



**APNALAYA**  
Empowering the Urban Poor

# ANNUAL REPORT

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**2023 - 2024**



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Apnalaya (registered in 1973) works with the urban poor community. Enabling access to basic services, healthcare, education and livelihoods; Empowering them to help themselves; and Ensuring provision of civic entitlements through system strengthening.

For more information, visit [www.apnalaya.org](http://www.apnalaya.org)



## 1. LEADERSHIP SPEAKS

### Praveen Singh, CEO

With a sense of immense pride, I present to you the Apanalya Annual Report of 2023-24. It has been a transformative year, creating sustained impact with the most marginalised of urban poor communities.

Apnalaya's approach to empowering urban poor communities revolves around three pillars of engagement. First, the Jeevan initiatives address essential survival needs, ensuring access to healthcare, education, livelihoods, and government services. The Samarth engagements aim to cultivate empowered communities by fostering local leadership, enhancing community capacity, and promoting self-reliance. At the same time, Udaan seeks to strengthen systemic frameworks by collaborating with stakeholders, including governing bodies, corporations, academia, and civil society organisations, to develop collective solutions for combating poverty, all with the goal of creating equitable urban communities.

In 2023-24, Apnalaya reached a total of 1,39,827 individuals across three wards in Mumbai. Our outreach to men saw a significant increase of 89%, reaching 54,351 men. Similarly, our efforts with women grew by 38%, bringing the total number of women reached to 85,476 over the past year.

This year emphasised community-led actions, empowering residents to identify issues and create sustainable solutions. Grassroots activities like National Breastfeeding week, National Nutrition Month, Right to Education rallies and camps to connect people to government schemes and services further have promoted community engagement. Collaborating with local government, we've worked on improving sanitation and accessibility at Govandi station for persons with disabilities, the elderly, and pregnant women. These small victories inspire us to amplify our efforts for further community-driven change.

I am grateful to all Apnalaya's stakeholders—local government officials, community members, donors and partners, well-wishers, and above all, the Apnalaya team. Your unwavering support and belief in our mission have been instrumental in helping us pursue the impactful work we are dedicated to accomplishing.

## 2. ABOUT APNALAYA

Over the past 50 years, Apnalaya, established in 1973, has gone through significant changes, driven by the valuable lessons we've learned along the way. While our initial focus was on delivering essential services to under-served communities, we gradually shifted our approach to prioritise empowering individuals and fostering sustainable community development.

As we reflect on this journey, we acknowledge the growing challenges posed by rapid urbanisation in India. The intergenerational cycles of deprivation, vulnerability, exclusion, and insecurity are expanding and are projected to worsen by 2030. According to the UN World Urbanisation Prospects 2018, India is expected to see 13.9 million households living in slums and a staggering 600 million urban residents by that time.

Addressing these complex and multifaceted issues requires a proactive and multidimensional approach. Our experience has shown that effectively tackling urban poverty involves not only meeting immediate survival and safety needs but also implementing strategies that confront underlying systemic problems. By integrating diverse interventions and fostering collaboration across sectors, we are committed to creating a sustainable and positive impact for the urban poor.

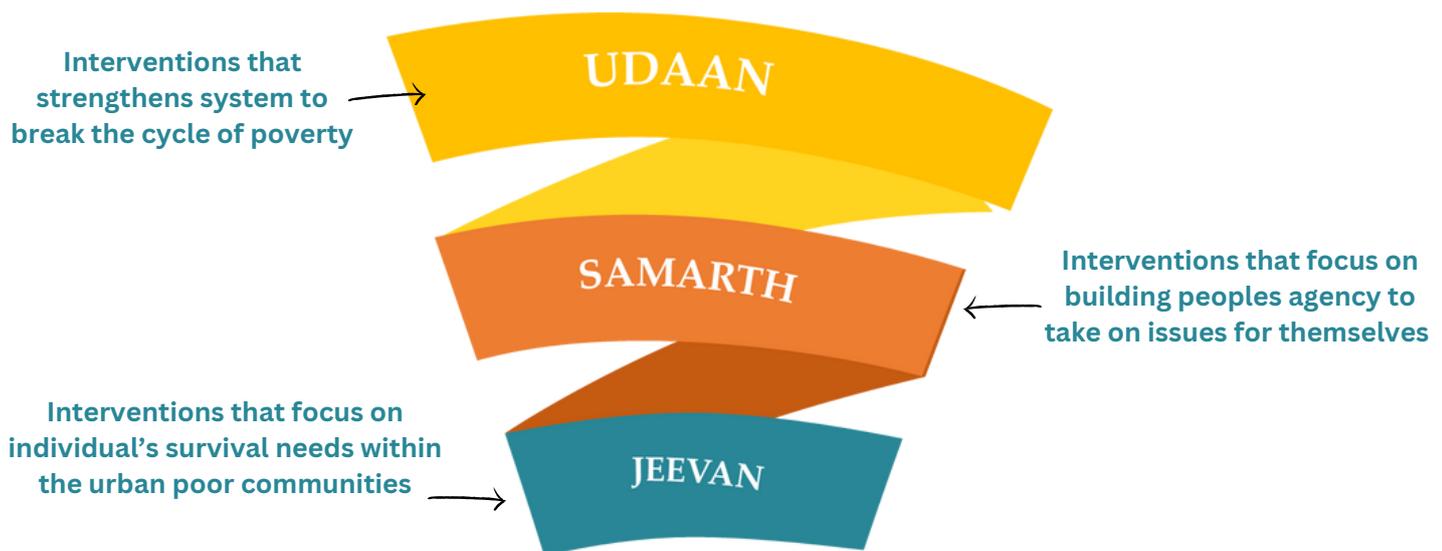
### 3. BREAKING THE CYCLE OF POVERTY: APNALAYA'S APPROACH

Apnalaya's approach empowers urban poor communities through three important pillars that work in unison.

**Jeevan** prioritises essential survival needs by ensuring access to healthcare, education, and livelihoods, while promoting inclusivity for persons with disabilities and emphasising social security schemes to meet the basic necessities for all.

Simultaneously, **Samarth** focuses on enhancing safety and empowering communities. This phase is dedicated to building local leadership and promoting self-reliance, enabling residents to proactively tackle their challenges and advocate for their needs. By fostering an environment of empowerment and self-determination, Samarth ensures that communities become not only safer but also more capable of sustaining and driving their own development.

Finally, **Udaan** addresses the broader systemic factors that perpetuate poverty. This pillar employs a collaborative approach, engaging local governments, NGOs, and community organizations to develop comprehensive solutions. By tackling interconnected aspects of poverty and fostering partnerships, Udaan aims to break the cycle of poverty and support the development of equitable and thriving urban communities.



## 4. OUR PROGRAMMES

### **Health & Disability**

The Health and Disability intervention has been one of our longest-running initiatives over the past 50 years, addressing a critical need within the vulnerable communities that Apnalaya serves. This programme aims to break the cycle of intergenerational poor health affecting mothers, children, adolescents, and people with disabilities. It focuses on improving health-seeking behaviours, building the capacities of community members, and strengthening existing health systems in the M East and M West ward.

### **Maternal, Newborn, Child Health, and Nutrition (MNCHN)**

We address maternal and child health and nutrition through a multi-dimensional approach that encompasses nutrition-specific and nutrition-sensitive strategies, along with creating an enabling environment based on the Lancet framework. Our intervention has successfully mobilised the community to engage in these critical issues and has established community-level groups to enhance access to improved health and nutrition services. Additionally, we have formed linkages with key departments of the Integrated Child Development Scheme, Public Health, and Social Welfare to improve service delivery in the area.

### **Persons with Disabilities (PwDs)**

Disability continues to carry a stigma in many parts of Indian society, often resulting in persons with disabilities (PwDs) being hidden from view. Since service provision relies on government statistics, the stringent definition based on the impairment framework leads to significant undercounting, which in turn affects the availability of services for PwD. In the urban poor communities, this further perpetuates the cycle of poverty and marginalisation people face.

Our intervention for Persons with Disabilities (PwDs) is currently active in 41 clusters within the M East Ward of Mumbai. We work to identify children and adults with disabilities, helping them access essential services and civic entitlements. Additionally, we aim to develop community ecosystems that empower PwDs to become active members of their communities.

## **Education & Livelihood**

Apnalaya's Education, Employability, and Empowerment (E3) intervention supports youth and adolescents in Shivaji Nagar in their pursuit of education up to the 12th grade. The programme is designed to keep students in school, prevent child marriage, enhance health, and develop essential skills. Its key goals include:

1. Ensuring students remain in education.
2. Raising awareness and negotiation skills regarding sexual and reproductive rights.
3. Providing knowledge and skills for informed decision-making and community involvement.

The programme employs experiential learning and mentoring to foster self-awareness, critical thinking, and civic education, preparing youth for higher education and future livelihood opportunities. It emphasises life skills for 15-16 year-olds and employability skills for those aged 17-19.

Additionally, the livelihoods project aims to enhance the quality of life for women in Shivaji Nagar through economic empowerment and support services. This initiative seeks to:

1. Increase women's income by 15% and improve employability through skills development.
2. Provide quality childcare that supports child development, enabling women to engage in productive activities.

## **Citizenship & Advocacy**

The Citizenship and Advocacy (C&A) intervention is rooted in a community empowerment model, focusing on developing individual leadership and collective action based on constitutional values.

This flagship programme by Apnalaya aims to establish well-informed and value-based collectives in urban poor settlements, motivating them to bring about positive changes in their lives. These changes range from ensuring access to basic amenities to facilitating their participation in urban governance.

## 5. 2023-2024 IN REVIEW

### I. KEY HIGHLIGHTS

#### **A. Expansion in two new wards in December: M-West and L-Ward**

Encouraged by the positive outcomes of the citizenship programme in M East ward, the intervention expanded to two additional wards (L & M West) in Mumbai. Furthermore, two new community centres were established during this period. These wards were chosen based on their ranking on the Human Development Index (HDI), as they were identified as the lowest-ranked wards after M East ward.

#### **B. Devised a roadmap for Apnalaya's Partnership and Fellowship approach – 10 wards in 3 years**

To scale out to the 10 wards of Mumbai city, a partnership project was launched this year in Apnalaya, where we have partnered with 3 partner organisations with the community focus in the 3 new wards (administrative areas) of Mumbai (F North, R South, H East). This project plans to scale out with Apnalaya's collectivisation model, where we can look at building social capital and individual agency within new communities using our training modules and capacity building of the community members.

#### **C. Started an innovative pilot for Socio-emotional Learning**

Since January 2024, Apnalaya has launched an innovative pilot project for Socio-Emotional Learning (SEL) with 100 children aged 12 to 16 in the M East ward. This is the first intervention of its kind for urban poor communities in Mumbai. Previous initiatives focused on life skills, English speaking, and digital skills, but often overlooked the critical age group of 12 to 16 years. This pilot aims to fill that gap, ensuring that adolescents receive the support they need to continue their education and develop essential employability skills.

#### **D. Living conditions of Urban Poor: A study in 10 wards was completed**

Last year, Apnalaya initiated groundbreaking research to establish a comprehensive information base on the urban poor residing in Mumbai's slum communities. Recognising the lack of data and reliable information, Apnalaya, as an implementing organisation, aimed to conduct a study to gain a deeper understanding of the living conditions and experiences of the urban poor throughout Mumbai. The research focused on 10 wards, with nine selected for their high slum populations and one chosen through purposive sampling. It has been scheduled to be released in the first quarter of the next financial year.

### **E. Apnalaya's 50-year journey document-Oral History**

Apnalaya had embarked on a heartfelt journey to document its rich history through the Oral History Report. Personal stories and experiences of our employees, partners, and beneficiaries were captured. By conducting 66 interviews, this report preserves the voices and memories that have shaped Apnalaya over the years. This collection of stories not only highlights the organisation's challenges and achievements but also serves as a treasure trove of wisdom and inspiration for future generations. The book is in its design stage and is planned to be launched the next financial year.

# OUR IMPACT 23-24

1,39,827

People reached



42.5%

370 out of 870 women joined the workforce for the first time

49%

1673 out of 3389 PwDs supported for unmet needs (education, livelihood, health)



77.7%

585 out of 753 of adolescents moved from basic to intermediate level in the learning outcomes

83.67%

In high risk pregnancies, 1138 births out of 1360 deliveries were healthy birth outcomes



4,972

Community volunteers trained and engaged

51,124

Individuals impacted through civic action



# JEEVAN

## FROM SURVIVAL TO STABILITY

The Jeevan initiative addresses the fundamental survival needs of underserved communities. Our primary objective is to ensure that individuals have access to essential services that form the foundation of a stable and healthy life. This includes facilitating access to quality healthcare, which is crucial for preventing and treating illnesses, managing chronic conditions, and promoting overall well-being. By offering medical services, health education, and resources, Jeevan aims to reduce health disparities, promote inclusivity and improve the quality of life for those who are most in need.

In addition to healthcare, Jeevan focuses on providing educational opportunities, supporting persons with disabilities and livelihoods. Access to education is vital for empowering individuals and breaking the cycle of poverty.

We work to ensure that children and young adults can attend school, receive quality instruction, and acquire the skills necessary for future success. Simultaneously, Jeevan supports livelihood development by offering resources and training to help individuals secure stable employment or start their own small businesses. This comprehensive approach ensures that people have not only their immediate survival needs met but also the tools and opportunities to build a more secure and prosperous future.



## I. JEEVAN INDICATORS AND HIGHLIGHTS



# 98%

11,867 out of 12,091 are healthy birth outcomes



# 16%

2,353 out of 14,322 high risk pregnancy identified and supported



# 31.5%

1,336 out of 4,241 Children (0-6) who are underweight



# 78%

9,239 out of 11,867 pregnant women who received full ANC during pregnancy

### Health and Disability

#### A. MNCH

This fiscal year, there were 11,139 pregnancy outcomes in the slum areas of M East and M West wards in Mumbai. Out of these, 134 were miscarriages, 69 were MTPs, and 10,936 were deliveries (including 54 stillbirths). Among the deliveries, there were 10,995 live births, including 113 pairs of twins. 75% of mothers (8,369) completed four follow-ups. Birth weights were recorded as 9,520 normal, 1,159 moderate, and 316 underweight.

In the first trimester, 2,353 pregnancies were registered, with home visits conducted for 657. During these visits, information on ANC care and nutrition was provided, along with hospital checkups and medical support. Medical support was given to 26 high-risk mothers (7 from M East and 19 from M West).

In M West, an ANC clinic is held monthly at the health post, with staff and doctors providing sessions and counselling. High-risk mothers are brought to the clinic by Sakhi volunteers.

Additionally, work with five maternity homes have begun registering new pregnant women and collecting information on high-risk mothers for individual follow-ups with the support of our Arogya Sakhis.

## B. MNCHN

In the financial year 2023-2024, 4,241 children under 6 years in 15 slum clusters near Deonar Dumping ground (M East ward) were monitored for growth. Among them, 31% were underweight, 41% were stunted, and 12% had acute malnutrition. Apnalaya's individual intervention reduced malnutrition in the underweight (Weight by age) category by 4%.



# 29%

33 out of 113 CwDs  
have been enrolled to special  
and mainstream schools



# 45%

1,516 out of 3,389 PwDs  
who have disability  
certificate and UDID

## C. Disability

In the fiscal year 2023-24, 98 out of 134 eligible Persons with Disabilities (PwDs) registered in the organisation's disability programme received a monthly pension of Rs. 1,500 through the Sanjay Gandhi Niradhar Yojana Scheme. Additionally, 57 PwD students received government educational scholarships, and 5 PwDs registered for Niramay health insurance and Mahatma Jyotiba Jan Arogya schemes.

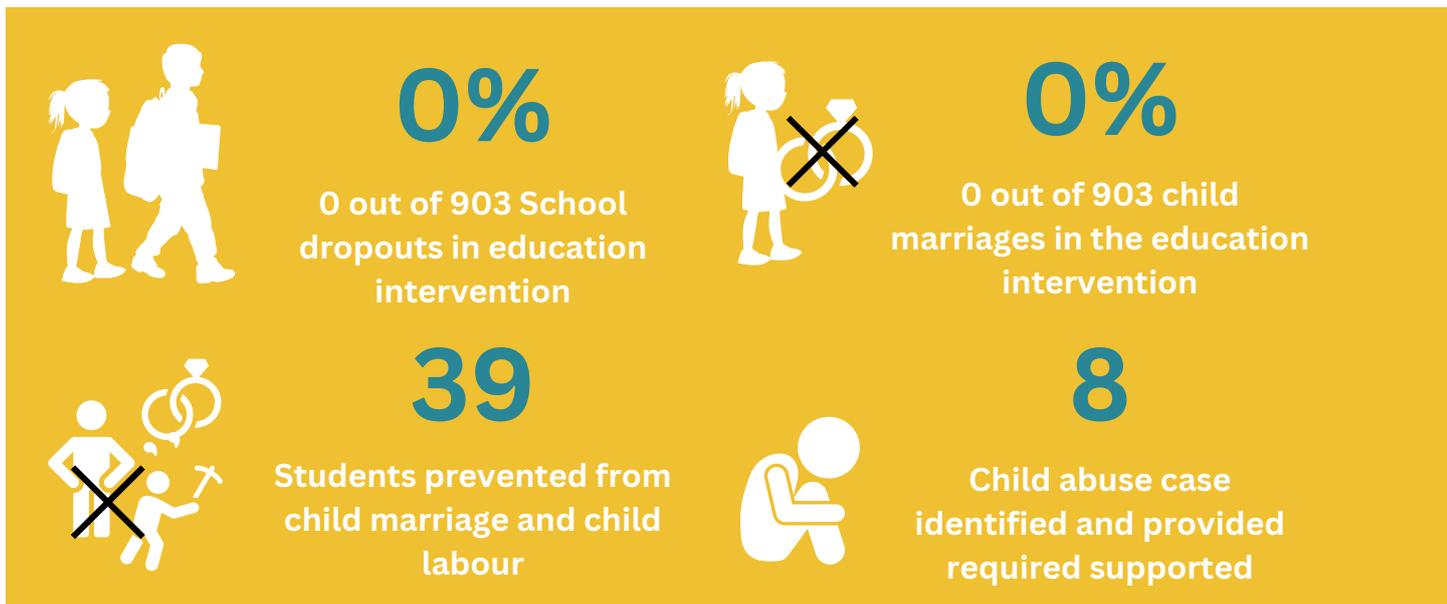
As part of our intervention, the programme team works closely with Persons with Disabilities (PwDs) in disseminating awareness regarding obtaining necessary documents for availing government schemes and services. Out of 1,910 applications, 867 received UDID and Disability certificates. The Nanhe Kadam daycare facility, a component of the programme, prepared 113 children with disabilities for school, with 33 admitted to special and mainstream schools.

## Education

The E3 (Education, Employability, and Empowerment) programme in Shivaji Nagar supports adolescents and youth by helping them continue their education, improve self-awareness, understand their social context, and work on their aspirations. Community educators receive monetary support and life skills training, while adolescents benefit from sessions on spoken English, digital literacy, and programming. Parents engage with the field team on gender issues and receive financial literacy training through partner organisations.

This holistic approach addresses dropout determinants and promotes financial stability and upward mobility for youth and their families.

Walking within is a new venture which aims at working on students' inner capacities of socio emotional wellbeing and higher order thinking capabilities, thereby contributing towards their overall development. It aims to contribute towards preparing caring individuals who relate positively to the wider community, understand the issues that mark our present-day world order and who can think clearly as per their age and act responsibly.

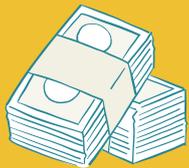


## Livelihood

To achieve self-sustainable communities, Apnalaya involves the community in every intervention, encouraging them to contribute to problem-solving and support others in understanding livelihood objectives. They formed 45 Self Help Groups (SHGs) to identify and solve community issues, provided community mapping to show available services, and conducted sessions on leadership and livelihood opportunities under schemes like the National Urban Livelihood Mission (NULM) and the Building and Other Construction Workers (BOCW) Act. Government staff facilitated these sessions, benefiting both staff and community volunteers by improving awareness of facilities and barriers to accessing services.

The project team and SHG leaders also visited NGOs such as Vision Rescue, Yuva, and Eklavya Foundation, which work on entrepreneurship development, social

security schemes, child development, and children’s literature. They participated in the formation of Area Level Federations and meetings organised by the NULM team. This quarter, Apnalaya made significant contributions at individual, community, and government levels, demonstrating progress in referrals and linkage with livelihood opportunities.



21%

Increase in household income of women through livelihood support



471

Women in workforce and generate income through CCC

### Disaster Relief

Disaster relief for 54 families in Indira Nagar affected by fire on Feb 17, 2024. Sustenance, necessary supplies and medical aid provided for a month.



Disaster Relief provided with help of volunteers and staff

## II. AWARENESS AND VISIBILITY

### Health and Disability

#### A. MNCHN

- **Breastfeeding week**

In August 2023, Breastfeeding Week was celebrated in seven health post areas in the ME ward. Health Post doctors and the project team conducted sessions on the importance of early initiation of breastfeeding within an hour after birth, exclusive breastfeeding for the first six months, and introducing complementary feeding after six months while continuing breastfeeding. The sessions emphasised exclusive breastfeeding's role in preventing children's morbidity. They revealed that many women in the community lacked accurate information on breastfeeding, leading to complaints of insufficient breast milk.



Activities planned during the Breastfeeding Week Celebration

- **National Nutrition Month celebration**

September is celebrated as Nutrition Month. Health Posts participated in awareness activities, providing information on the seven food groups, home-made food, and nutrition during pregnancy and after delivery. Cooking demonstrations were also held. The project team decorated the information stall to highlight pregnancy care and nutrition.



Session at Health posts as a part of Nutrition Month

Mother Support Groups (MSG) leaders took part in a community health awareness programme on waterborne diseases, Dengue, Malaria, and Leptospirosis, at a health post. They are proud of the government’s trust in them for community awareness.



Mother support groups (MSG) leaders during awareness campaigns

- **Awareness rally in the community**

Seven awareness rallies started from the Shivajinagar Maternity Home, Old Bainganwadi Health Post, and Shatabdi Hospital. ME Ward Office, M Ward Office, Tilak Nagar Health Post, Chembur Naka Maternity Home The rickshaw rallies were inaugurated by the AMO (Assistant Medical Officer), the BMC Health Posts and then started the awareness in the communities, gave information through speakers in crowded places among the groups of people. They stuck the posters in the communities and banners with information on the benefits of regular ANC check-ups along with schemes and services available at the health post for the communities.

BMC health post staff and project team members, including Arogya Sakhi, conducted the programme using the slogan: **“Har Ma ke jeevan ka ho Samman, Ma ka stanpan hi hai bacche ka annapan.”** The programme reached ME & MW Wards indirectly.

Following the event, the project team and the health post team developed a close relationship and provided mutual support for their activities and the beneficiaries they served. The health post was receptive to all the project team's requests for innovative activities. After the awareness programme, the Arogya Sakhi and Health Post team noticed an increase in people asking about the available facilities and benefits for pregnant women at the health post.



Rickshaw rally in the community

## B. Disability

Raising awareness about disability in the community is a continuous process. Our goal is to ensure that even the most marginalised individuals are reached, and if a person with a disability cannot access facilities or information about our organisation, we will bring the information directly to their doorstep. We conducted awareness activities through rickshaw rallies, megaphone announcements, and the distribution of information, education, and communication (IEC) materials such as posters and pamphlets. These events were very well received, as evidenced by the increased footfall at our centres.

- **Awareness drive on stigma and discrimination towards disability**

Awareness drives were organised to reduce stigma and discrimination towards disability and highlight the importance of documents for persons with disabilities. Interactive tools like flip charts, ladder games, and quizzes enhanced engagement. The team conducted an intensive awareness drive using megaphones with an aim of reaching each and every gully and mohalla.

As persons with disabilities approached respective stalls set up in communities and shared their doubts, queries and barriers. The field team addressed all queries and suggested they get in touch with respective centres so that team can help them appropriately and will take necessarily follow up. The awareness drive was conducted in 11 new clusters of Vashi Naka communities, Mandala area and Cheetah camp area.

On November 23rd, an event was organised to observe Constitution Day, accompanied by awareness rallies focused on highlighting the significance of the Constitution. People with Disabilities (PwDs) and volunteers actively participated in these rallies, advocating for inclusivity and equal rights. Additionally, informative stalls were set up to raise awareness about disabilities and related issues.



Awareness drive for Persons with Disabilities (PwDs)

- **Disability day celebration**

This year Disability Day was observed with various activities aimed at promoting awareness and fostering community engagement. These activities included an Art festival, sports events, and additional rallies, all aimed at celebrating diversity and promoting the rights and well-being of individuals with disabilities. Through these initiatives, the community came together to celebrate diversity, promote awareness, and advocate for inclusivity and equality.

872 individuals (adolescents, and adults with & without disabilities) were reached through various events such as Art festivals, Quiz competitions, Sports, awareness stalls, and nukkad meetings directly and 4,500 were indirectly impacted. Community-based awareness camp 500 direct and 5,000 indirect.

- **Awareness session in collaboration with NGOs**

In collaboration with Mont fort care and Raochiram Thadani School, we have conducted three awareness cum hearing screening camps designed for children aged 0 to 6 years. These camps were instrumental in detecting hearing-related issues at an early age, allowing for immediate referral support. Among the 195 children screened, a significant number were diagnosed with wax accumulation in their ears, with 10 children referred for further treatment.

Additionally, in partnership with Ratna Nidhi Charitable Trust (RNCT) and SPANDAN Hospital, an aid and appliances awareness cum distribution camp was organised. Individuals with Disabilities (PwDs) and their parents were educated about various aids and appliances, and 41 Persons with Disabilities received essential items such as calipers, wheelchairs, CP chairs, sticks, hearing aids, and Jaipur foot, significantly improving their quality of life and mobility.

## **Education & Livelihood**

- **Walk for Education Rally**

A significant highlight was the Walk for Education rally, where 85% of adolescents from our programme participated with high enthusiasm. This event effectively raised awareness about the fundamental right to education within our community. The adolescents' vibrant participation not only highlighted the importance of education but also demonstrated their collective commitment to empowering society through knowledge and call for equal access to education for all.

- **Awareness Camps**

Camps for documents, government schemes and bank linkages to register SHG members for different government schemes, documentation, and bank linkages; camps were organised at 2 different locations. The representatives of various government departments helped with documentation and registration. 338 SHG members and their families and CCCs mothers were referred and have registered for schemes like post office savings scheme, Sukanya Samrudhhi Yojana, Pradhan Mantri Bima Suraksha Yojana, E Shram, Sanjay Gandhi Niradhar Yojana, BOWC scheme, Mahatma Phule Jan Arogya Yojana.

- **Awareness Campaign by SHG Leaders**

The SHG leaders who were trained on government schemes conducted awareness campaigns in their community to inform community members of the benefits of registration in government schemes and labour welfare schemes for informal workers. 196 SHG members were referred for the registration of welfare schemes.



Entrepreneur on her first day of business



Culmination of CCC training at Maharashtra Nagar



Home Visit at a pregnant women house (High risk pregnancy) in Pestom Sagar

### III. CASE STORY - JEEVAN

Nehaal, a five-year-old with multiple disabilities (speech and intellectual), lives in Shivaji Nagar with his family. Her father works as a transporter and labourer, while his mother is a homemaker. Initially, Nehaal's parents were in denial about his condition, which included an inability to communicate verbally and hyperactivity.

Recognising the need for intervention, Apnalaya arranged a home visit. During the visit, Nehaal's parents were counselled and informed about his condition. They were encouraged to address his needs appropriately. Nehaal had a strong attachment to mobile phones, which exacerbated his hyperactivity. To ease his transition, he was gradually exposed to short periods at the daycare, engaging in activities like songs, drawing, puzzles, and storytelling, away from the phone.

As a result, Nehaal began to enjoy his time at the daycare without relying on the mobile. However, he reverted to using it at home. Apnalaya advised his parents to limit his screen time and enrolled him in speech therapy at Pratham NGO, which helped him communicate using basic words. Efforts to create his Unique Disability ID (UDID) are underway.

Despite challenges, Nehaal remains an active member of the daycare. Apnalaya supports his parents with travel costs and organises monthly meetings to foster communication between parents and caregivers. An individual plan was devised for Nehaal, including activities at the daycare and home to divert his attention from the mobile, such as playing Ludo and Carrom. His mother was encouraged to involve him in household tasks. A significant amount of effort was necessary, particularly in facilitating the acceptance and understanding of their child's disability by the parents. Convincing the father to participate in counselling sessions required persistent encouragement and support.

Through these efforts, Nehaal's social, self-care, and fine motor skills have significantly improved. The holistic support from Apnalaya has also positively impacted his family, helping them understand and address his needs. Nehaal's father noted that the counselling sessions helped them spend quality time together as a family without mobile phones.



# SAMARTH

## FROM VULNERABILITY TO EMPOWERMENT

Samarth represents a crucial phase in the progression of community development, particularly following the foundational efforts of the Jeevan initiative, which addresses essential survival needs. This programme emphasizes the importance of enhancing safety and empowering urban poor communities to take ownership of their challenges. By focusing on building local leadership and promoting self-reliance, Samarth seeks to equip residents with the tools necessary to proactively improve their circumstances. This shift from merely meeting basic needs to fostering empowerment underscores a holistic approach to development, where individuals are encouraged to become active participants in their own growth.

Through Samarth, communities are not only made safer but also more resilient and self-sustaining. The initiative creates an environment that values local voices and encourages collective action, allowing residents to articulate their needs and work collaboratively towards solutions. This empowerment fosters a sense of agency and responsibility, which is essential for long-term development. By investing in the capacity of urban poor communities, Samarth transforms them into dynamic entities capable of driving their own progress, ultimately leading to a more equitable and thriving society. This emphasis on self-determination and local leadership marks a significant evolution in how development initiatives can effectively support and uplift marginalised populations.



## I. SAMARTH INDICATORS AND HIGHLIGHTS



# 4,972

Total Volunteers of  
Apnalaya



# 884

Total community and  
household level civic  
actions engaged with



# 303

Total number of Civic  
Action Groups (CAGs)



# 2,785

People who accessed  
government schemes  
and services

### Health & Disability

#### A. MNCHN

- **Enhancing Service Utilisation through Capacity Building of Mother Support Groups**

Improving the uptake of essential health and nutrition services, such as Health Posts, Aapla Davakhana, and Anganwadi centres, through the capacity building of 118 Mother Support Groups (MSGs). These groups consist of 2,052 members spread across two wards. The objective is to empower these mothers with the knowledge and skills necessary to actively engage with available health services, advocate for better care, and spread awareness within their communities. Through community leadership and peer support, the initiative fosters a sustainable approach to health service utilisation.

#### B. MNCH

Growth monitoring of over 4,000 children was conducted with the support of 24 trained adolescent leaders. The adolescent leaders assist Anganwadi workers by conducting regular check-ups, recording the height, weight, and other growth indicators of children. This collaboration strengthens the Anganwadi system by ensuring consistent monitoring and timely reporting of any health concerns.

A total of 120 trained adolescent leaders engaged with 3,322 peers to spread awareness about various health topics, including balanced nutrition, hygiene, reproductive health, and physical activity. By employing a peer education model, the programme empowers adolescents to take charge of their health while also promoting healthier lifestyle choices within their communities. The initiative not only enhances health literacy among young people but also creates a ripple effect, as these adolescents influence their peers and families, contributing to a healthier and more informed community.

### C. Disability

- 185 adult volunteers, both with and without disabilities, underwent training in the citizenship module to take up civic actions in their communities.
- Facilitated exposure visits for 190 community volunteers to various government departments, including the BMC ward office, Voter Registration Office, Ration Office, and Aadhar Office, AIIPMR, non-government organisations like HellanKellar School for deaf blind, National Association for disability enterprises, Cafe Arpan.
- To foster a more responsive and caring community towards the needs of PwDs, we have provided trainings to 665 community adolescent and adult volunteers, both with and without disabilities.



Community Volunteers (MSG) exposure visit to Aapla Dawakhana, M East



Transportation Officer interacting with PwDs on service for transport, M East

## Education & Livelihood

### A. Livelihoods

- **SHG members exposure visit to BOCW**

Three exposure visits were held with 75 SHG members with BOCW (Maharashtra Building and Other Construction Worker Welfare Board), E-Kendra, and Vision rescue organisation to learn about government schemes/ livelihood opportunities available in unorganised labour and for SHGs as many parents are working as domestic workers and on construction sites. These visits to BOWC helped them understand the benefits for construction workers including health insurance, accident insurance, education of children, etc. The E-Kendra visit helped women understand the registration process for the E-Shram card, PAN card, and Aadhar Card. The visit to Vision Rescue familiarised the women with various courses available for women entrepreneurs.

- **Formed and supported new CCCs by building a collective of CCC members in 9 clusters.**

Since 2015, Apnalaya has been instrumental in facilitating the formation and strengthening of Community Child Care Centres (CCCs) to address the social and economic needs of women in urban poor communities. Currently, 560 women from 21 clusters in the M East ward of Mumbai are part of this initiative. Through collective efforts, these CCCs are evolving into Community-Based Organisations (CBOs) with a distinct identity. Their focus extends beyond child care to include the formation and strengthening of women's groups, expanding enterprise opportunities, providing access to micro-insurance, savings, and fee-based member services, and advocating for women's empowerment. The CCCs also play a vital role in influencing local governance by prioritising women's and children's issues, ensuring that the voices of women in marginalised communities are heard and acted upon.



Community Child Care Centres (CCCs)

## Citizenship & Advocacy

- **Increasing access to basic civic amenities through people's participation**

Based on the values of the Indian constitution, Civic Action Groups (CAGs) in the M-East ward meet monthly to identify and address community issues. In 2023-24, 1,192 grassroots leaders from 60 CAGs initiated 623 civic actions, completing 150 community-level and 274 household-level actions.

**Household-level actions** included obtaining essential documents like ration cards, Aadhar cards, PAN cards, voter ID cards, birth certificates, and accessing social security schemes.

**Community-level actions** involved cleaning open gutters, constructing lanes and community toilet chambers, pest control, and improving ration quality.

These efforts, driven by community stakeholders, highlight the role of empowered and skilled communities as active partners in their development.



Lane Construction in M-East ward as a result of Civic Action groups efforts



Drain Cleaning issue raised by Civic Action Group in M-East ward and issue resolved with the help from BMC

- **Behaviour change for ensuring safe and clean access to sanitation**

Access to safe and hygienic sanitation in urban slums is a significant challenge. Based on Apnalaya's 2022 study, 'Rapid Assessment of Sanitation in the slums of Shivaji Nagar, Mumbai,' 7 community toilets were targeted for improvement. Through intensive training and behaviour change messaging with Toilet User Groups (TUGs) and Toilet CBO members, the condition of 6 out of 7 toilets was improved with community participation. These toilets are now cleaned more frequently, and damaged or missing infrastructure like taps, doors, and tube lights have been installed. The TUGs now ensure the toilets are maintained in usable condition.

## II. AWARENESS AND VISIBILITY

### Health & Disability

#### A. MNCH

- **Capacity-Building Sessions for Arogya Sakhis**

This fiscal year, 12 capacity-building sessions were conducted with 23 Arogya Sakhis on the Citizenship module (citizen rights and responsibilities) and technology used in the intervention model. These sessions raised awareness about social and individual responsibilities, self-identity, societal identity, and inequality.

The training emphasized the importance of knowing citizen rights and responsibilities, advocating for government services, and understanding the Preamble of the Indian Constitution, policies, and laws. Arogya Sakhis learned how to file RTIs and write letters to government departments.

The training boosted their confidence to engage with officers about their needs. Additionally, a technology partner conducted sessions on data management, tracking, and monitoring, guiding them on using technology for effective community engagement.



Capacity-Building Sessions for Arogya Sakhis

#### B. Disability

- **Exposure visits for community volunteers**

Advocacy and capacity-building efforts engaged various stakeholders, including ICDS centres, health posts, schools, BMC livelihood department, social welfare department, government hospitals like Rajawadi and Cooper, and NGOs.

This year, 4 exposure visits were facilitated for 85 community volunteers to government departments, including the BMC ward office, Voter Registration Office, Ration Office, and Aadhar Office. These visits aimed to familiarise volunteers with the functioning of essential government services. Volunteers gained practical knowledge of accessing public services, understanding administrative procedures, and interacting with officials. These experiences empowered them to assist community members in navigating bureaucratic processes effectively.



Exposure visits of Community Volunteers to M East Ward Office

## Education

### • Learning Exhibition

During the last year, we focused on empowering adolescents by encouraging their participation in various activities. Apnalaya organised learning exhibitions in local community spaces, attended by parents, school teachers, and community members. These exhibitions allowed adolescents to showcase their achievements from English learning sessions, fostering community awareness and engagement.

It was inspiring to see their enthusiastic participation as they confidently demonstrated their newfound skills through conversations, drama, music, and presentations, highlighting the importance of education and the potential of the youth in the community.



Learning Exhibition

## Citizenship & Advocacy

- **Ensuring the right to vote**

In collaboration with the Election Commission, a voter ID camp was organised in the M/E ward, with community volunteers facilitating voter registration. Awareness was raised through nukkad and centre meetings, educating the public about the importance of voting and the registration process. These efforts led to a more informed and engaged electorate.

To widen enterprise choices and engage in local governance, SHG members joined the Area Level Federation (NULM). Additionally, access to 7 community toilets was improved through BMC and community engagement.



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### III. CASE STUDY - SAMARTH

#### Toilet ek Satya Katha

The initiative to work on 7 community toilets in Shivaji Nagar to improve access to safe sanitation was taken up a year ago. The toilets and their premises were unclean, the toilet seats were unusable, there was poor quality of water, no washbasins and dustbins, and inadequate lighting.

Toilet User Groups (TUGs) were formed as part of the intervention and were given intensive training and exposure visits to discuss their role in ensuring safe sanitation facilities near them.

Initially, many challenges were faced such as identifying Toilet CBO members and their unwillingness to attend the trainings and meetings, and TUGs not willing to take responsibility for the community toilets.

However, through consistent efforts, the TUGs were able to recognise their responsibility and started taking action to improve the condition of their community toilets. Soon, taps and toilet seats were repaired, cleanliness improved, washbasins were installed, and dustbins and mugs were arranged.



Bharatiya Ekta Sangh Sanjay Nagar Toilet

# UDAAN

## Collaborative Solutions for Sustainable Growth

The Udaan intervention builds on the Jeevan and Samarth initiatives, expanding community development efforts to address systemic poverty. While Samarth enhances safety and self-reliance in urban poor communities, Udaan tackles the multi-dimensional nature of poverty through a collaborative approach. By engaging local governments, NGOs, and community groups, Udaan aims to dismantle barriers to progress and create sustainable solutions.

Udaan fosters partnerships to empower communities, advocate for policy change, and address interconnected issues like education, healthcare, and economic opportunities. This initiative seeks to break the cycle of poverty, promote equity and inclusion, and build resilient communities capable of sustaining their growth. Ultimately, Udaan strives to create vibrant urban communities where every individual can thrive.



## I. UDAAN INDICATORS AND HIGHLIGHTS

During the last fiscal year, we worked with multiple stakeholders under the Udaan initiative to address the multi-dimensional issue of urban poverty. The stakeholders we collaborated with include:

- **CSR (Corporate Social Responsibility):** Corporations play a critical role by leveraging their resources and expertise to fund and implement sustainable development projects that address the root causes of urban poverty. Over the past year, we engaged with 11 corporates in various capacities.
- **Academia:** Academic institutions can research urban poverty dynamics and provide evidence-based recommendations for policy and practice. Some of the academic institutions we worked with include TISS, University of Texas, Nirmala Niketan, Symbiosis (Pune), and KJ Somaiya College.
- **Government Bodies:** We connect urban poor communities with government stakeholders such as MCGM-Health, KEM Hospital-PSM, ICDS Anganwadi, National Career Service Centre for Differently Abled Children, Social Welfare Department, BEST, and the Railway Department. These stakeholders support the implementation of inclusive policies and provide essential services to improve living conditions in urban slums. In the last fiscal year, we engaged with 62 different departments across various programmes.
- **NGOs:** NGOs help deliver targeted interventions and mobilise communities to participate in their own development. With the engagement and support of over 120 NGOs, Apnalaya was able to reach multiple communities across Mumbai in various ways.

- **Publication of research paper, “Assessing a digital technology-supported community child health programme in India using the Social Return on Investment framework” in the PLOS Digital Health journal**

This research paper evaluates the effectiveness and economic impact of a digital technology-supported child health programme in India, using the Social Return on Investment (SROI) framework to quantify its benefits. Published in the PLOS Digital Health journal, it provides valuable insights into the programme’s contributions to community health and economic outcomes.

- **Published article with Health Action magazine on Maternal and child health among the urban poor: A complex issue**

The article in Health Action magazine explores the multifaceted challenges of maternal and child health in urban poor communities. It highlights the intricate interplay of socio-economic factors, healthcare access, and policy implications, offering a comprehensive analysis of the issue.

- **Paper presentation at the Indian Health Economics and Policy Association conference: Unpacking Healthcare Access for Mothers and Children in Mumbai: Insights from a Community-based Landscape Analysis**

This paper presentation at the Indian Health Economics and Policy Association conference delves into the barriers and facilitators of healthcare access for mothers and children in Mumbai. It draws on a community-based landscape analysis to provide actionable insights and recommendations for improving healthcare delivery in urban settings.

- **Article in IDR: ‘Lessons from building active citizens in Mumbai's M-East ward’.**

An article was written and published in the India Development Review (IDR) on December 14, 2023, on ‘Lessons from building active citizens in Mumbai's M-East ward’. This article highlighted the need and potential of constitutional value-based collectivisation in resolving issues of urban poor. The article was written by Yasmin Mulla, Director of Citizenship & Advocacy at Apnalaya and Geetanjali Jha Chakraborty, President, Apnalaya.

Link to the article: <https://idronline.org/article/programme/lessons-from-building-active-citizens-in-mumbais-m-east-ward/>

- **Study dissemination and new engagement with academic institutions and NGOs**

A study was disseminated to academic institutions and NGOs to adapt and pilot interventions, including community-based adolescent health clubs and healthcare provider workshops, aiming to improve youth-friendly programming in the Govandi area and foster better health outcomes for adolescents. New collaborations have been established with Symbiosis International, DYPU School of Public Health, KJ Somaiya Management Institute, and Welingkar Institute of Management to enhance research, education, and community health initiatives, leveraging the expertise and resources of these esteemed institutions.

- **Socially Sensitive and Responsive Leadership**

Conducted a 2-hour session on March 1, 2024, on ‘Socially Sensitive and Responsive Leadership with 18 students of MBA Health care Management, K J Somaiya Institute of Management. The experiential-based session was designed to help the future leaders to be sensitised to the growing inequality in their city and to reflect on the role they can play to build a more equitable society.

- **NGO Collaboration meeting on Disability**

On 14th March 2024, Apnalaya held a follow-up meeting to a 2023 collaborative meet, with 23 organisations participating. Representatives shared experiences, challenges, and ideas for addressing disability issues among the urban poor. Discussions covered four themes: Social Protection Schemes, Health, Education, and Livelihood and Skilling. Key issues identified included lack of awareness, inadequate training, societal stigma, and insufficient livelihood opportunities for Persons with Disabilities (PwDs). Recommendations focused on better training, inclusive education, and stronger community and governmental support. The meeting concluded with commitments to bi-annual meetings, creating an NGO directory, and fostering sustainable, inclusive communities for PwDs.



- **Ye Bhi Hai Mumbai Meri Jaan**

The event **ये भी हैं Mumbai, मेरी जान!** in its fifth year, created opportunities for urban poor communities to express their **खाहिशें** (desires) to a wider audience. This year's theme, **कुछ खाहिशें ऐसी भी...** (My desires are unbound...), allowed participants to showcase their stories through dance, theatre, and music, highlighting their creative abilities, leadership, and confidence.

The performances were vibrant and emotional, reflecting personal and community experiences. The event fostered a sense of community and solidarity, promoting a deeper understanding and appreciation of the diverse and dynamic spirit of Mumbai's urban poor communities.



- **Apnalaya Week**

During Apnalaya Week, held from December 3rd to December 10th, the youth leaders of Shivaji Nagar and Apnalaya united under the theme “All Human Beings are Born Free & Equal in Dignity & Rights.” This event provided a platform for meaningful discussions and activities focused on human rights and community empowerment. It culminated on Human Rights Day with the community collectively composing and pledging to work together towards achieving a life of dignity for all its members, demonstrating their commitment to creating a more equitable and respectful environment.



- **Quarterly collaboration meeting with NGOs and health posts**

Apnalaya hosted a follow-up meeting with various NGOs and health organisations, including SNEHA, MSF, Action Against Hunger, United Medical Association, CORO Right to Pee, Support NGO, FPAI, PATH, Americares, and Myna Mahila Mandal. The primary objective was to prevent work duplication and enhance collaboration. Key discussions included creating a WhatsApp group for better communication and shifting to monthly meetings between NGOs and health posts.

FPAI emphasised family planning, sharing successful cases, and incentives for male sterilisation. Support NGO introduced their drug addiction rehabilitation work for children aged 7 and above, with CHVs tasked to identify and refer 100 children in three months. Shivaji Nagar health post was encouraged to refer single parent/low-income households to Vatsalya NGO for skill development. Raising awareness about free health services at HBT clinics and dispensaries was prioritised.

NGOs were urged to address ANC with TB, large families, and vaccine refusal cases, motivating communities for immunisation. Presentations from each NGO highlighted their work and future. MSF announced the closure of their DRTB project by December 2024 but assured ongoing treatment for existing beneficiaries. Americans discussed their mobile health clinics and referral networks. Dr. Mangala Gomare emphasised the need for increased outreach activities and invited RBSK and DTOs to the next meeting to address unvaccinated children. Jan Jagruti Vidhyarthi Sangh will lead the next meeting in January, supported by Action Against Hunger.

- **Improved responsiveness of the service delivery machinery**

#### **A. Youth Volunteers Advocate for Lift and Escalator at Govandi Railway Station**

In August 2022, youth volunteers from the citizenship programme advocated for a lift and escalator at Govandi Station. They conducted signature campaigns and sent letters to railway stakeholders and the local corporator, receiving a favourable response. Although construction was supposed to be completed by March 2023, it stalled after the foundation was laid. The volunteers followed up with the department and used RTI to enquire about the delay. They were informed that construction would restart and be completed by March 2024. Despite this deadline passing, the installation is now progressing well. The resilience of the youth volunteers ensured the project continued despite bureaucratic challenges.



Lift and Escalator Construction work related at Govandi follow-up from CAG members.



Shivaji Nagar Police Personnel Training on POC SO Act through the Nyay Kendra Initiative.

### **B. Police and Public Prosecution: Nyay Kendra Intervention**

Nyay Kendra, in collaboration with other NGOs, organised training sessions for police personnel and public prosecutors on the POC SO Act. These sessions aimed to sensitise officials about their role in delivering justice to victims, addressing practical challenges, and sharing best practices. As a result, interactions between police and victims improved, and FIRs became more precise and stronger with relevant IPC sections.

Additionally, community volunteers raised the issue of nonfunctioning police beats. The police headquarters cited a shortage of personnel, leading to increased police patrolling in the area until the beats are fully functional, restoring a sense of safety in the community.



Police and Public Prosecution: Nyay Kendra Intervention

### C. District Legal Services Authority

Nyay Kendra provides guidance and support to child sexual abuse survivors. While following up with the District Legal Services Authority (DLSA) Mumbai suburban for interim compensation under the Manodhairya Scheme for 4 POCSO cases, a senior DLSA official discovered over 750 pending compensation cases. Due to Nyay Kendra's relentless follow-up, interim compensation of Rs. 30,000 was sanctioned not only for the 4 POCSO survivors but also for the 750 - plus pending cases in the Mumbai Suburban area. This persistent action brought attention to and addressed the backlog of pending cases.

- **“Together for Education” Stakeholder Dialogue**

Apnalaya convened the “Together for Education” dialogue with over 150 key stakeholders, including MCGM education officers, school representatives, NGOs, education experts, parents, community educators, and adolescents. The dialogue aimed to share the achievements of Apnalaya's education programme, particularly in enhancing 21st-century skills among adolescents. Discussions focused on aligning efforts with the new education policy and exploring strategies to bridge the gap between skills and education, aiming to break the intergenerational cycle of poverty. This event fostered collaboration among stakeholders to shape a more inclusive education system.

This event fostered a collaborative environment for stakeholders to contribute to shaping a more inclusive education system.



- **Health Post and Maternity Home Staff Training - Fundamental Breastfeeding Skills and Concepts**

180 team members from 15 health posts were trained in “Fundamental Breastfeeding Skills and Concepts” over six days. The training covered pregnancy care, breastfeeding up to two years, and complementary feeding. The goal was to equip frontline workers with the skills to conduct effective sessions on exclusive breastfeeding, complementary feeding, and breastfeeding for babies up to 2 years. The training also included the 8 food groups, minimum dietary diversity, and minimum meal frequency.

Sessions began with defining the role of community health workers and explaining the importance of breastfeeding for newborn survival. A breast crawl video demonstrated the natural breastfeeding process. The facilitator emphasised early initiation of breastfeeding, proper latching, and feeding positions. Feedback from participants, especially ANMs, highlighted the usefulness of the training.



ME Ward Health Post team capacity building sessions

The facilitator demonstrated breast milk expression, storage, and handling, and stressed that even sick mothers should breastfeed. Complementary feeding sessions were also included. The training concluded with discussions on breastfeeding challenges and support strategies.

- **MW Health Posts Community Health Volunteer’s (CHV) and ASHA worker Training**

Medical Officers and PHNs requested training for frontline workers to identify pregnant women and children. The initial sessions focused on Area Mapping, helping Health Post teams understand their respective areas. ANMs were assigned to specific communities and further broke down areas for CHVs and ASHA workers. Facilitators emphasised updating knowledge about local facilities like Anganwadi Centres, Aadhar Kendra, and Ration Offices.

The training clarified the areas of responsibility and uncovered gaps in survey coverage. Workers committed to covering all areas during community visits and seeking project team support if needed for early identification of pregnant women.

A total of 201 ASHAs and CHVs from 7 Health Posts attended the training. One Health Post's training was postponed to the next quarter due to the Maratha Araction Survey.



CHV and ASHA workers training on Community mapping

- **Social Media**

Apnalaya's presence on social media continues to grow. We continued to raise issues on urban poor and build ourselves as a thought leader. Over the year, our organic reach on Facebook has reached 10,188 followers. As on Instagram and twitter, our community has grown to 2,462 followers and 1,297 respectively. We are actively persuing engagement on Linkedin to reach out to new and existing partners, donors and corporates. The number of followers currently is 3,962.

### Stay **connected** with us



@supportapnalaya



@apnalayango



@apnalaya



@apnalayatweets



[www.apnalaya.org](http://www.apnalaya.org)

## II. CASE STORY - UDAAN

### Be the change

In the bustling streets of Govandi, a determined group of youths from Shivaji Nagar, under the banner of Govandi Yuva Manch, united to address community civic issues and improve basic amenities. Recognising the pressing need for proper bus stops, they embarked on a mission to make their streets safer and more accessible. They discovered that out of twelve bus stands in Shivaji Nagar, only one had a shed and seating, while the others merely had a single pole. The group conducted thorough research, gathering information from online resources and meeting with the bus depot manager to understand the situation better.

Determined to bring about change, the youths drafted a letter demanding proper bus stops and submitted it to the Assistant Depot Manager and General Manager of BEST. Their persistent efforts paid off when they received a response suggesting the construction of bus queue shelters at several locations, including Shivaji Nagar Depot, Nirankari Nagar, Road no. 2 on 90 D.P Road, Jafari High School, Sai Baba Mandir on Ahilyabai Holkar Marg, and Shivaji Nagar Post Office on Baji Prabhu Deshpande Marg. However, only the shelter at Road no. 2 received approval due to the lack of footpaths at other sites. Despite this partial success, the group's resilience ensured that the approved construction progressed at a good pace.

The actions of Govandi Yuva Manch demonstrated the power of civic engagement and collective effort in driving community improvements. Their story serves as an inspiration for other communities striving to create safer and more supportive environments. By addressing the infrastructure needs of their neighbourhood, they showcased how determined youth can influence positive change and improve the quality of life for their community.



# RESOURCES

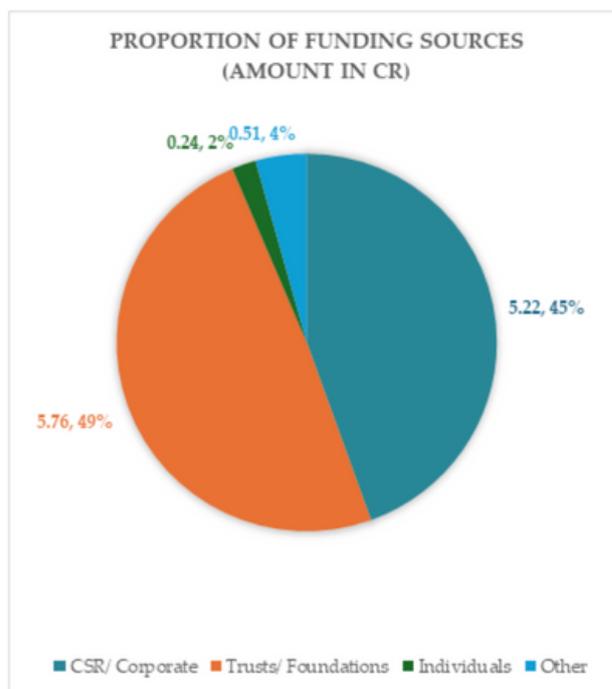
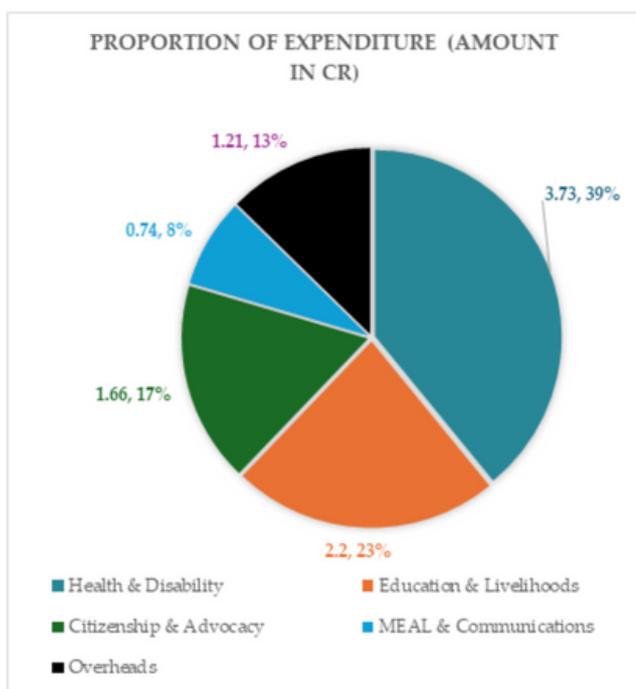


## I. BUDGET AND FINANCE OVERVIEW

- Total Funding Partners (CSR and Trusts/ Foundations) = 29
- 4 New Funding Partners on-boarded
- INR 11.73 Cr. raised
- FCRA: 5.35 Cr (46%); Local: 6.38 Cr (54%)



### Programme Expenditure and Funds Raised

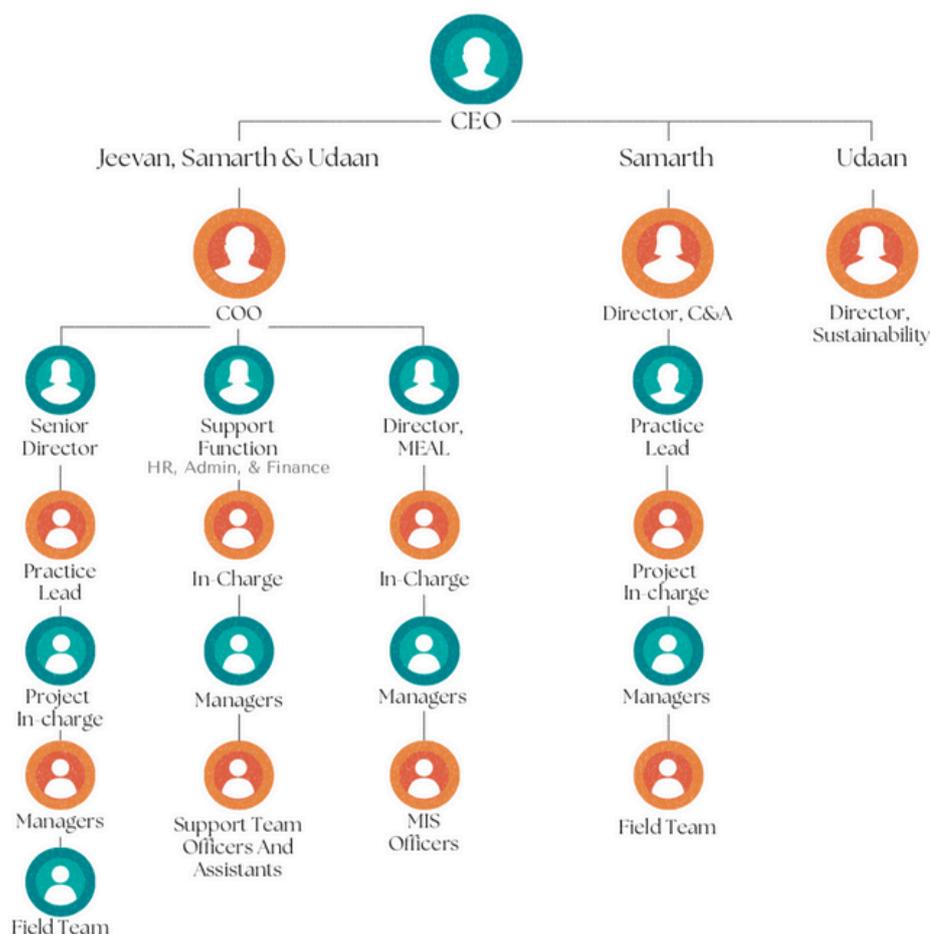


## II. HUMAN CAPITAL

- **Our team:** The Apnalaya team stands strong at 154 as on March 2024.



- **Current organogram**



- **Capacity Building**

- **POSH training of all employees**

Apnalaya conducted POSH (Prevention of Sexual Harassment) training for all employees to promote a safe and respectful workplace environment.

- **Leadership training of all SLT members**

Leadership training was provided for all Senior Leadership Team (SLT) members to enhance their skills and effectiveness in guiding the organisation.

- **Apnalaya Board**

- Geetanjali Jha Chakraborty, President
- Suman Srivastava, Secretary
- Vijaya Balaji, Treasurer
- Malini Thadani, Member
- Lata Pillai, Member
- Vrinda Mahadevia, Member

The Bombay Public Trusts Act, 1950  
SCHEDULE - VIII  
[ Vide Rule 17 (1) ]

NAME OF THE PUBLIC TRUST :- APNALAYA  
Balance Sheet as at 31st March, 2024

Registration No. F-2830

FUNDS & LIABILITIES	Rs.	Rs.	PROPERTY AND ASSETS	Rs.	Rs.
<b>Trusts Funds or Corpus From General Public</b>			<b>Immovable Properties :- (At Cost) As per Annexure 'A'</b>		
Balance as per last Balance Sheet	4,21,80,472	4,23,30,472	Balance as per last Balance Sheet	1	
Additions during the year	1,50,000		Additions/(Deletion) during the year	-	
Other Earmarked Funds			Deletion during the year	-	
Any other Fund :-			Less : Depreciation up to date		1
<b>As per Annexure "F"</b>		<b>2,01,01,515</b>	<b>Investments :- As per Annexure 'B'</b>		<b>11,07,47,224</b>
<b>Loans (Secured or Unsecured)</b>			<b>Movable Properties :- As per Annexure 'C'</b>		
<b>Long Term Provision</b>			Balance as per last Balance Sheet	15,53,818	
Provision for Employees Benefits (Gratuity)	74,29,959	74,29,959	Less : Deletion during the year	-	
<b>Other Current Liabilities</b>			Add: Additions during the year	8,26,150	
For Sundry Creditors	97,850		Less : Depreciation up to date	3,72,077	
For Payment to Others	5,000		<b>Loans (Secured or Unsecured)</b>		
TDS Payable	3,062	<b>1,05,912</b>	<b>Current Assets</b>		
<b>Short Term Provision</b>			TDS Receivable F.Y. 2020-2021	2,98,707	
Provision for Employees Benefits	82,800		TDS Receivable F.Y. 2022-2023	3,93,526	
<b>Provision for Audit Fees</b>			TDS Receivable F.Y. 2023-2024	4,98,656	
:- Statutory Audit Fees	2,43,000		Advance payments	5,06,919	
:- Internal Audit Fees	1,29,600	<b>4,55,400</b>	FD & Bank Interest Receivable	4,96,101	
<b>Income and Expenditure Account</b>			LIC OF INDIA - Gratuity Fund	58,09,831	
Add : Balance as per last Balance Sheet	5,45,57,482		TDS Paid	5,167	
Add : Surplus as per Income and Expenditure A/c	1,60,21,899		Excess amount spent on project (Amount Receivable from GSRD Foundation)	4,84,794	
Less : Deficit Expenditure Account	-		Other current assets (As per Annexure 'D')	29,41,496	
Less : Appropriation If Any	-		<b>Cash and Bank Balances (As per Annexure 'E')</b>		
<b>Total</b>		<b>14,10,02,639</b>	(a) In Savings Account	1,68,12,326	
			<b>Total</b>		<b>14,10,02,639</b>

For and on behalf of  
Borkar & Muzumdar  
Chartered Accountants  
FRN:- 101569W

*Borkar*

Supriya Bhat  
Partner  
M.No. 048592  
Dated : 21/9/2024



*Ghe*  
Geetanjali Jha Chakraborty  
(President)

*Saman Srivastava*  
Saman Srivastava  
(Secretary)

Trustees



*Vijaya Balaji*  
Vijaya Balaji  
(Treasurer)

The Bombay Public Trusts Act, 1950  
SCHEDULE - IX  
[ Vide Rule 17 (1) ]

NAME OF THE PUBLIC TRUST :- APNALAYA  
Income and Expenditure Account for the year ending 31st March, 2024

Registration No. F-2830

EXPENDITURE	Rs.	Rs.	INCOME	Rs.	Rs.
To Expenditure in respect of properties :- Rates, Taxes, Cesses Repairs and maintenance Salaries Insurance Depreciation (by way of provision of adjustments) Other Expenses	-	-	By Rent (accrued) (realised) By Interest (accrued) (realised) On Securities (Investments) On Saving Bank Account	49,41,501 8,27,359	57,68,860
To Establishment Expenses (As per Annexure "I")	-	2,06,62,811	By Dividend By Donations in Cash or Kind : Trust : Other : Earmarked Fund	2,78,09,383 25,58,138 7,50,09,508	10,53,77,029
To Remuneration to Trustees To Remuneration (in the case of a math) to the head of the math including his household expenditure, if any	-	-	By Income from other sources (in detail as far as possible) Subscription from members Other Income	150 4,16,386	4,16,536
To Legal Expenses To Audit Fees To Contribution and Fees To Amount written off : (a) Bad Debts (b) Loan Scholarship (c) Irrecoverable Rents (d) Other Items	-	3,36,513	By Transfer From Reserve	-	-
To Miscellaneous Expenses : To Bank Charges To Depreciation To Amount transferred to Reserve or Specific Funds	2,533	2,533			
To Expenditure on Objects of the Trust (a) Religious (b) Educational (As per Annexure "G") (c) Medical Relief (As per Annexure "H") (d) Community Development (As per Annexure I) (e) Relief of Poverty (f) Other Charitable Objects	3,92,56,577 3,48,54,317	55,699 3,72,077			
To General Corpus To Surplus carried over to Balance Sheet	-	7,41,10,894	By Deficit carried over to Balance Sheet	-	-
<b>Total</b>	<b>11,15,62,425</b>	<b>11,15,62,425</b>	<b>Total</b>	<b>11,15,62,425</b>	<b>11,15,62,425</b>

For and on behalf of  
Borkar & Muzumdar  
Chartered Accountants  
FRN:- 101569W

Supriya Bhat  
Partner  
M.No. 048592  
Dated : 21/9/2024.



Geetanjali Chakraborty  
(President)  
Sumair Srivastava  
(Secretary)

Vijaya Balaji  
(Treasurer)



Trustees

### III. DONORS



### OTHER DONORS

Anjali Sachin Tendulkar  
Hindustan Lever Education and Welfare Trust  
Nihchal Israni Foundation  
Turtlemint Insurance Broking Services Pvt Ltd.  
Ugam Solution Pvt Ltd

## 10. LOOKING AHEAD

- **Expansion in 7 new wards through partnership and fellowship (4 signed, 3 in process)**

We are expanding into seven new wards through strategic partnerships and fellowship programs, with four agreements already signed and three more in progress. This expansion aims to enhance our reach and impact within these communities.

- **Building more evidence and community-based solutions in existing wards**

We are committed to building robust evidence and developing community-based solutions in our existing wards. This approach ensures that our interventions are data-driven and tailored to the specific needs of each community.

- **Priority areas for collaborating with government, corporate, NGOs, and community**

Our efforts prioritize collaboration with government bodies, corporate entities, NGOs, and community groups. By focusing on these areas, we aim to drive policy changes and foster sustainable development.

- **Out of pocket expenditure in health (OOPE):** We aim to reduce out-of-pocket health expenses to improve financial stability and access to affordable healthcare.
- **Participation of women in the workforce:** We support initiatives that increase women's workforce participation, promoting economic growth and gender equality.
- **Access to safe water and sanitation services:** Our projects focus on providing safe water and sanitation services to improve public health and community well-being.
- **Building social capital:** Building social capital involves strengthening the networks and relationships within communities. By fostering trust and cooperation, we aim to create resilient communities capable of supporting their own development.

# Be the Voice for the Urban Poor





 [www.apnalaya.org](http://www.apnalaya.org)

 +91 98330 41074

 [admin@apnalaya.org](mailto:admin@apnalaya.org)

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Behind Police Quarters, Tardeo Mumbai 400 036, India



**SCAN TO DONATE**