

ASHA FOUNDATION BANGALORE ANNUAL REPORT 2011-2012

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ASHA Foundation

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Karnataka

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Statutory requirements and registrations

- ❖ Registered on 7.3.1998 as a Charitable trust in Shivaji Nagar, Registrar's office, Bangalore.Registration number- 849/97-98
- ❖ Amended trust deed document no.- 899/04-05
- Certificate under 12(A) of IT Act 1961 obtained on 1.5.1998 and No.is-Trust/718/10A/Vol.A.I/A.772/98-99/CIT-II
- ❖ Recognized U/S 80 G of IT Act 1961 latest recognition is from 1.4.2010 onwards.
- ❖ PAN No. is available. TAN No. is available.
- * Registered under FCRA. FCRA no. is available.
- ❖ Recognition as Scientific and Industrial Research Organisation under DSIR, GoI from April 2009 to March 2014
- ❖ Registered with Regional provident Fund Commissioner-KN/41859
- ❖ Bankers name- Punjab National Bank ,Anand Nagar, Bangalore-560024

Vision –T o contribute towards an AIDS free world.

Mission- To fight AIDS. not people

Aims -

- 1. To build awareness of HIV/AIDS infection in the community.
- 2. To provide HIV testing in a non-coercive and non-stigmatized environment both voluntary and anonymous.
- 3. To train counselors in HIV/AIDS.
- 4. To provide counseling to HIV patients, their families and the community.
- 5. To provide a character based comprehensive Adolescent Health Education curriculum in schools.
- 6. To provide personalized, quality, medical care and palliative care to patients with HIV/AIDS irrespective of their ability to afford treatment.
- 7. To interact with other institutions of learning and constantly update our knowledge of the illness and to incorporate new teachings into our treatment and care of patients.
- 8. To network with other voluntary, statue, central and other institutions including Non-Governmental Organizations to provide wide ranging care effectively
- 9. To rehabilitate HIV / AIDS patients and families.
- 10. To conduct and help research in HIV / AIDS
- 11. To provide specialized training for Doctors, Nurses and allied Health professionals in the field of HIV / AIDS.
- 12. To make a difference in the lives of patients living and dying with AIDS.
- 13. To provide opportunities to the old people to live comfortably in their old age with adequate care and medical facilities.
- 14. To help weaker section of the society irrespective of caste, creed and religion, for their socio-economic upliftment by all legitimate and constitutional means.
- 15. Generally to do such acts, deeds and other things which are incidental and conducive to the attainment of all or any of the above objectives.

ASHA FOUNDATION

This report is for the period April 2011 to March 2012. The following projects were continued during the financial year.

- 1.The AIDS Helpline and Telephone Counseling service and integrated counseling and testing service
- 2. Adolescent Sexual Health Education Project named Anmol Ashayein
- 3. The KNH-CAR Project- Children at risk project
- 4. The KNH-PMTCT Project Prevention of Mother to Child Transmission of HIV project
- 5.Research projects- Research is integrated into every project and maybe scientific, operational, or social sciences research.

1.The AIDS Helpline and Telephone Counseling service and integrated counseling and testing service

The project has completed twelve years. Presently the components under this project are

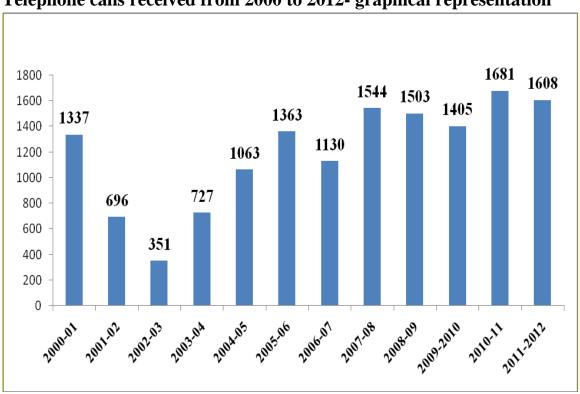
- 1. Telephone counseling
- 2. Face to Face counseling
- 3. E mail queries
- 4. Awareness programs with iVolunteer
- 5. Training
- 6. Research

1. Telephone Counseling

The manual telephone counseling numbers are 23543333 and 23542222 and they function from 9am to 5 pm, Mondays to Fridays.

ITEM	No. of Calls
Number of calls received from April 2011-March 2012	1608
Number of calls received from April 2010-March 2011	1681
Number of new callers/callers who have called for the first time	862
Number of repeat callers	731
Number of male callers	1459
Number of female callers	149
Number of people who called and came for face-to-face counseling	158
Cumulative total since the year 2000	15,091

Telephone calls received from 2000 to 2012- graphical representation



2. Face to Face Counseling : Around 9.82% of all telephone calls translated into face to face counseling. Also others came to ASHA Foundation for counseling through the clinic, publicity and word of mouth

Type of counseling	April 2011-March 2012	April 2010-March 2011		
Pre test counseling	168	208		
Adherence counseling	97	151		
Follow-up counseling	110	146		
Family counseling	99	104		
Total counseling sessions	492	622		
No. of HIV tests done	161	173		
No. of HIV tests Positive	28	34		
No of HIV tests negative	127	149		
Cumulative counseling sessions from 2000 to March 2012 -6067				

3.Email queries:

Year	Queries
April 2011-March 2012	56
April 2010-March 2011	59
Total since 2008	221

Feedback from an e-mail query

Sub: Response to your query

Wednesday, 29 February, 2012 11:19 AM From: This sender is DomainKeys verified

To: "ASHA Foundation Bangalore" ashafblr@yahoo.co.in

Dear Doctor,

Thank you very much! That was very helpful and really relieved me from my anxiety. Kudos to your efforts in counselling and spreading awareness. I hope to be able to support your cause in the near future.

Best regards,

Mr.X

4. Awareness programs with I volunteer

Year	Number of
	programs
April 2011- March 2012	07
April 2010-March 2011	09
Orientation to the new volunteers	12
Cumulative total since March 2006	63

BMRCL employees 29.10.2011 at Vidhana Soudha- I volunteers



Awareness session for IBIS Hotel staff-28.1.2012-I volunteers



Awareness programs conducted by I-Volunteers during the year

SL	DATE	Nature of the program	Venue	No. of	No. of
NO				volunteers	Participants
01	17.9. 11	Orientation for new	iVolunteer	5(Old)+5	10
		volunteers	office,	(New)	
			Koramangala		
02	24.9. 11	Awareness session for	Opp.Chinnas	3(Old)+ 5	50 people
		BMRCL employees	wamy	(New)	
			Stadium		
03	2.10. 11	Awareness session for a	A Village near	04	100+ people
		Community	Kanakapura		
04	29.10. 1	Awareness session for	Opp.Vidhana	05	30 employees
		BMRCL employees	Soudha		
05	27.9. 11	Awareness session for a	A village in	05	50+ people
		Community	Anekal		

06	1.12. 11	Distribution of	Forum &	07	Approximately
		posters,red ribbons and	other malls,		100+ people
		question and answer	cafes		
		session for a Corporate			
07	7.01. 12	Meeting with volunteers	ASHA	05	06(1 Staff
			Foundation		from ASHA)
			Office		

Training programs attended

Sl	Date	Topic	Name	Venue	No	Conducted	Timing
No					of	by	S
					Days		
1	30.01.20	Counsello	Mrs.Diptt	ASHA	6	Staff of	9.30 - 5
	12	rs'	y Joseph	Foundation	days	PMTCT &	pm
	4.02.201	Training				Counselling	
	2	Workshop				Project	
		(PMTCT)					

Telephone counseling workshop for Govt.of Karnataka ICTC counselors In March 2012. By ASHA Foundation



Role play in Telephone counseling workshop by ASHA Foundation March 2012 for ICTC counselors –Govt.of Karnataka



6. Research

- 1. Currently we are working on a research paper titled "A study on the usefulness of the HIV/AIDS helpline in an urban city of Bangalore, India".
 - In this paper we are making an attempt to study the usefulness of the AIDS helpline. After the caller has expressed his concerns and his needs are met, the counselor proceeds to ask the caller whether the information /counselling provided was useful or not. And if the caller mentions that the call was helpful, then reasons as to how it helped the caller would be asked. The relevant details was collected was then entered on to MS Excel worksheet for further analysis.
 - Data has been collected from April 2009-March 2012(3 Years) and the data is being analyzed.
- 2. A study on "Coping strategies of widowed women in HIV" was proposed to the Research Advisory Board and the same has been approved.

The study is for a period of 2 years(April 2012-March 2014) The study process involves:

- Communicating with HIV positive and widowed women coming to ASHA Foundation for Care and Support from 1998.
- Review of documentations: The counselling staff at ASHA Foundation has documented several counselling sessions with the widowed women. These documents will be reviewed as part of the study.
- Focused Group Discussions with HIV positive and widowed women at ASHA Foundation
- To administer a structured questionnaire interview to assess the coping strategies; responses post the bereavement of their spouses. (All of the above would be done after getting the consent form the study participants)

3.A study on the "Profile of people at risk accessing the voluntary counseling and testing services at ASHA Foundation" was proposed to the Research Advisory Board and has been approved.

- This study is for a period of 2 years(April 2011- March 2013)
- Data collection has started from April 2011
- At the end of March '12, a total of 174 people have accessed the counseling and testing services at ASHA Foundation

2.Adolescent Health Education Project (AHE) - Anmol Ashayein

This program was started in 2000 and ASHA Foundation has trained eight master trainers to train teachers in teaching a curriculum to students in the age group of 13-15 years. The curriculum deals with -Understanding oneself, friendships, genuine and counterfeit friendships, companionship and faithfulness in marriage, practical skills of drawing boundaries in relationships and being able to say "NO" to negative influence. The courage to live ones values and be able to correct one's life where mistakes have been made is discussed. An overview of sexually transmitted diseases and HIV from the behavioral perspective to prevent risky behavior is also dealt with.

A Teachers' Training Workshops

1.22nd - 25th June 2011 – 5th Teachers Training workshop – Pune 2.28th – 30th July 2011 – 37th Teachers' Training Workshop – Bangalore

	Up to 2008	2008 - 2009	2009 - 2010	2010 - 2011	2011 - 2012	Total
Teachers'	31	3 workshops	2 Workshops	2 Workshops.	2 Workshops.	40
Training	Works			Nagpur &	Pune &	Workshops
Worksho	hops			Pune. New	Bangalore	
ps				curriculum		
				was		
				introduced		
Teachers	1765	117	52	74	67	2075
						teachers
Schools	262	30 schools in	15 Schools in	65 Schools in	Karnataka 43	313 schools
		Pune & 22	Pune, 8	Pune and	Mumbai 8	
		schools in	schools in	Mumbai	Nagpur 4	
		Bangalore (Mumbai, 20	62 in	Pune 74	
		many	in	Karnataka, 2	Shimla 1	
		schools were	Vishakapatna	in Shimla, 20	Vishakapatn3	
		lost to follow	m, 45 in	in	Bangalore	
		up in	Bangalore.	Vishakapatna	180	
		Karnataka)		m, 3 have		
				started in		
				Nagpur.		
Students	About	4547	8913 students	8778 in Pune	10,309 in	56,538
	50,000	students in	in	& Mumbai,	Pune &	students
	comple	Pune.	Vishakapatna	8913 in	Mumbai, 449	
	ted in	993 students	m	Vishakapatna	in	
	Karnat	in Mumbai	7147	m, 12 980	Vishakapatna	
	aka.		Students in	students in	m,,students in	
	30,000		Pune.	Karnataka	Karnataka,	
	were			have reported.	44,600 About	
	doing			About 1000 in	1000 in	

the	Shimla, 90 Shimla, 130
progra	students in students in
m	Nagpur Nagpur

B.Alumni Meeting (2)

One Alumni meeting was held on the 26th of June 2011 at Pune. 21 participants attended the meeting. It was a one day program that was meant to introduce the new curriculum to the teachers. At this stage there were 4 schools that still did not have trained staff updated to the new curriculum. These schools had a one on one interaction with our Pune staff to get acquainted with the new curriculum.

Another Alumni meeting was held in Mumbai on the 31st of March 2012 at the Presentation Convent. With this meeting all the 8 schools in Mumbai were introduced to the new curriculum which they have started. One trained staff had moved to a new school where she has started the program which brings the total in Mumbai to 9 Mr. Biju Sebastian conducted this meeting.

C .Follow up

The follow up of Pune schools continues by Mr. Biju Sebastian. Follow up in Karnataka, Shimla, & Vishakapatnam took place as and when time permitted through correspondence and telephone calls.

It was heartening to note that some of the institutions have continued to do the program since the teachers first attended the Teachers' Training Workshop. The education secretary of schools under the Ursulline Provincilate reported that all their schools (42) were continuing with the program since 2006 when their staff was first trained. The curriculum with adaptation has now become a part of their school curriculum.

D.Seminars & Other meetings

The following meetings and seminars were conducted by ASHA Foundation staff.

A Orientation for Teachers' to use the new curriculum

14th Oct 2011. Teachers of Mariam Nilya School and Mariam Nivas met for an orientation on Character Development & Sexuality.

B Orientation Program for parents 2

18th Feb. 2012 "Parents' Orientation", seminar for parents of students of class 10 Mariam Nilya High School, Bangalore. met together with ASHA Staff to understand the needs of adolescents better.

21st Feb. 2012 'Parents' Orientation', seminar for parents of students in class 7 of Prudence International School, Tumkur. This was done for implementing Unit I of the new curriculum at the school.

C ESHA's Study Process on mainstreaming Human Sexuality.

18 people from different parts of the country representing the four sectors of the church met together for mainstreaming sexuality in the church. The two resource persons were Dr. Wati Longchar (Senate of Serampore & Mrs. Joyce Davis (ASHA Foundation)

Parents meeting at Mariam Nilayam School-18.2.2012



A parent of Prudence International School responding to the anmol ashayein program of ASHA Foundation-21-2-2012



E.Writing of Resource Manual

- A Writing of Resource Material for Prevention Education in Schools. The feedback from the schools resulted in
- 1 Increase in the number of units in the curriculum from 5 to 6.
- An appendix of lessons would be added to the main curriculum to provide resource for teachers when they face particular problems like pornography & those schools that are able to present a faith based value education curriculum. The main resource document with all the six units is almost ready.

F.Feedback from teachers and students

"I do practice Circle time. It gave a tremendous change in my teaching career. I started enjoying teaching, Thank you Anmol Ashayein, thank you ASHA Team." Mr. Prashant Gore, PDEA's D.Ed College

"In the beginning I considered this Anmol Ashayein as something ordinary, but as I progressed with my reading I found treasures of wealth, which even changes many of my perspectives" Mrs. Neetu, Wagheshar School Wagholi

Students said

"To be very frank when my teacher started talking about sex in the class I was very nervous due to my past life .But as I hear it in the way they present it in class, I like to share my personal problems with my teacher. Sneha Menon, STD VII

"It was a fun for me to see the book which has no exam in the end. I started drawing picture in this. Then slowly some questions in this book struck me. I began to read that & I started completing it." Priya Sharma

Anmol Ashayein is a great learning experience for children. They have a good time relaxing from the day during religious and moral education class. Anmol Ashayein instills a sense of confidence in children such as when an activity is done in the book and the teacher asks students to come forth with their answers even the shy quiet students answer. Many children who are stressed out also feel good because they can unleash their stress during this class. Anmol Ashayein can therefore be called a great learning and helping experience for children and is a great way for children to express their views and ideas." Sanjana Bose

G.Research and Publication

- 1. Title of research article 'Teachers training workshops: a capacity building strategy for mainstreaming HIV/AIDS prevention education among adolescents.'

 Submitted to e Journal of Indian Association of Teacher Education
- 2. Survey of Self Esteem amongst 6^{th} & 7^{th} Class students in Bangalore: This is a one year study on self in adolescents. Around 500 students using our curriculum will be part of the study. Field work and collaboration is going on currently.
- 3. The influence of Qualities and Character of friends as experienced by adolescents-

4.Impact of Adolescent Health Education (Anmol Ashayein) on the Parenting Styles and its relationship to Adolescent Self Esteem in India.

In both the above studies, field work is going on.

H.Volunteers

Mrs. Haneke Boer has been a volunteer with us for a year. She has been doing the data entry for the questionnaires that we use for Adolescent Health Education. She has also been helping us to get in touch with different writers/ editors for copyright permission for clips, stories for the new resource manual.

Parent activity at Mariam Nilaya School



Mumbai Alumni meeting -31.3.2012



3.The KNH-CAR Project- Children at risk project

The KNH-CAR Project supports the medical, nutritional and educational support for the children infected and affected by HIV/AIDS and their families. This includes the HIV/AIDS clinic, medical, nutritional and educational support for children infected and affected by HIV/AIDS, empowerment of women through formation of SHG groups, provision of knowledge on HIV/AIDS, job placements, microcredit etc. following are the achievements during the reporting period. This year we also started an SHG group for children

Sl.no	Particulars	Reached
1	Education	
a	No of Educational Support	123
b	ELE (Pre- school)	09
С	PE (Primary Education)	62
d	SE (Secondary Education)	28
e	IC (Intellectually Challenged)	02

f	HE (Higher Education)	22
	Total	123
2	HIV/AIDS Clinic	
a	No of persons tested for HIV testing	153
b	Positive Reported	28
С	Adults Reported Positive	25
d	Children Reported Positive	03
e	No of Patients Registered	23
f	No of Days clinic worked	144
g	No of Adult patient visits to clinic	1385
h	No of adult patients started on ART	17
i	No of Children patients visits to clinic	383
j	Total no of patients visit to clinic	1780
k	General Investigations for children	66
1	CD4 Investigations for Children	48
m	TB treatment for Children	01
n	OI infections treated for Children	381
0	No of children started on ART	03
p	Children on ART	32
q	Children on 1 st Regimen	25
r	Children on 2 nd Regimen	07
S	No of Children Hospitalized	01
t	No of Children Referred	00
u	Adults on ART	148
V	General Investigation for adults	104
W	CD4 investigation for adults	50
X	PLHA TB treatment for Adults	06
3	Socio Economic	
a	No of Existing SHGs	04
b	No. of SHG meetings	12
c	No. of Children's SHG formed	01
	1.0. 01 Children 5 5110 Ioinica	

d	No of children in SHG	09
e	No of SHG members	112
f	Nutritional Supplements for Children	42
g	No of Nutritional Poustic plus	265
	distributed	
h	Dry ration support for Poor Families	40
i	SHG Internal Loans issued	34
j	Total SHG internal Loans issued	76
k	SHG Monthly topics (*Annual report	03
	2010-11, *Widow pension , *Rajiv	
	Gandhi Housing Board Scheme &	
	BHAF meetings sharing's)	
1	Home Visits to Access the Situation	01
m	No of Business place visit	01
n	BHAF Meetings attended	11
О	Referred to Star Insurance through	17
	KNP+	
p	Job Placement for Beneficiaries'	01
q	Referred to UNNATI Free Training &	01
	employment for under privileged youth	
r	Individual Venture Loan to run a	01
	Canteen	
S	Applied for free sites from RGHBS	20
T	Referred to Star Insurance directly	04
u	Applied for widow Pension	01
4	Celebrations & Events	
I	Picnic 1.5.2011	01
	Adults Participated	19
	Children Participated	91
II	Sports day on dated 26.01.2012	01
	Adults Participated in Sports day	66
	Children Participated in the Sports day	114

The following activities were undertaken:-

To improve the educational status of children infected and affected by HIV/AIDS

As the part of the educational support, during the period, totally 123 children were supported for their education as follows,

ELC (Early Learning Centre) Lkg & Ukg	09 (04 Boys & 05 Girls)
PE (Primary Education) 1 st std to 7 th Std	64 (39 Boys & 25 Girls)
SE (Secondary Education) 8 th std to 10 th std	26 (10 Boys & 16 Girls)
HE (Higher Education) 1 st PUC to Degree	22 (07 Boys & 15 Girls)
IC (Intellectually Challenged)	02 (01 Boy & 01 Girl)
Total	123 (61 Boys & 62 Girls)

To improve the health status of the children infected and affected by HIV/AIDS and their families:-

HIV Testing

During the period totally 153 HIV tests have been done including 05 children. Out of this 28 have been reported positive, 25 adults and 03 children.

HIV/AIDS Clinic

Children:-

ASHA Foundation conducts a HIV/AIDS clinic thrice a week on Monday, Wednesday & Friday afternoon from 1.30pm to 5.00pm. Totally 144 days the clinic has been operated during the period. The medical team consists of 1 Physician,

Pediatrician, Nurse, Project co ordinator & clinic support staff. Free Medical care is provided for all the HIV Positive patients and all children infected by HIV/AIDS. The services include routine medical care, treatment for opportunistic infections & TB treatment.

Presently 32 children are receiving ART treatment and 26 children are under OI treatment, and these children have increased their life span and their CD4 count has increased.

03 children have been started on HAART during the period. Totally 166 children visits to the clinic and had been treated 381 opportunistic infections. 48 children received CD4 investigation support & 38 children has received support for 66 various investigations like CBC, Hemoglobin, Differencial count, ELISA, Blood Picture, S. Creatinine & Culture & sensitivity tests. 01 child has been hospitalized during the period.

42 children were received 265 packets nutritional support during the period

Adults

Totally 148 adult patients are on HAART & 144 days the clinic has been operated. 1385 adult patients visit's to the clinic and they had been treated. 50 patients has undergone CD4 test and 17 patients had been started on HAART during the period. 422 Opportunistic infections were treated and also 104 patients had undergone other investigations like Hemoglobin, Differential count, Fasting Blood Sugar, Viral load, Hepatitis B antigen (ELISA), Reticulocyte count, PPBS/RBS, Sputum for AFB, PCR, Hepatitis C antibody (ELISA), Platelets, Blood Picture, S.Creatinine, Culture & Sensitivity, Total WBCcount, ESR & Liver Function tests.23 positive patients has been registered during the period.

To improve the Socio economic status of the children and their parents infected or affected by HIV/AIDS

Self Help Groups:-

Four Self help Groups (112 members) have been formed under the guidance of ASHA Foundation with on an average of 25 to 30 members in each group. Regular meetings are being held every month and minutes are maintained. The four groups

are Shrishthi, Trupti, Preethi and Prakruthi.17 beneficiaries have utilized the loan facilities during the period (Totally 76 members have taken the internal loan of Rs 3, 03,500=00 {Three lakhs three thousand & five hundred only}. Out of it 41 members cleared their loans and Rs 82790=00 is the outstanding loan amount with 35 Beneficiaries) they have been part of the group for last five years.

SHG monthly Topics covered as follows:-

- Destitute widow pension
- Rajiv Gandhi Housing Board Scheme
- Annual report of ASHA Foundation 2010-2011

Sharing of the Bangalore HIV/AIDS Forum (BHAF) monthly meetings update & Proceedings in the SHG meetings as follows:-

- Global week of Action Program- May 2011
- Feedback on meeting with KSAPS and Children Welfare Committee on Orphan Vulnerable Children
- Feedback on Proposal on Bangalore HIV AIDS Forum to Action Aid India
- Task Force plan of Action
- BHAF Future Direction
- Workshop on Status, Role, gender relationship, Sexual freedom and taboos in pre-historic, medieval and modern Indian Society for TASK FORCE MEMBERS OF BHAF
- World AIDS day Programme on 8th December-2011
- CABA (Children affected by AIDS) Workshop planned at F.M.C Bangalore on 11th December 13th December 2011
- Special Workshop on Communication Materials of BHAF
- Planning for the development of the CABA Children's family financial conditions

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SHG for Children:-

Children Self help Group have been formed under the guidance of ASHA Foundation with the aim "To get together the children infected with HIV in order to make them friends and share their emotions and feelings with each other and realize that there are others like them. This group iinitially started with 09 children from the age group 13 to 19 years. Every session consists of games, story telling and interaction, followed by snacks, juice and lunch.

The children meet on the third Sunday of every month. Until now there have been 08 meetings conducted with good participation of the children.

The meetings commence with a welcome snack and drink and followed by Ice breaker, a physical activity, and an interactive session which involves all the children,. It conclude with feedback session and lunch. During the feedback session the children discuss about the day's activities and one of them volunteer to write a brief report in the log book maintained by them.

Until now the aim was only focusing on how to build the rapport between the member and the facilitator. And in order to do that there have been only fun games and activities conducted until now.

In the further upcoming meetings we will be planning to start Discussions on the coping strategies and ways to build one's self-esteem.

Feedback and Expressions from the Children SHG Members:

Child "X" mentioned, "Ah, I just love coming here to ASHA Foundation for the SHG Meeting because it is so much fun and I love the games that we play. All the members are good friend of mine. I like the fruit salad game a lot"

Child "Y" said, "Its fun to be here... I like the snacks and food and the friendship I have here. We learned the communication skills and Golden rules which helps us to be better people. We have lots of fun in the games and activities that they plan for us!"

Children playing a game at the SHG meet.



Dry Ration Support:-

40 HIV positive families with children were supported. Nutritional supplements like dry rations consisting of 6 kg rice, 1 kg Atta, ½ kg green gram, 1 kg oil, ½ kg dhal, were given to each family every month.

Business place visit:-

One Business place visit was been done during the period to access the Situation of the living condition of the beneficiary towards to support Individual Venture loan to run a small Canteen.

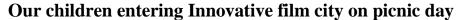
Advocacy & networking:-

All the meetings of the **BHAF** which held on every third Friday have been attended by the staffs and some of the beneficiaries & the information have been shared to the beneficiaries during the SHG meetings. 21 Beneficiaries had been referred for the Star Insurance through KNP+ & directly.

Picnic

The children were taken on a picnic on the 1st of May 2011 to Innovative Film City which is in Bidadi on the outskirts of Bangalore. Many children have expressed that this was the highlight for them. The children expressed their feelings as Ms.priya (name Changed) exclaimed, "The picnic this year was very enjoyable, the rides and the wax museum and everything were very interesting to see. We all had

a great time this year. The food was also good. The trip was well organized and Ms Anu (name Changed) said, "This year picnic was wonderful and i had so much fun. I enjoyed the most in the mirror maze, dry ride and all the museums there. This was one of the best picnics I've ever been. The staffs are very caring and concerned and took care of all of us very well. Time to time they served us with snacks and lunch as well. Thanks to ASHA team" and Ms Sheela (name Changed)," This year picnic was very well organized and there were so many





On the roller coaster !!!



At the artificial beach-Innovative film city-picnic



Lunch time at innovative film city



things to see and go around. The Innovative Film City was a huge area to go around and see. There was so much fun inside. Compared to last year's picnic this year was so much better and great. I liked the most the mirror maze, the rides, dinosaur museum, wax museum and the 3D Cinema. Everything was wonderful. The food was also good. The trip was organized well.

Annual Sports Day:-

Annual Sports day was conducted on 26/01/2012 at Anand Nagar BBMP ground and several sports events were been conducted for the Children and parents such as In & Out, Musical frog, Color Bead Seperation, Sandwich, Land, Sea & Air, Hop two forward, One Backward, Throw backward & Catch the ball, Blind man walk with hurdles, Ball between legs, Passing the ball Upward, Airplane & Airport, Pickpocket tag, Threading the beads, Light the Candle, Fast walking race & One leg Running Race. Totally there were 66 Adults and 114 children with 11 ASHA Staff. All children received individual gifts in addition to prizes for the sports events. All of them had a good time with snacks & Lunch. The sports day expenditure & individual gifts was Sponsored by Overseas Women's Club.

Sports day-26.1.2012-Musical frog



Beading the chain- sports day event for women-26.1.2012



Gift distribution by Overseas Womens Club on sports day 26.1.2012



Supportive Monitoring Visit from KNH Germany & CCCYC:-

On dated 29th of February Mr. Clemens Ecken, Department of Finance & Controlling in KNH, Germany & from CCCYC Mr. Stanley Bhasme, Mr. Joseph Chungath & Mr.J.Asir Jeyasingh visited for our Organization and had a discussion on Financial & program aspects.

Research

The research project titled- **Impact of Anti-retroviral Therapy (ART) on Socio- Economic (SES) productivity of HIV infected individuals in an urban Indian Setting** was completed and presented at the 4th National Conference of AIDS
Society of India – 16th to 18th December 2011, Lucknow.

It was also presented at The HIV Congress 2012- 16th to18th March 2012 Mumbai It was also presented at XIX International AIDS Conference 22-27 July 2012 | Washington D.C., USA.

4.The KNH-PMTCT Project - Prevention of Mother to Child Transmission of HIV project

This program was started in 2002 and seeks to incorporate PMTCT services into antenatal services in hospitals. Charitable hospitals in the private sector, that provide free or subsidized service to the poor and marginalized were the focus of this program. In 2002 six hospitals were part of the program and over the last six years the program has been up-scaled to 25 hospitals in the four southern states of India. Through this program, hospitals treat and deliver HIV positive pregnant women so that the risk of transmission to the new born child is reduced, provide primary prevention to women, create an enabling environment for the staff of the hospital and decrease stigma and discrimination in the medical setting. The program includes training of PMTCT counselors, their introduction into the antenatal clinics, voluntary and free HIV testing for pregnant mothers, with pre- and post- test counseling, primary prevention of HIV/AIDS and other STDs, family planning measures, identification of HIV positive pregnant mothers, further counseling for them to make informed choices regarding ARV therapy, mode of delivery, mode of infant feeding, family planning, HIV testing for the new-born child and their integration into the medical and pediatric clinics of the Institution, or to nearby Government ART centers for follow up.

Currently, ASHA Foundation had been partnering with 18 hospitals for the Prevention of Mother to Child Transmission (PMTCT) Project funded by Kindernothilfe, Germany, through the Churches' Council for Child and Youth Care (CCCYC). This is the fifth annual report, for the period 1st April 2011 to 31st March 2012.

The hospitals supported by Kindernothilfe/CCCYC presently with monthly financial aid are:

- 1. Bethesda Leprosy Hospital, Narsapur, Andhra Pradesh
- 2. Women's Hospital, Ambajipeta, Andhra Pradesh
- 3. St. Joseph's General Hospital, Guntur, Andhra Pradesh
- 4. Rural Health Training Centre, Kazhakuttom, Kerala
- 5. Dr. Somervell Memorial CSI Hospital, Karakonam, Kerala

- 6. LMS Boys' Brigade Hospital, Kundara, Kerala
- 7. Bethesda Hospital, Ambur, Tamil Nadu
- 8. Christian Fellowship Hospital, Oddanchatram, Tamil Nadu
- 9. Gnanadurai Hospital, Sivakasi, Tamil Nadu
- 10 SA Catherine Booth Hospital, Nagercoil, Tamil Nadu

The hospitals that have sustained the project on their own and are receiving only technological help, with financial support as needed for the care of HIV positive identified in their hospitals, IEC material and training of counsellors are:

- 1. The Bangalore Baptist Hospital, Karnataka
- 2. Church of South India Hospital, Bangalore, Karnataka
- 3. Christa Mitra Ashram Hospital, Ankola, Karnataka.
- 4. Hope Hospital, Kolar, Karnataka.
- 5. Seventh Day Adventist Hospital, Bangalore, Karnataka
- 6. Bishop Walsh Memorial Hospital, Coimbatore, Tamil Nadu
- 7. CSI Hospital, Kanchipuram, Kanchipuram Dt., Tamil Nadu
- 8. CSI Hospital, Codacal, Kerala

The hospitals that will become sustainable, similar to the above in 2012-13 are:

- 1. Dr. Somervell Memorial CSI Hospital, Karakonam, Kerala
- 2. Rural Health Training Centre, Kazhakuttom, Kerala
- 3. LMS Boys' Brigade Hospital, Kundara, Kerala

Site visits:

A total of 11 site visits were made under the KNH PMTCT to streamline the project and evaluate the activities under the project. Financial accounts were also checked at these visits. Staff members at the institutions were sensitized by ASHA Foundation staff at these follow-up visits .

Site visit to Rural Health Center-Kazhakuttam



Busy antenatal clinic at RHC, Kazhakuttom



Workshops:

During this period 7 new nurse counsellors were trained in workshops held at ASHA Foundation, from 4 hospitals. In addition, one new staff of ASHA Foundation also underwent training in HIV counselling in this workshop. The trained counsellors have also been continually sensitizing their own hospital staff.

Printing of Posters:

The updated "WHO Recommendations of 2010" protocols were reprinted in April 2011.

People Sensitised	By Trained Counsellors in their
	Hospitals
Staff Nurses	428
Nursing Students	430
Ward Aides	222
Paramedicals and Community	
Workers	134
Community	777
Total	1991

Counselors trained in PMTCT at ASHA Foundation- with their certificates



PMTCT workshop at ASHA Foundation premises



	KNH	KNH	KNH	ASHA
Item	PMTCT	PMTCT	PMTCT	PMTCT
	Jan'07-	Dec'10-	Apr'11 –	Cumulativ
	Nov'10	Mar'12	Mar '12	e
	(old)	(new)		Jan '03 –
				Mar '12
Total no. of deliveries	57,226	23,436	17,606	1,04,144
Total no. of ANC women	48,867	21,067	15,518	89,307
Total no. of women counseled	58,590	21,390	15,690	1,05,517
Total no. of women tested	57,992	23,393	16,664	1,06,371
Total no. of antenatal women identified HIV	379	113	90	649
positive				
No. of liveborns (6 twin deliveries)	294	101	77	524
Eligible women treated	276	101	77	497
No. of babies treated	285	100	76	509

PCRs or ELISAs done	241	83	71	413
Positive PCR	5	2	2	10
Negative PCR/ELISA	236	81	69	403
Transmission rate	2.1%	2.4%	2.8%	2.4%

Research: New software has been developed that incorporates all the details of HIV positive mothers who have dignosed since tethe beginning of this project.

Meetings Attended:

- Dr. Glory Alexander attended the National Conference of the AIDS Society of India (ASICON) held at SGPGIMS, Lucknow from 16th to 18th December 2011, and spoke about "Predictors of HIV Infection in Pregnant Women in the Indian setting".
- Dr. Glory attended the HIV congress held from 16th to 18th March 2012 in Mumbai, and gave an oral presentation on "Experience and outcome in the usage of extended PPTCT protocols in South India"

Papers Published

- A paper titled "Predictors of HIV Positivity among Pregnant Women Presenting for Obstetric Care in South India A Case-Control Study" was submitted to the AIDS Care Journal in October 2010 and accepted for publication in January 2011and was published in the October 2011 issue.
- A paper titled "Description of comprehensive PPTCT Counsellors' training: The backbone of PPTCTservices in India" has been accepted for publication in Journal of Health Management Issue 14.3 (July September, 2012).

S.	Date	Topic	For Whom	Venue	No.of	ASHA
N					Participants	Staff
1	1.3.2011	WHO	Doctors &	Christian	20	Dr.Glory
		New	Paramedicals	Fellowship		Alexander
		Guidelines		Hospital,		
				Oddanchatram		

5.ICMR Research Project:

This is a three year project funded by the Indian Council of Medical Research.

Aim: Project Title: Growth and development of children with Human Immunodeficiency Virus (HIV).

Objectives: 1) To determine the physical growth (height, weight, BMI, mid-arm circumference) of children infected with HIV according to age, sex and socio-demographic factors Antiretroviral therapy (ART), and health status.

2) To assess the intellectual and social maturity of children infected with HIV in terms of age, sex, socio-demographic factors, physical growth and health status.

Work progress (April 2011-March 2012):

During this period we completed the Baseline recording and the first six monthly recording of the children enrolled in the study which includes Group 1A, HIV positive children on HAART (N=32), Group 1B, HIV positive children who are not on HAART (N=30), Group 2, HIV exposed children (N=98) and Group 3 HIV negative children (N=70) their nutritional assessment was done by measurement of height, weight, BMI, mid arm circumference and head circumference and sexual maturity was assessed using Tanner's Sexual Maturity Rating scale. In the laboratory tests serum total protein and albumin is measured to assess for malnutrition. In addition, to get an estimate of immune status total lymphocyte count was performed.

Baseline and first six monthly recording of Intellectual development of the cases and controls were done using Binet Kamat Test. Social maturity was assessed using the Indian adaptation of Vineland Social Maturity index. The Rotters sentence completion test to evaluate quantitatively and quantitatively projected sense of personality and stigma and discrimination from the completed responses and compare them among the 3 groups. In addition to these measures a stock of the scholastic performance was taken. Psychological response to the self-image was assessed using a validated Visual Analogue Scale.

Baseline and first six monthly values were captured for co-morbidities like developmental problems such as nocturnal enuresis, diabetes, infections, malignancies, or any micro-nutrient deficiencies.

All values of the recordings were entered into the respective proformas and later entered into the designed database and checked for errors. Frequencies and

percentages were calculated for categorical variables and these variables were compared among the three groups using chi-square or fisher exact test. Table 1 gives the summary statistics of the baseline recording of the variables which had significant P value.

Examination of child as part of the ICMR project



Table 1: Summary statistics

Variable	Group 1 (N=62)	Group 2 (N=98)	Group 3 (N=70)	P value Chi square between Group 1 and Group 3	P value Chi square between Group 1 and Group 2
Languages		N (%)	N (%)	N (%)
Kannada	24	37	9 (12.86)	<.0001	0.3925
	(38.71)	(37.76)			
Tamil	14	31	31		
	(22.58)	(31.63)	(44.29)		
Telugu	20	23	8 (11.43)		
	(32.26)	(23.47)			

Hindi	0	0	7 (10)		
English	1 (1.61)	0	0		
Others	3 (4.84)	7 (7.14)	15		
			(21.43)		
Mothers Occupation	•				•
NA (Not Applicable)	21	7 (7.14)	2 (2.86)	<.0001	<.0001
	(33.87)				
House wife	17	33	30		
	(27.42)	(33.67)	(42.86)		
Unskilled	8 (12.90)	35	29		
		(35.71)	(41.43)		
Skilled	12	20	9 (12.86)		
	(19.35)	(20.41)			
Blue Collar	3 (4.84)	3 (3.06)	0		
Unknown	1 (1.61)	0	0		
Fathers Occupation					
NA (Not Applicable)	30	41	2 (2.86)	<.0001	0.6407
	(48.39)	(41.84)			
Unemployed	1 (1.61)	4 (4.08)	0		
Unskilled	11	17	37		
	(17.74)	(17.35)	(52.86)		
Skilled	16	32	28		
	(25.81)	(32.65)	(40.00)		
Blue Collar	0	2 (2.04)	0		
Professional	2 (3.23)	1 (1.02)	0		
Others	1 (1.61)	0	0		
Unknown	1 (1.61)	1 (1.02)	3 (4.29)		
Prior exposure to TB	}	•	•	•	'
Yes	37	57	11	<.0001	1.000
	(59.68)	(58.16)	(15.71)		
No	22	35	59		
	(35.48)	(35.71)	(84.29)		
Unknown	3 (4.84)	6 (6.12)	0		

The results show that there is no statistical significant difference between Socio economic status, Monthly income, Gender and schooling among the three study groups. Whereas statistically significant difference was seen in language, Mothers occupation, father's occupation and prior exposure to Tuberculosis among group 1 and Group 3.

ICMR project- examination of child



Training, Seminars Conducted by ASHA Foundation during the year

No	Date	Topic	For whom	Venue	No Part icipa nts	ASHA staff
1	28.4.2011	Update on new PMTCT regime	Doctors & Paramedicals	Hospital premises Christian Fellowship Hospital, Oddanchatram	20	Dr. Glory Alexander and PMTCT team
2	23 .6.2011- 25.6.2011	Vth Pune Teachers Training workshop	Teachers from Pune schools	Jnana Deep Vidyapeeth. Pune	31	Joyce Davis, and master trainers
3	26.6.2011	III Pune Alumni Meeting	Teachers from Pune schools	Jnana Deep Vidyapeeth. Pune	21	Joyce Davis, and master trainers
4	28.7.2011- 30.7.2011	37 th Teachers' Training workshop	Teachers' from Bangalore	CCCYC - Bangalore	36	Joyce Davis, and master trainers
5	26.9.2011- 28.9.2011	ESHA'S study process on mainstreamin g human sexuality	Representative s & members of NCCI	Azariah guest house, NCCI Campus, Nagpur	18	Joyce Davis, Dr. Wati Long Char (Senate of Serampore)
6	07.10.2011	Importance of counseling & impact of HIV	Pastoral Counselling Students	Bangalore Baptist Hospital	15	Chitra
7	14.10.2011	Pre- test counselling	Pastoral Counselling Students	Bangalore Baptist Hospital	15	Chitra
8	14.10.2011	Character Building & Sexual Development.	Teachers of Mariam Nilaya school	School hall, Mariam Nilaya school, Dodda Banaswadi	50	Joyce Davis, and master trainer 42

9	21.10.2011	Post- test counselling	Pastoral Counselling Students	Bangalore Baptist Hospital	15	Chitra
10	04.11.2011	Ongoing supportive counseling	Pastoral Counselling Students	Bangalore Baptist Hospital	10	Chitra
11	21.11.2011	Stigma & Discriminatio n in HIV	IHMR students & Program Managers	EDC-SJP Polytechnic College	12	Chitra
12	22.11.2011	Counseling in HIV; Positive Living & socioeconomic rehabilitation	IHMR students &Program Managers	EDC-SJP Polytechnic College	12	Chitra
13	26.11.2011	Telephone Counseling Workshop	ICTC counselors of KSAPS	ASHA Foundation	13	Dr.Glory, Ms.Chitra
14	09.12.2011	Crisis counseling	Pastoral Counselling Students	Bangalore Baptist Hospital	15	Chitra
15	30.1.2012- 4.2.2012	Workshop on PMTCT	Nurses & Counsellor	ASHA Foundation premises	8	Several ASHA staff
16	18.2.2012	Partnership of parents with the school	Parents of Mariam Nilaya school	School hall, Mariam Nilaya school, Dodda Banaswadi	89	Joyce Davis, and master trainer
17	18.2.2012	'Friendship'	Students of class X Mariam Nilaya school	School hall, Mariam Nilaya school, Dodda Banaswadi	178	Joyce Davis, and master trainer
18	21.2.2012	Partnership of parents with the school	Parents of Prudence International school	School hall, Prudence International school, Tumkur	15	Joyce Davis, and master trainer

19	08.03.2012	Telephone Counseling	ICTC counselors of	ASHA Foundation	07	Diptty & Chitra
		Workshop	KSAPS			
20	09.03.2012	Telephone	ICTC	ASHA	12	Diptty &
		Counseling	counselors of	Foundation		Chitra
		Workshop	KSAPS			<u> </u>
21	13.03.2012	Telephone	ICTC	ASHA	08	Diptty &
		Counseling	counselors of	Foundation		Chitra
		Workshop	KSAPS			
22	14.03.2012	Telephone	ICTC	ASHA	10	Diptty &
		Counseling	counselors of	Foundation		Chitra
		Workshop	KSAPS			
23	31.3.2012	Alumni	Teachers'	Presentation	15	Biju
		meeting I	from Mumbai	Convent school		Sebastian
				Mumbai		
24.	23.11.2011	PMTCT		EDC	12	Dr.Glory
						Alexander
2.5	16 10 2012	T		a a b a b a b	1.70	D C1
25.	16.12.2012	_			150	
				Lucknow		Alexander
26	19 12 2012			SCDCIMS	150	Dr. Clarry
∠ 0.	10.12.2012		·		130	
				Luckilow		Alexander
27	16 3 2012	1		Hotel Tai lands	300	Dr Glory
27.	10.5.2012	_	Doctors	_	300	
				Ziid,ividiiiodi		1 Horandoi
24.25.26.27.	23.11.2011 16.12.2012 18.12.2012	Impact of ART on SES of PLHIV Experience in PPTCT protocols Experience in PPTCT protocols	IHMR students &program managers Doctors,resear chers&scientis ts Doctors,resear chers&scientis ts Doctors,resear	Mumbai	150 150 300	

Other matters

During the year, the next five year strategy planning (2012-2017) for ASHA Foundation was started and is currently going on.

We were informed on 31.3.2012, by the scientific committee that our research paper entitled"Impact of Anti-retroviral Therapy (ART) on Socio-Economic Status and Productivity of HIV infected individuals/households in a Private-Setting in India" and abstract number A-452-0401-11145,has been selected for presentation in an Oral Poster Discussion Session at the XIX International AIDS Conference (AIDS 2012), to be held in Washington, D.C., 22-27 July 2012. Our presentation was on 23.7.2012.

During the year five staff resigned from ASHA Foundation and four new staff joined.



ASHA Foundation staff

Our heartfelt gratitude to

Members of the Governing Board of ASHA Foundation for their input and guidance

Kindernothhilfe, Germany and Christian Council for Child and Youth Care, Bangalore For their support.

Mr. Krishna Chivukula and INDO-US MIM-TEC Pvt.Ltd for their unending generosity in supporting ASHA Foundation since 2005

Charities Aid Foundation (CAF) India towards the support for investigations and drugs for HIV infected and affected individuals.

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