tea Shop**, we supported our partner to design and roll out workplace primary healthcare interventions, improving the lives and productivity of over 300 employees.

Each of these projects reflects our philosophy: we do not act alone. We support our partners and their communities, and together, we co-create resilient health systems, climate solutions, and inclusive responses.



Financial Highlights

(Income & expenditure; donor/project allocations; thematic investments across domains; comparison with FY 2023-24.)

Swasti			
No. 25, AECS Layout, Ashwathnagar, Bengaluru - 560 094			
Balance Sheet			
Particulars	Note	Amt in (₹) as at 31st Mar 2025	Amt in (₹) as at 31st Mar 2024
SOURCE OF FUNDS			
<u>Restricted funds</u>			
Earmarked funds	2	9,88,58,794	15,62,29,944
<u>Designated Funds</u>			
Employee benefit funds	3.1	2,00,03,939	2,21,49,910
General operating fund	3.2	5,89,97,128	5,00,27,154
Assets fund	3.3	93,78,140	93,97,682
Earmarked funds	3.4	20,00,00,000	20,00,00,000
<u>Unrestricted funds</u>			
General fund	4	10,06,87,131	18,26,71,075
TOTAL		48,79,25,132	62,04,75,765
APPLICATION OF FUNDS			
<u>Fixed Assets</u>			
Tangible assets	5A	54,00,002	62,57,993
Intangible assets	5B	39,78,138	31,39,691
<u>Investments</u>			
Long term investments	6	31,89,65,129	7,50,57,595
Current investments		10,72,41,795	18,29,44,318
Deposits		19,21,000	19,39,500
Current assets	7	6,90,98,837	36,74,38,557
TOTAL ASSETS	(A)	50,66,04,901	63,67,77,654
<u>Liabilities</u>			
Current liabilities	8	1,86,79,769	1,63,01,889
TOTAL LIABILITIES	(B)	1,86,79,769	1,63,01,889
NET ASSETS	(A) - (B)	48,79,25,132	62,04,75,765

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: 0085725

For Swasti,

Venugopal C
Partner
Membership No. : 226247

R.Thangavelu
Secretary

For Swasti,

Krishna Moorthy K
Treasurer

Place: Bengaluru
Date: 16/09/2025

Place: Bengaluru
Date: 15/09/2025

Swasti			
No. 25, AECS Layout, Ashwathnagar, Bengaluru - 560 094			
Statement of Income and Expenditure for the year ended March 31, 2025			
Particulars	Note	Amt in (₹) for the year ended 31st Mar 2025	Amt in (₹) for the year ended 31st Mar 2024
<u>INCOME</u>			
<u>Restricted</u>			
Earmarked Funds	9	42,32,76,154	63,89,77,150
<u>Unrestricted</u>			
Donations		55,83,155	51,05,892
Bank interest	10	3,70,17,922	4,18,26,684
Other income	11	27,88,959	32,51,814
TOTAL		46,86,66,190	68,91,61,540
<u>EXPENDITURE</u>			
<u>Restricted</u>			
Grant expenditure	9	38,89,15,104	59,05,82,001
<u>Unrestricted</u>			
Invest for wellness (i4We) & Other health programmes	12	9,80,22,743	9,34,78,481
<u>Establishment and other expenses</u>			
Administrative expenses	13	2,93,58,449	2,67,51,815
Expenses on employment	14	2,03,92,735	2,02,97,522
Depreciation	5	32,58,615	23,52,279
Other expenses	15	17,52,055	38,74,977
TOTAL		54,16,99,701	73,73,37,075
Excess of Expenditure Over Income - Surplus / (Deficit)		(7,30,33,511)	(4,81,75,535)
Balance transferred to General Fund		(7,30,33,511)	(4,81,75,535)

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

This is the Statement of Income and Expenditure
referred to in our report of even date

For R V K S And Associates
Chartered Accountants
FRN: 0085725

For Swasti,

Venugopal C
Partner
Membership No. : 226247

R.Thangavelu
Secretary

For Swasti,

Krishna Moorthy K
Treasurer

Place: Bengaluru
Date: 16/09/2025

Place: Bengaluru
Date: 15/09/2025

Governance FY 24-25: 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*
Krishnamoorthy Kuntini	Staff	Treasurer*
Dr. Angela Chaudhuri	Staff	Chief Catalyst*
Shiv Kumar	Founder	Chief Mentor*
Narayanan Raghunathan	Founder	Mentor*
Packianathan Rajarethinam	Founder	Member
Masuvathi Ramaswamy Chandrashekarani 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
Shrirupa Sengupta	Staff	Member
Shankar A. G.	Staff	Member

*Members of Swasti's Governing Board.

Looking Ahead

“Driven by purpose, vision and meaning.
Rooted in truth, respect and authenticity.
Guided by love, peace and non-violence.”

These values anchor us.

Our Commitments

- ❖ **Protect the last mile, at scale.** We will deepen and link i4We clusters so families get health, income and protection together, not in silos.
- ❖ **Make early warning a basic service.** We will grow the Precision Health backbone so that every community can see risks coming, such as heat, floods, and outbreaks, and act in time.
- ❖ **Stand with key populations, without pause.** Through Taaras, we will hard-wire safety, health access and financial inclusion into city systems, not short projects.
- ❖ **Pay for what works.** We will blend grants with earned and results-based funding so essential services do not stop when a grant ends.
- ❖ **Tell the truth with data.** We will publish clearer Healthy Days reporting simple, honest, and disaggregated—while protecting people's privacy.
- ❖ **Back the frontline.** We will equip community workers with training and simple AI co-pilots that save time and lift care quality.
- ❖ **Design for shocks.** We will build reserves, diversify partners, and stress-test plans so services hold steady in crisis.
- ❖ **Use our voice for prevention.** We will push for climate-health budget lines and practical policies that make prevention the norm.

Because we respect people, we will co-create with them.

Because we choose truth, we will measure openly.

Because we believe in non-violence, we will prevent harm before it starts.

Our promise is straightforward: protect the last mile, scale what works, and add healthy days every single day.



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 (17th Section/ 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, 1976 - 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).

Swasti is registered under the Society Act, Karnataka, 1960.

Follow us on social media and stay connected with our story as it unfolds.

X: @SwastiHC

Facebook: @SwastiHC

LinkedIn: @Swasti Health Catalyst

Instagram: @swastihc

