



Registered in 2004 under the Societies Act, 1860

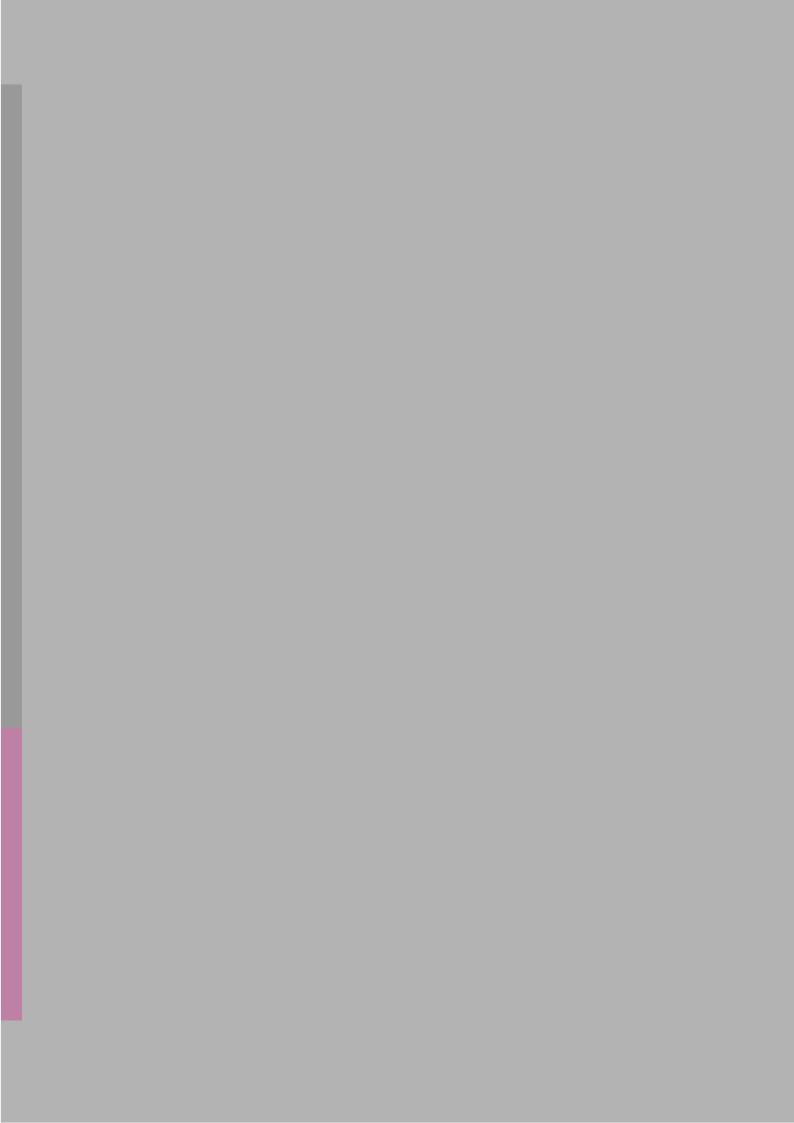
Swasti Health Resource Centre, part of the Catalyst Group #19, 1st Main, 1st Cross, Ashwathnagar, Bangalore 560094

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This report covers the period 1 April 2008 to 31 March 2009

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Swasti Health Resource Centre

abbreviations

AAA Alliance for AIDS Action

AIDS Acquired Immunodeficiency Syndrome AR&I Action, Research and Implementation

APLF Asia Pacific Leadership Forum

AusAID Australian Agency for International Development

CCC Community Care Centres

CBO Community-based Organisation
CCM Country Coordinating Mechanism
HIV Human Immunodeficiency Syndrome

ICRW International Centre for Research on Women IPPCC Integrated Positive Prevention Care Centre

KIT Koninklijk Instituut voor de Tropen (The Royal Tropical Institute)

M&E Monitoring and Evaluation

NACO National AIDS Control Organisation
NACP National AIDS Control Programme
OVC Orphaned and Vulnerable Children
PFI Population Foundation of India

PLHIV People Living with HIV

RASP Reach Access of Service and Product

RST Regional Support Team

SAARC South Asia Association for Regional Cooperation

SEAP South East Asia Pacific

SRH Sexual and Reproductive Health
STI Sexually Transmitted Infection

TMS Technical and Management Support

TSF Technical Support Facility

UNAIDS Joint United Nations Programme on HIV/AIDS UNDP United Nations Development Programme

USAID United States Agency for International Development

WHO World Health Organization

WSW Women in Sex Work





N Shiv Kumar has over 19 years of experience and accomplishments in social development in India and internationally. He has founded several organisations including Catalyst Management Services, a consulting firm; and two not for profit organisations - Swasti, a health resource centre and Vrutti, a livelihoods resource centre. He has been CEO of Swasti since its establishment in 2002.

Shiv's understanding of, and sensitivity to development issues and needs, coupled with an exceptional business and technical acumen, makes him an outstanding facilitator and change catalyst, inspiring people to perform. A strategist and tactician, he has consistently delivered results in development projects and programmes, contributing to policies and strategies for the poor and marginalised.

letter from the ceo's desk

Dear Partners, Colleagues and Friends,

Dear Partners, Colleagues and Friends,

During our annual strategic planning exercise when the entire Catalyst Group gathered together and reaffirmed its commitment to the cause of social development, it struck me how far we have come. From one organisation that started its journey about 14 years ago, to four, and over a 120 member strong family.

Swasti, set up in 2002, is an important part of the Catalyst family. It is focused on enhancing health and well-being through innovation. In true Swasti tradition, during 2008-09, we continued doing interesting, challenging and meaningful work with a variety of partners, both local and global. We consolidated our work within India and expanded our international portfolio.

The Action Research and Implementation team participated in the World Bank's South Asia Regional Development Marketplace: 'Tackling Stigma and Discrimination' and won an award grant to work on a 18 month project to reduce stigma and discrimination amongst sex workers living with HIV. Our community-based organisation (CBO) partner for the Pragati project, Swathi Mahila Sangha, too is poised for a takeoff and is taking on a lead role within the project. The Learning Systems project is bearing fruit - we have developed several products (training modules, brochures, films and case study compendiums) which together form a comprehensive learning package. We also embarked on an initiative on HIV in the workplace with public and private sector companies.

Taking stock of what Swasti did in the last year and what it has planned for itself over the next year makes me happy to be leading a team of vibrant, passionate and competent professionals who dare to dream and have the drive to make those dreams come true. I congratulate the team on its good work and urge them to keep up their efforts in making a difference where they can.

On behalf of the Board of Directors, I thank all who have been a part of Swasti's journey and helped us reach where we are. I thank you for believing in us, supporting us and giving us the opportunity to learn and look forward to doing the same in the year that is unfolding.

N Shiv Kumar, CEO





Vision: A centre of excellence that enhances health and well-being through innovation, particularly for the marginalised.

Mission: To improve health outcomes through working with communities and development partners.

Swasti Health Resource Centre

2 about swasti

Swasti is a non-profit organisation working in the domain of public health. Swasti was established in 2002 by a team of young and highly committed professionals, with the aim of improving health and well-being, particularly of the marginalised, by contributing primarily to the social and managerial aspects of public health. Consequently, the organisation has over the years developed expertise in areas of program design, planning, research, monitoring and evaluation (M&E), capacity building and institutional development in the health sector.

As an implementer of health programs, Swasti has succeeded in developing innovative ways of health delivery and its current projects stand as a testimony to that. In a short span of seven years, Swasti has been able to contribute to policy and programming in HIV/AIDS and other health issues, by way of working with varied partners at the grassroots, national, regional and international levels. The organisation has a global footprint, with a focus on working in South Asia, South-East Asia and Southern and East Africa.





In 2008-09, Swasti supported organisations working in development to improve the efficiency and effectiveness of their operations by providing technical and management support.

3 [technical and management support

During the year 2008-2009, Swasti contributed to enhancing the sectoral response to HIV by providing technical and management support through key assignments both inside and outside India. Swasti partnered with a range of organisations including governments, bilateral and multilateral agencies, NGOs and private foundations. Among its partners in 2008-09 were the World Health Organization (WHO) India, Joint United Nations Programme on HIV/AIDS (UNAIDS) in India and its Headquarters in Geneva, Regional Support Team Asia Pacific, United Nations

Development Programme (UNDP) India, United Nations Children's Fund (UNICEF) India, United Nations Office on Drugs and Crime (UNODC) Regional Office for South Asia, Indian Ministry of Health and Family Welfare, National AIDS Control Organisation (NACO) India, Global Fund to Fight AIDS, Tuberculosis, and Malaria, National AIDS agencies and councils (Philippines, Zanzibar), Technical Support Facilities (TSF-Eastern Africa (EA), TSF-South East Asia Pacific (SEAP)), Population Foundation of India, Oxfam International, Alliance for AIDS Action and The Royal Tropical Institute (KIT), Amsterdam.

A brief description of the work undertaken by Swasti during 2008 - 2009 has been provided in this section

TECHNICAL AND MANAGEMENT SUPPORT IN

Planning

Research

Monitoring and Evaluation

Capacity Building

Documentation

planning

Swasti was commissioned by WHO and UNAIDS to prepare the malaria and the HIV proposals for Round 8 funding from the Global Fund to Fight AIDS, Tuberculosis and Malaria (hereinafter, the Global Fund), on behalf of the Country Coordinating Mechanism (CCM). This was a comprehensive piece of work, which involved leading the writing including the technical elements, detailed budgets and M&E and capacity building plans.

Swasti also provided technical support to Emmanuel Hospital Association, Indian Harm Reduction Network and UNODC in authoring the harm reduction component of India's HIV Global Fund Round 8 proposal. The focus of the proposal was to scale





up Opioid Substitution Therapy in India amongst people who inject drugs in line with the National AIDS Control Programme (NACP) phase III guideline on Targeted Intervention.

In 2008-09, Swasti was also part of a team of experts that reviewed the operations of the Technical Support Facility of Eastern Africa (TSF-EA). The team identified gaps and suggested options for an organisational structure, which helped TSF-EA develop its phase two plan of operations.

Swasti supported the Zanzibar AIDS Commission (ZAC) by undertaking an in-depth review and analysis of the financial and programmatic gaps of Zanzibar's AIDS response which fed into Zanzibar National Strategic Plan II for addressing AIDS in the country.

With the help of the Joint UN Plan for North East funded by the Australian Agency for International Development (AusAID), NACO had set up the North East Regional Office (NERO) at Guwahati. Its objective to provide technical and monitoring support to the State AIDS Control Societies in North East India. At the request of UNAIDS India, Swasti facilitated a workshop to develop an implementation plan for the Regional Office focusing on its objectives and key strategies. Swasti also supported the Regional Office to finalise their work plan and develop a monitoring system.

Swasti helped Alliance for AIDS Action (AAA) to develop into an independent organisation. It facilitated a three day workshop where AAA revisited its vision, core values, and business model and developed its strategic plan.

research

In 2008-09, in partnership with the India HIV/AIDS Alliance in Andhra Pradesh, Swasti conducted a rapid assessment of the sexual reproductive health (SRH) needs of women in sex work (WSW), men who have sex with men, and transgender individuals. The intention of the study was to suggest a strategy to integrate their SRH needs into existing health services through Mythri clinics, which HIV/AIDS Alliance supports in six sites in Andhra Pradesh.

monitoring and evaluation

Asia Pacific Leadership Forum (APLF) which is supported by the UNAIDS Regional Support Team for Asia Pacific (RST-AP) and AusAID, is an initiative that develops leadership action in response to HIV/AIDS. In 2008-09, Swasti undertook a participatory assessment of the effectiveness and impact of APLF activities and made recommendations to strengthen advocacy and leadership mobilisation in Asia and the Pacific.

Swasti also undertook an assessment to measure the effectiveness and impact of technical assistance commissioned and provided by the UNAIDS RST-AP and put forward recommendations to improve the effectiveness of its technical support.

Swasti led a team to review the Philippines AIDS Medium Term Plan IV, the country's fourth National Strategic Plan on HIV/AIDS. The team included representatives of UNAIDS, WHO, Philippines National AIDS Council, Ministry of Health etc. This review included an assessment of the functioning of the Philippines National AIDS Council. The review recommendations were taken into consideration and included in the Philippines' AIDS Medium Term Plan V and the review was published by the Philippines National AIDS Council.

In the same year, Swasti was commissioned by UNODC Regional Office for South Asia to serve as M&E advisors and conduct a series of regional and national capacity building workshops on M&E at the regional as well as national level in six South Asia Association for Regional Cooperation (SAARC) countries on the M&E system





for the second phase of UNODC's H-13 project. The H-13 project aims to prevent HIV transmission among drug users in the region. Swasti provided technical support in finalising the regional and national M&E framework, work plan, and key monitoring indicators at the regional and country level. Countries covered in 2008-09 included Sri Lanka, Maldives and Bhutan.

Since October 2008, Swasti has been the zonal agency for South India for the concurrent evaluation of the National Rural Health Mission, Round 1 which involved seven states and 32 districts. In 2008-09, Swasti's role included training of field agencies on various data collection tools, supportive supervision and monitoring of sampling and data collection processes, ensuring coordination with concerned state governments and overseeing data entry processes.

Population Foundation of India (PFI) is the Principal Recipient of a grant from Round 4 of Global Fund for providing "Access to Care and Treatment" in six states of India with high prevalence of HIV/AIDS. The project is a public-private partnership between NACO and a PFI-led private sector consortium. NACO provides antiretroviral treatment, while the consortium provides on-going care, support and follow-up services to people with HIV/AIDS. In 2008-09, Swasti conducted a 'potential for impact' analysis of the project, based on which the Global Fund approved an additional grant for continuation of the project.

capacity building

- Swasti works in all areas under capacity building cycle, which includes: capacity building needs assessment, developing capacity building systems, training modules and methodologies, implementing capacity building programmes, evaluation of capacity building initiatives etc.
- In 2008-09, Swasti began implementing a national level strategy to integrate HIV with the activities of interested public and private sector companies in India. This strategy, funded by UNDP, was aimed at enhancing national efforts to expand the reach and coverage of prevention, care and treatment services for HIV/AIDS. Swasti's role included undertaking a vulnerability analysis and designing the training strategies and modules in conjunction with the human resource and corporate social responsibility teams of participating private and public companies.
- During the year, Swasti also assisted in the initiation of the Link Worker Programme, Lakshya, implemented by NACO in partnership with UNICEF to prevent HIV/AIDS in rural India. Swasti provided technical support (including conducting a training of trainers programme) to partner NGOs of both NACO and UNICEF on mapping of high risk groups and identifying and clustering the 100 most vulnerable villages. This mapping provided a basis for implementation of the programme in selected districts across several states Kerala, Goa, Tamil Nadu, Andhra Pradesh, Karnataka, Maharashtra, Gujarat, Bihar, Uttar Pradesh, Madhya Pradesh, West Bengal, Manipur, Mizoram, Tripura and Nagaland.
- In 2008-09, TSF-SEAP commissioned Swasti to design and facilitate a workshop on Global Fund proposal writing for consultants and country partners to enable them to develop quality proposals. The workshop involved reviewing Global Fund proposal guidelines, proposal form and tools. Presentations and group and panel discussions on challenges, best practices, common pitfalls and key changes for Rounds 8 and 9 of funding, especially on community system strengthening were key features of the workshop.
- In addition, TSF-SEAP requested Swasti to facilitate a two day training workshop on UNAIDS "Orientation Package on Country Coordinating Mechanisms" for about 30 consultants from the SEAP region, which aimed to build their capacity to support



the CCMs in their respective countries. Swasti designed and facilitated the workshop, developing workshop materials based on the guidelines in the package. Swasti also wrote the workshop report including its observations, analysis of the whole process and put forward recommendations for TSF-SEAP on further professional development activities.

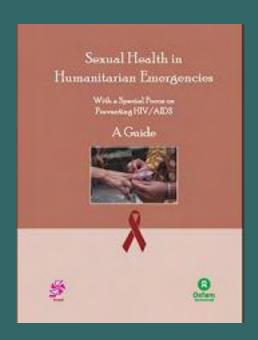
Swasti also facilitated an exposure visit to India for eight programme officers managing the Global Fund (Round 3) Programme in China. The purpose of the visit was to strengthen their understanding of the M&E systems in place for various HIV programmes in the country. During the visit, training on procedures of M&E including data collection, reporting, verification, analysis and utilisation was provided.

The Royal Tropical Institute (KIT), Amsterdam had been contracted by UNAIDS to provide backstopping support to the regional TSFs. In 2008-09, Swasti facilitated a three-day workshop to plan, facilitate, and provide technical inputs into a capacity building workshop, organised by KIT.

documentation

Over the course of the past 12 months, Swasti undertook a number of documentation exercises. The Global Fund had commissioned a series of case studies on various aspects of the functioning of Country Coordinating Mechanism (a key multi-stakeholder decision making and governance mechanism of Global Fund grants in countries). Swasti had in 2007-08 authored four case studies in Cambodia and India on three themes (Harmonisation and Alignment, Governance and Civil Society Participation and CCM Secretariat Funding). In 2008-09, Swasti was commissioned by the Global Fund Secretariat through TSF SEAP to analyse, collate and summarise case studies that were previously commissioned by Global Fund in 19 countries on four cross cutting themes: Principle Recipient - Local Fund Agent Communications, Harmonisation and Alignment, Governance and Civil Society Participation and Partnerships and Leadership. Swasti prepared a consolidated report of all the case studies from the 19 countries, identifying best practices and lessons learnt in each of the thematic areas mentioned above.

Swasti also worked with Oxfam International on developing a toolkit to help organisations working in humanitarian emergencies effectively integrate HIV prevention and AIDS care within their disaster preparedness and response. The toolkit was developed based on findings from Swasti's previous research on understanding the vulnerability of coastal communities towards HIV in Tsunami hit areas in India. This piece of research and the toolkit will be disseminated in the coming year.





Swasti publications



4 in it i at ives



In 2008-09, Swasti continued to work towards building replicable, scalable, and innovative models that contribute towards learning in different approaches and strategies.

4 action research and implementation

In 2008-09, Swasti continued to work towards building replicable, scalable, and innovative models that contribute towards learning in different approaches and strategies. To this end, Swasti implemented five diverse initiatives in 2008-09, which are briefly described below.

pragati



'Pragati', an empowerment project for women in sex work (WSW) is a joint initiative undertaken by Swasti and Swathi Mahila Sangha (a CBO), with Karnataka Health Promotion Trust being the key funding partner. The project aims to reduce transmission of HIV and other sexually transmitted infections among WSWs and enhances their overall well-being. The sex worker community is actively involved in this initiative and the intention is to fully transfer the project to the community by 2012.

Initiated in 2005, Pragati is based in four zones of Bangalore, covering about 70% of the city's WSWs. Pragati operates through four Swathi Manes (drop-in centres). It runs a health clinic in each Swathi Mane for STI treatment services and has 65 referrals clinics in the project area. The project also provides additional services aimed at improving the lives of WSW including a microfinance facility, alcohol deaddiction centre and crisis response team.





The key achievements of the project in 2008-09 were:

- * 9,686 WSW (approximately 100% of given target for regular contacts) visited Pragati project health and referral clinics.
- * 557,884 condoms were distributed, about 90% of the condom distribution target. Counselling reports also showed an increase in condom usage behaviour among women in the last three quarters.
- * 33% of the WSW who visited the project health clinics took a syphilis test and 62% of all reactive cases underwent treatment.
- * 339 identified WSW living with HIV/AIDS benefitted from the services offered through the project to positive women in areas of stress management, opportunistic infections management, positive living, and nutrition support.
- * 541 alcohol addicted WSW were identified, out of which 185 underwent de-addiction treatment.
- * So far, over 2,300 WSW have taken shares in the project's micro-finance institution and 2,003 of them have either savings or recurring accounts with the institution.
- * The project's crisis response team, Swathi Nyaya Sanjeevini responded to and resolved 794 cases of violence and focused on strengthening the capacity of violence watch committees.

To meet the community's needs, Pragati has used several innovative approaches like site camps which are used to provide services in remote areas, a Rapid Induction Module which is a cost effective and simple approach to induct all staff under one roof and Reach Access of Service and Product (RASP), a replicable community based monitoring tool. The project also facilitates access to social entitlements for WSW but this has been more challenging due to unavailability of basic documents with the WSW.

learning systems



The Learning System project aims to improve quality, efficiency and effectiveness of HIV programmes by developing and maintaining systems for facilitating learning among organisations working in the domain of HIV/AIDS. Started in October 2007, it is a joint initiative of Swasti and the Karnataka Health Promotion Trust and is funded by United States Agency for International Development (USAID) under its Samastha project. The main strategies of the Project include setting up learning sites, research, documentation

and knowledge sharing through workshops, forums and development of a Desktop Information System for storing and dissemination of information.

In 2008-09, Swasti ran two learning sites, one at the Pragati project and one at Snehadaan, a Care & Support Centre for people living with HIV (PLHIV). During the course of the year, the Pragati learning site hosted a substantial number of learning sessions and trained 450 people. The major areas of learning included project orientation, outreach planning, community mobilisation, M&E and development of an effective partnership between NGO and CBO, and transitioning program management from NGO to CBO. Through the project, three films and an audio visual PowerPoint were produced on the Pragati project and its different elements. A compendium of case studies documenting the empowerment of sex workers through Pragati was also produced in three languages (English, Kannada and Hindi). As part of the capacity building component of the programme, 33 individuals were trained on facilitation, communication and presentation skills.





At the Snehadaan learning site, the project supported the development of two documentary films about the sequence of care at Snehadaan and the establishment of Community Care Centres (CCC) by different faith based organisations across Karnataka. The project also produced two collections of case studies on adults and children living with HIV and supported the editing of Snehadaan's quarterly newsletter, Snehavaani. In March 2009, with the project's support, a brochure on Snehadann was also released. During the course of the year, the project also initiated the development of: 1) Protocols on different aspects of care provision at a CCC; 2) preparation of standardised presentations on common topics covered at Snehadaan learning site; 3) reference manual for programmers at CCCs to understand comprehensive care. These products will be released next year.

chetana samastha



In October 2008, Swasti commenced implementation of Chetana, a rural HIV intervention programme targeting WSW and their clients, PLHIV and orphaned and vulnerable children (OVC) in Chikkaballapur district of Karnataka. The project covers 110 high prevalence villages in the district and is a three year project, supported by Karnataka Health Promotion Trust and funded by USAID.

The key objectives of the project are to:

- Promote adoption of safe sex practices among WSW and their clients, through prevention and treatment services.
- Facilitate improved access to care and support services for PLHIV.
- Strengthen capacities of major local stakeholders to ensure greater community participation and ownership of the programme.

In its short life, the project has already had some significant achievements. These include:

* Identification and provision of HIV awareness and prevention services by Peer Educators to 1,033 WSW reaching 90% of the estimated 1,148 WSW in the villages.



- * One to one sessions were carried out with 39,483 men and women to sensitise them on HIV/AIDS.
- * Around 30,000 condoms were distributed per month to high risk groups by the project's Peer Educators and through promotion of condom outlet boxes.
- * 2,226 persons underwent HIV testing and 147 identified PLHIV were linked up with an Integrated Positive Prevention Care Centre (IPPCC).
- * 32 Primary Health Centre doctors were oriented on the project, syndromic case management and opportunistic infections management.
- * Network and coordination was established with other institutions like MYRADA and IPPCC to provide medical assistance and support to PLHIV and OVC.
- * The project team also underwent training in WSW perspective building to better enable them to reach rural sex workers including those living with HIV/AIDS.

The project also faced some challenges, especially in the initial stages. For example:

- * Identifying and reaching PLHIV and WSW was difficult as most of them would not disclose their status due to the prevailing stigma and discrimination.
- * Promoting use of condom through condom outlet boxes was not welcomed by the villagers initially and protecting these boxes was a challenge.
- * Motivating WSW and their clients to take an HIV test was not easy due to the distance of the Integrated Counselling and Testing Centre from the village and the poor quality service it provided.
- * Similarly, it was difficult to motivate PLHIV, who were mostly ignorant about their status, to access available medical services.



badaku



Meaning "Let Live!" the Baduku project is funded by the World Bank's South Asia Regional Development Marketplace award to support action by the community against stigma and discrimination of PLHIV. The project is a collaboration of three community-based organisations, namely, Swathi Mahila Sangha, Jyothi Mahila Sangha and Vijaya Mahila Sangha, with technical support from Swasti and Bhoruka Charitable Trust.

Initiated in June 2008, the project seeks to build and enhance capacities of WSW, especially those living with HIV, to fight stigma and discrimination. It also aims to sensitise secondary stakeholders and strengthen community monitoring of stigma and discrimination.

Key achievements for the Baduku project over the past year included:

- * Leadership training delivered to 30 PLHIV.
- Outreach and support for 345 PLHIV.
- * 9600 WSW and 1300 secondary stakeholders were sensitised on reducing the stigma and discrimination associated with HIV/AIDS.
- * Six campaigns conducted to create awareness and visibility about reducing the stigma and discrimination associated with HIV/AIDS including through effective utilisation of mass media (television and newspapers).
- * Tool developed to enable monitoring of stigma and discrimination by community members.





50 full-time professional 80 network consultants 59 staff in action research and Implementation projects 12 interns

5 resources

human resources

The significant achievements of Swasti over the past 12 months would not have been possible without a strong and capable team putting in strong efforts. Swasti is committed to 'the recruitment, development and retention of the highest quality staff including young professionals to achieve its mission and positively discriminates for women, the disabled and HIV positive persons.

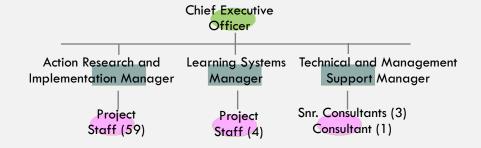
In 2008-09, Swasti had a core team of 50 full-time professionals from diverse backgrounds within the development sector such as health, women's rights, governance, organisational development and human resources (a detailed staff list is provided in Annexure 2). Swasti also has 59 staff working on Action Research and Implementation of projects. Apart from the full time staff, Swasti has a database of 200 network consultants with expertise in various areas. In 2008-09, approximately 80 network consultants were engaged in Swasti assignments in some capacity or other.

In 2008-09, Swasti also had two interns from the Boston University School of Public Health and about 10 interns from local social work institutes in and around Bangalore. The local institutes included Acharya Institute for Management and Science, Bangalore Citi College, St. George College, Gulbarga University and Lorven Centre for Education.





organisation structure



capacity building

As an organisation, Swasti believes in continuous learning and improvement, which contributes to the quality of our work. One of the important initiatives this year was Leadership Development. As Swasti completed five years, there were staff members who had worked with the organisation since its inception and Swasti Management decided to support these individuals in career planning and goal setting. A selected team went through a series of workshops and received mentoring from HR experts, directors and peers on goal setting. The initiative will continue for the next three years and is aimed at strengthening leadership within the organisation.

In 2008-09, there were also a number of forums where teams were involved in strategic planning and business plan development for Swasti for the next 18 months.

Learning reflection sessions after completion of assignments also gave staff an opportunity to reflect and learn from mistakes and determine the best practices to be followed for future projects.

Swasti believes in providing an informal and fun workplace that promotes work-life balance for its staff so as to maintain high productivity and job satisfaction. It continues to strive to ensure that its organisational policies are sensitive and need based and allow staff the flexibility to manage their workload and personal commitments. In addition, Swasti brought its staff together in several instances over the past year to celebrate annual events and festivals, which helped the team bond.

infrastructure



In Bangalore, Swasti moved into new premises with the remaining Catalyst Group of organisations in May 2008. The new office is located in Ashwathnagar and gives easy access and scope for staff from all the three organisations to interact with each other. This also helps in facilitating cross-learning required for effective programme implementation.

The Pragati project office was relocated to Swasti's old premises in Sanjaynagar. In addition to Bangalore, in 2008-09, Swasti maintained a physical presence in a number of other cities including Delhi, Bhubaneshwar, Bhopal, Hyderabad and Madurai.



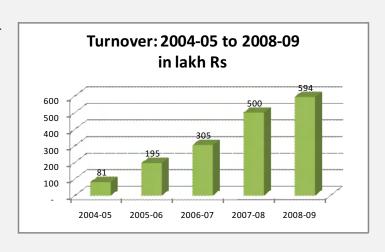
6 [finance]

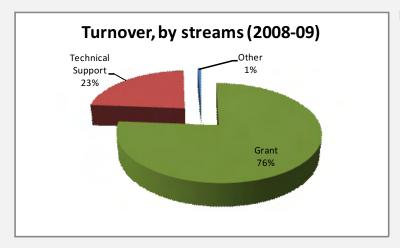
turnover

Swasti has two streams of turnover:

- a. Grants
- B. Technical Support

Swasti's turnover stood at Rs 5.94 crores for the year 2008-09. The turnover grew by 19% in the year 2008-09 in comparison to the previous year. The increase is attributable to increased quantum of funding for rural interventions and a higher number of assignments executed (22) under the technical support stream in the year 2008-09.

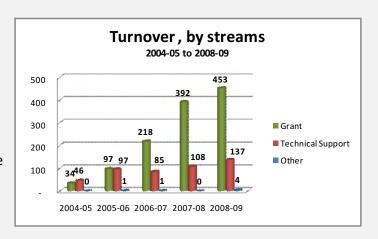




In the year 2008-09, 76% of the total Swasti turnover was contributed through the grants stream and 23% of the total turnover came in from the technical support stream. 1% was contributed from interest earned.

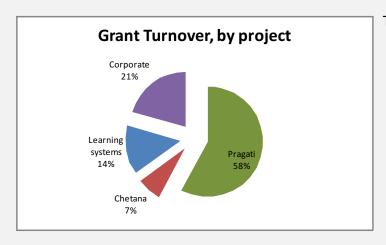


There was a 16% increase in turnover from grants in comparison with turnover generated through grants in the previous year. In the year 2007-08, two new projects were initiated at the end of the year and funding for these was provided in 2008-09.



Technical support assignments increased from 17 in 2007-08

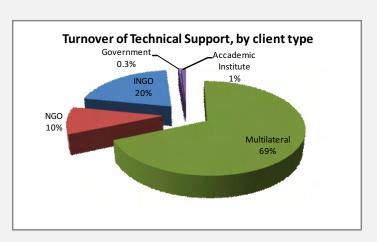
to 22 in 2008-09. This resulted in 27% increase in turnover from the technical support stream from the previous year.



Through the grant stream,
Swasti implemented four
projects in 2008-09;
Pragati, an urban initiative
for empowerment of sex
workers; Chetana, a rural
HIV prevention
programme, a learning
system project for HIV
prevention and care
programming and a
corporate programme for

empowerment of female garment workers. The urban programme contributed 58% of the total grant turnover for 2009-09.

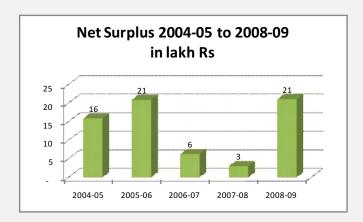
The technical support turnover was primarily derived from multilateral organisations (69%) and international NGOs (20%).



surplus

Rs 21 Lakhs was the net surplus for the year 2008-09. This is 86% higher than the surplus generated in the year 2007-08. The grant stream saw a 7% increase in gross margin in comparison to 5% increase in the previous year. This contributed to the increase in overall surplus.

The technical support stream also yielded a 15% gross margin in comparison to 7% in the year 2007-08. This was due to concentrated efforts to reduce expenses for lump sum or bulk assignments.



operational costs

The operational costs for Swasti in the year 2008-09 were 6% of the total turnover in comparison to 5% in the year 2007-08. Swasti spent Rs 9.72 lakhs in capacity building of its team members compared with Rs 8.4 lakhs in the previous year. The maintenance of similar percentages of operational cost to turnover were controlled through various cost leverages and cost reduction efforts at the Catalyst Group level.



AUDITED FINANCIAL STATEMENT 2008-09

SWASTI

19,1st main, 1st Cross, Ashwath Nagar, Bangalore- 560094

BALANCE SHEET AS AT 31st MARCH 2009

Particulars	Sch	Amount (in Rs.) 31-Mar-09	
SOURCES OF FUNDS			
General Reserve	- 1 - 1		
Opening Balance	1 1		4,584,335
Surplus for the year			2,068,776
Total			6,653,111
APPLICATION OF FUNDS	$\neg \neg \neg$		
Fixed Assets	1 1		516,556
Current Assets, Loans and Advances	2	26,806,394	
Less : Current liabilities and Provisions	3	20,669,839	
Net working capital (2-3)			6,136,555
Total			6,653,111

Schedules 1 to 10 forming part of financial statements

For Swasti

Siddhi Mankad

Secretary

R.Mohan Treasurer

Date: 17.09.2009 Place : Bangalore. Refer to Our report of even date

for AITHAL ASSOCIATES CHARTERED ACCOUNTANTS

CA CHANDRA SHEKHAR AITHAL B

M NO.205102

SWASTI

19,1st main, 1st Cross, Ashwath Nagar, Bangalore- 560094

INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31st March 2009

REVENUE	Sch	Amount (in Rs.) 31-Mar-09
Implementation Receipts	4	45,282,466
Social Development Charges	5	13,688,395
Other Income:	6	443,615
Total Income		59,414,476
EXPENDITURE	Sch	Amount (in Rs.) 31-Mar-09
Implementation project expenses :	7	42,305,548
Administrative expenses	8	3,519,851
Social Development Expenses	9	11,462,906
Depreciation	1	57,395
Total Expenditure		57,345,700
Excess of Income Over Expenditure (Surplus)		2,068,776

Schedules 1 to 10 forming part of financial statements

For Swasti

Siddhi Mankad Secretary

R.Mohan Treasurer

Date: 17.09.2009 Place: Bangalore. Refer to Our report of even date

for AITHAL ASSOCIATES CHARTERED ACCOUNTANTS

CA CHANDRA SHEKHAR AITHAL B Proprietor

M NO.205102



ANNEXURE 1: SWASTI BOARD MEMBERS

NAME	DESIGNATION ON THE BOARD
Mr. M.R.C. Ravi	Chairperson
Ms. Siddhi Mankad	Secretary
Mr. R. Mohan	Treasurer
Mr. P. Rajarethinam	Member
Dr. Revathi Narayanan	Member
Mr. N. Shiv Kumar	Member
Mr. N. Raghunathan	Member
Dr. Jacob John	Member
Mr. Nandlal Narayanan	Member

ANNEXURE 2: STAFF DETAILS

N. Shiv Kumar
Dr. Angela Chaudhuri
Chandrashekhar Gowda
Joseph Julian
Shama Karkal
Dr. Mahesh Srinivas
Vandana Nair
Lavina Cardoza
Bhagyalaxmi Savyell

Diana Divya Crasta

S.B. Saoor
Dr. Revathi Narayanan
Deepthi Sutapalli
Angaja Phalguni
Nitin Rao
Srinivas T.
Manjula Malagi
Krishna Moorthy
Poornima
Anil Kumar T S
Amruthavalli
Asha
Asmath Bee
Aruna

Chief Executive Officer Senior Consultant Senior Consultant Senior Consultant Senior Consultant **Senior Consultant Senior Consultant** Senior Consultant Documentation Officer, **Learning Systems Learning Sites** Coordinator, Learning **Systems** Consultant Consultant Consultant Consultant Finance Manager **Accounts Manager Accounts Officer Accounts Manager Accounts Officer Accounts Officer Senior Consultant** Peer Educator, Chetana Peer Educator, Chetana Peer Educator, Chetana

B.M. Nagaraj Bhagya S. Bhuvan Chand

Dr. Shobhana Swami

Gangarathna Geetha Hareesh B. S Hemavathy Jayanand Patil

Jayaram

Jayamma Lakshmidevi Kalavathy Reddy Kantha Krishnamurthy.D.C. M.K. Ali

Mangala Malathi Manjula T.N. Manjunath Muniratna Nagaraja K.N. Nagaraj

Zonal Manager, Pragati Link Worker, Chetana Office Assistant, Corporate Programme Research Coordinator, **Learning Systems** Peer Educator, Chetana Peer Educator, Chetana Zonal Manager, Pragati Peer Educator, Chetana Administration Officer, Pragati Office Assistant, Corporate Programme Peer Educator, Chetana Peer Educator, Chetana Counsellor, Pragati Staff Nurse, Pragati Accounts Officer, Pragati M&E Officer, Corporate Programme Counsellor, Pragati Link Worker, Chetana M&E Officer, Chetana Peer Educator, Chetana Link Worker, Chetana

Link Worker, Chetana





Narasimhamurthy .H. A. Link Worker, Chetana Narayan S. Office Assistant, Learning

Systems

Pavana Murthy Programme Manager, Chetana

Prabhavathi Peer Educator, Chetana
Prakash S. H. Zonal Manager, Pragati
Prabhakar Capacity Building Officer,

Pragati

Pratibha D'mello Capacity Building Officer
Pushpavathi Link Worker, Chetana

Parvathamma Nurse, Pragati

Raghavendra C. Link Worker, Chetana Rajendra. R Zonal Manager, Pragati Ravi J Field Supervisor, Chetana Staff Nurse, Pragati Ramamani Ramesh Parida **Administration Officer** Rathnamma Peer Educator, Chetana Ravikanth Angadi Zonal Manager, Pragati Rupesh Mittal **Administration Officer** Sandhya Jyothi Link Worker, Chetana Taluk Coordinator, Chetana Sanjeev G. Pujar

Sethu Lakshmi Capacity Building Officer,

Corporate Programme

M&E Coordinator, Pragati
Zonal Manager, Pragati

Shaonli Chakraborty M&E Coordinator, Corporate

Programme

Shashikala D. Nurse, Pragati

Shadakshari T.S.

Shankar Prasad M.B.

Sonia Wazed Documentation Officer,

Corporate Programme

Varalakshmi Peer Educator, Chetana Venugopalachar Link Worker, Chetana



ANNEXURE 3: LIST OF ORGANISATIONS WORKED WITH IN 2008-09

In 2008-09, our work was possible due to the support and collaboration of different organisations and we would like to acknowledge them.

African Medical and Research Foundation Alliance for AIDS Action Catalyst Management Services GAP Inc.

Global Fund to Fight AIDS, Tuberculosis, and Malaria Global Fund to Fight AIDS, Tuberculosis, and Malaria, China Programme India HIV/AIDS Alliance

Indian Nursing Council

International Centre for Research on Women

ITAD

Joint United Nations Programme on HIV/AIDS

Karnataka Health Promotion Trust

Karnataka Network of Positive People

Ministry of Health and Family Welfare, Government of India

National AIDS Control Organisation, India

National AIDS Council, Philippines

Oxfam International

Population Foundation of India

Shahi Export Private Limited

Snehadaann

Swathi Jyothi Mahila Vividodesha Souharda Sahakari Niyamita

Swathi Mahila Sangha

Technical Support Facility Eastern Africa

Technical Support Facility South East Asia Pacific

The Bill & Melinda Gates Foundation

The Royal Tropical Institute, Amsterdam



