

ANNUAL REPORT
2020 - 2021

SAHAY





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Board Secretary's Message

“Social distancing”
became an act of love,
and
connotations of “positivity”
turned sinister.



The Grocery Assistance
provided to more than
11,000 families
was a reassurance
aimed to mitigate
their immediate concerns.

Last year's COVID-pandemic has been one of the most unsettling events in our lives, and continues to torment us even till now. The outbreak of this contagion brought the entire globe to a standstill, with several countries announcing complete lock downs, causing major economic disruptions and eventually affecting the lives of billions worldwide.

Prime time news discussions became morbid, while newspaper headlines screamed the number of fatalities each day. Even social media posts, rife with heartbreaking stories seemed like grim reminders about the fragility of our lives. The new norms dislodged the foundations of our earlier beliefs and perceptions, where “social distancing” became an act of love, and connotations of “positivity” turned sinister. Some people even interpreted it as “nature's revenge on humankind”.

In India, the lock down extended for months as COVID cases began to rise. The embargo extended to business activities and all forms of transport. The guidelines prohibited public gatherings, prompting educational institutions to remain shut indefinitely. The medical infrastructure was already crumbling with the skewed ratio of healthcare workers to the number of daily COVID positive cases. All such factors collectively contributed to numerous apprehensions within most of us. Fear and uncertainty drove many to the brink of sanity. Forwarding messages on WhatsApp without verifying facts added to the confusion.

The situation has been even more ruthless for families in the economically disadvantaged section, where every day has been a constant struggle for

existence. Already reeling under the adverse economic impact of the prolonged lockdown, the rising prices of essential commodities along with the dwindling scope of income, fulfilling basic needs became untenable. Education of children from such families was at stake, with reports of thousands in the country dropping out of schools due to inadequate support. Access to healthcare for non-COVID and chronic ailments almost came to a standstill. Their treatment suffered due to the unavailability of doctors and hospital beds.

The situation was similar for the sponsored families in the communities SAHAY serves. As most of the families earn through daily wages, there was no income. "Food" ranked as the primary need for such families. The children and youth lacked any academic engagement and were confined within their homes. They had limited opportunities for interaction, which took an emotional toll on these youngsters.

Meeting the challenges of the situation, teams at SAHAY meticulously collected inputs and data from volunteers on the plight of these families. The staff at the Community Centres connected with each family over the phone, trying to identify their immediate needs. At the same time, the teams adapted to the situation and started building staff capacities to design and deliver programmes in hybrid mode.

The Grocery Assistance provided to more than 11,000 families was a reassurance aimed to mitigate their immediate concerns. Online tutoring, internet reimbursements, and scholarships, including e-tablets for upper-



Despite
multiple challenges
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standard students provided an added impetus even for parents to support their children's education. Tele-health services offered online consultations with physicians and associated services for the entire families of beneficiaries, both existing and previously sponsored. Already battling COVID fatigue, these youngsters were susceptible to depression and substance abuse. To avert such a situation, the programmes offered training sessions on resilience, laying special emphasis on mental health.

Only a couple of months into the COVID-crisis, another calamity, cyclone Amphan, devastated the lives of thousands, especially in rural West Bengal. It left a trail of battered houses, flooding several areas and destroyed food grains and fertile farmlands. It rendered the land unsuitable for farming and left the families with no other alternative means of livelihood. Teams from SAHAY travelled to these remote and sometimes inaccessible areas to assess damages, facilitate funds for repair works, and in a coordinated effort provided immediate relief to more than 250 beleaguered families.

Right now, there seems to be no permanent end to the COVID-threat. Despite multiple challenges there will be no compromise in team SAHAY's concerted and consolidated efforts to contribute towards creating better circumstances and a better world full of hope and love.

Sincerely,
S.V. Raman



Agency Director's Note

The pandemic unleashed a monumental crisis for all of us. The changes in our lives have been rapid since last year, yet most of us have already adapted to the unrelenting circumstances COVID-19 thrust upon us. Learning to live within new set of boundaries, alternating between work and family, while trying to maintain equilibrium, we rediscovered the dynamics of our personal and professional relationships.

Unforeseen obstacles often spur unconventional remedies, reinventing ways to overcome hindrances. Similarly, team SAHAY's stopgap strategies on the mode of programme delivery during the lockdown, laid the foundation for our future approach, a preface to the endless scope of opportunities.

Within a week into the lockdown, all our teams resumed functioning online. Thanks to the existing IT infrastructure that allowed teams to consider radical changes in the mode of the programme delivery.

During the peak of crisis, teams worked on war footing to set the stage for hybrid programmes and services, where each team member, including the programme trainers and volunteers enhanced their own job-skill capacities to contribute to the overall success of our mission.

The teachers learned to conduct online lessons, the volunteers worked tirelessly to connect the families with our Community Centres and the unwavering sense of commitment of each team member towards the families is reflective of the compassion, which binds us together as one team.

The response and outcome are equally indicative of the wholehearted

acceptance by the community towards our outreach. Years of programmatic inputs and 32 years of trust, built within the communities were also the key driving forces for this smooth transition to availing online programme services. Presenting pointers for us on ways to redesign programme components for our current and future beneficiaries.

We have started several initiatives within the organisation consisting of teams with staff from various departments, to counter the multitude of challenges arising in these extraordinary circumstances. Each of these initiatives are helping us inch closer to our goals; correspondingly, it creating space for staff interaction and bonhomie for better task coordination and closer understanding as a team.

As we step in with a changed approach, our teams, with years of experience in working with communities, both in urban slums to remote villages, and enhanced skill sets forges a formidable combination to triumph over challenges. Above all, their unconditional love for the children's progress and well being is the unique connect that seals a stronger bond with the communities.

Sincerely,

Kirtimayi Mishra





SAHAY

SAHAY is a Kolkata-based social development organisation- (SO063545) registered under the West Bengal Societies Registration Act, 1961) working towards the welfare of children and youth from economically marginalised families, addressing their challenges and helping them establish financially independent futures through a strategic framework of Child Sponsorship Programme.

With 32 years of dedicated service, SAHAY has extensively worked in several districts and urban communities, enabling the beneficiaries with knowledge and skills to step out of the cycle of poverty. Our association with communities and grassroots level social workers have yielded in a deeper understanding of the needs of the communities and expertise to find sustainable solutions for a better future.

The Child Sponsorship Programme provides children and youth (aged 2-24 years) with a scope for holistic development. With programmes designed on the changing needs of the families, each are aimed to address their concerns in areas of Health, Education, Empowerment and Employability.

To ensure convenience of access to all the services and activities each programme offers, 3 Community Centres are located adjacent to our areas of service at Hazra, Jorasanko and Narkeldanga.

Additionally, there are 2 Cluster offices in Hooghly and South 24 Parganas,

and the recently acquired space for the Youth Resource Centre for specifically youth-centred programmes.

All Community Centres provide clinic services, access to libraries and adequate training spaces. Visual Monitoring systems at strategic locations ensures maintaining safety protocols as the foremost priority.

For any kind of correspondence, write to :-

The Agency Director,
SAHAY,

15C, Anil Ray Road, Kolkata- 700029.

www.sahaywb.in

** In compliance with FCRA Amendment Act 2020, dated 28th Sept 2020 SAHAY discontinued its partner projects with immediate effect.*

COMMUNITY CENTRES

Community Centre - Narkeldanga **CCN**
Community Centre - Jorasanko **CCJ**
Community Centre - Hazra **CCH**

24 PARGANAS (SOUTH)*

Bani Mandir **D6**
Baikunthapur Sishu Seva Kendra **N2**
Mukti Ananda Tirtha **NC11**
Economic Rural Dev. Society **NC15**
Ashurali Gramonnayan Parishad **NC16**

24 PARGANAS (NORTH)*

Socio Legal-Aid Research and Training Centre **NC19**

BANKURA*

Gandhi Vichar Parishad **NC18**

HOOGHLY*

Taraknath Maternity and Child Welfare Centre **M1**
Satya Bharati **M2**
Kalyan Bharati **M4**

MALDA*

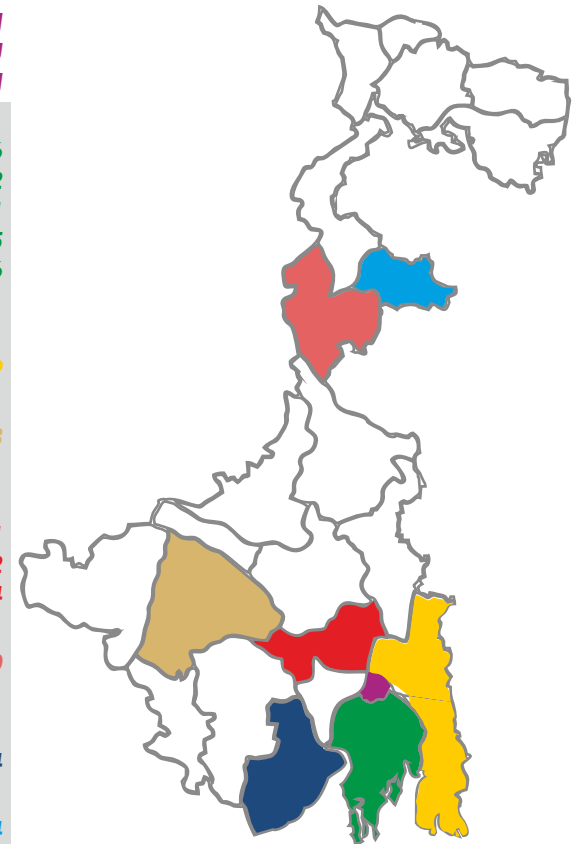
Economic Rural Dev. Society **NC20**

PURBO MEDINIPORE*

CINI-Moyna Rural Health Development Centre **NC14**

DAKSHIN DINAJPUR*

Economic Rural Dev. Society **N4**





5 key areas of
Strategic Intervention
in the
Child Sponsorship
programme.

1

Exhibiting Healthy Behaviours

Increased healthy behaviours associated with priority health issues.

2

Using Health Services

Increased use of health services (primary health care service, dental services, medicines, nutrition rehabilitation and specialised healthcare services) when needed.

3

Educated

Increased secondary school completion regardless of age of graduation.

4

Empowered

Increased number of youth with the skills, knowledge and social responsibility that empower them to be agents of change.

5

Employed

Increased number of youth with a paying job.



Safeguarding Children & Child Protection Protocols

As a child-focused organisation, the Child Protection Protocols are implemented across the programmes, stakeholders and staff at all levels of the organisation.

Our vision for child protection is based on the following guiding principles:

- Zero tolerance policy for any form of child abuse.
- Protection of children's rights and their best interests.
- Recognition of children as the first priority, when dealing with all identified or suspected cases of child abuse.
- Empowering and educating children on their rights, personal safety and steps they can take in case of any violation.
- Integration of child protection into all aspects of organisational strategy, organisational structures and work practices.

SAHAY recognises Child Protection as the primary step to attaining our organisational vision. All our functional protocols consist of several components, each with the

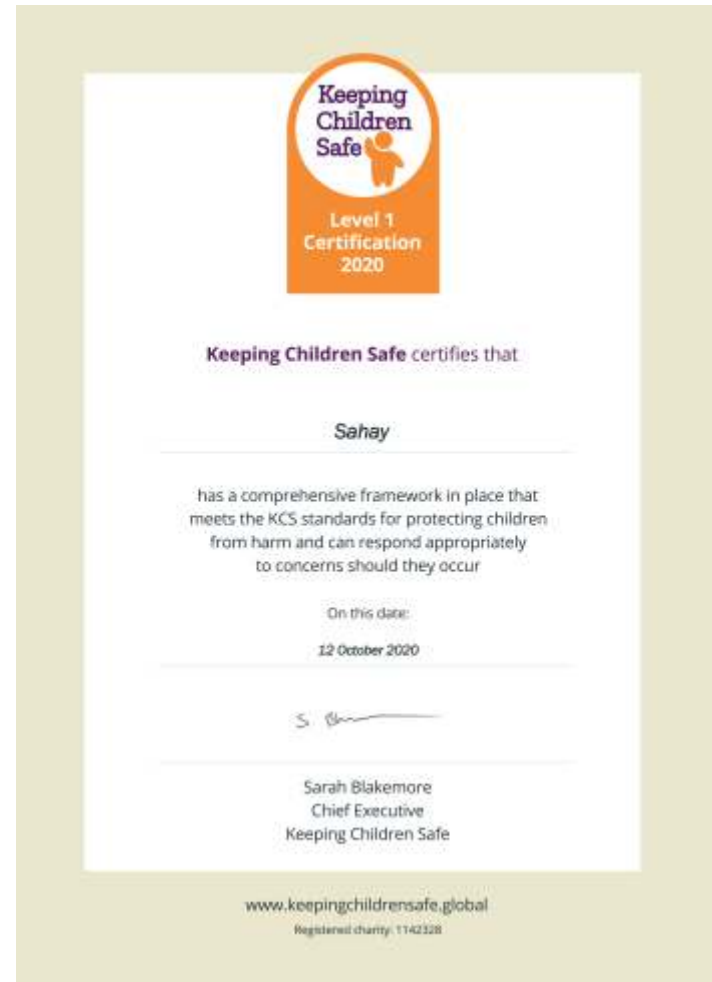
goal of safeguarding the interests of the children and youth.

Keeping Children Safe, a global organisation for child safeguarding, reviewed our child safeguarding policies and SAHAY has qualified for Level 1 Certification.

Level 1 Certification implies that the organisation has developed a child-safeguarding framework that protects children from any form of abuse. In case of any breach, there are appropriate response mechanisms in place.

Keeping Children Safe further provided technical training, diving deep into the aspects of child protection. Intensive training on Prevention of Children from Sexual Offences (POCSO) Law, nuances related to Child Safeguarding and its application were provided at the agency level.

SAHAY constituted a Child Safeguarding Committee for conducting risk assessment within identified areas and recommended control measures to reduce all elements of risk.



Combating Crisis with Care

Initially, when reports of COVID started appearing in the news, most did not heed the warnings until authorities announced complete lockdown. The first few weeks into the lockdown were equally unprecedented for the beneficiaries and staff alike, but that is where the similarity ends. As the curbs extended to several months, the ripples due to the economic downturn became more apparent. However, the challenges were disproportionate, weighing down uncompromisingly on the underprivileged section, where most were staring at an uncertain future with an overarching financial crisis.

At our Community Centres, all programme-related activities and services remained suspended as per COVID-safety guidelines. An abrupt pause derailed the programme-training schedules and interrupted our daily interactions with the beneficiaries. Situational unfamiliarity and ambiguities about the future compelled all staff back to the drawing board to analyse the situation, carve out a roadmap outlined with new strategies, revive community connect, and resume our services at this critical juncture.

SAHAY's existing robust IT infrastructure allowed seamless administrative functions with the staff at various levels meeting virtually to understand the scope of operations and ambit of programme implementation within the given circumstances. It was imperative to assess the needs of the communities, in terms of priorities and provide systematic interventions to mitigate the immediate concerns of the families.

Connecting with each family, identifying their needs, validating their data, and providing them with the required support was an arduous and time-

consuming procedure. With most contact numbers of the beneficiaries dysfunctional, it seemed like a stalemate on the first move.

Any form of physical presence in the community or the Community Centre would contravene all safety protocols. This situation presented the staff with only one alternative – to engage the field volunteers and young programme participants to reach out to the families and connect them with the staff at the Community Centres, setting the basic premise for a superlative and comprehensive win.

After connecting with each family over the phone, the staff at the Community Centres updated complete details of the sponsored families such as income status, number of members in the family, their children's educational and health status along with the availability of a smartphone.

Identifying the needs of the families was the next logical step. As most in the communities are daily-wage earners with minimal or zero savings, basic meals had become scarce. The families were completely reliant on municipal authorities, social welfare groups, and self-volunteering individuals for their food supplies. A small group of individuals/families either borrowed money to purchase additional essential items or took items on credit from local stores.





Providing Groceries:

Pinpointing on the urgency, we provided grocery assistance to all the families, twice over the last year. Selecting an assortment of basic essentials based on the inputs from most families, the quantity sufficed to sustain for a typical family of 5-6 members for two months. Families with malnourished children received special diet packages. The families that received Special Needs Donation grants were requested to opt for basic food assistance, so that, three additional families could be accommodated with the support.

Education:

The continuity of education for children was an area of concern. The parents were worried about their children's future.

We developed engaging tutoring materials designed for online classes, and based on the availability of smart phones, participants accessed the tutorials for various subjects covering their school syllabus. For those who did not have any smart devices, the teachers connected with them in smaller batches over phone and provided assignments regularly.

When the Group Tutoring programme was introduced online, the initial participation was lukewarm due to the non-availability of device among participants. But, as the parents understood the importance of these programmes, they invested their efforts to ensure their children are connected with the Centres. Several families purchased pre-used smartphones for their children to attend tutoring and other training sessions.



Purchasing data-packs at frequent intervals and poor network connectivity issues became their additional challenges, yet most parents were actively involved with their children's educational progress.

For instance, 94% was the average attendance from participants of the Group Tutoring programme, with classes held for five days a week. The children and youth quickly adapted to the online format and started using available tools on the internet for their training sessions and studies. The transition was not difficult for the youngsters as they are already privy to internet. Scholarship support included 393 e-tablets for meritorious and upper-standard students, which served as a catalyst for them to continue with their education. Many among them have already received and written their examinations with these tablets.

Health & Emotional Wellbeing:

Access to treatment for chronic ailments remained a continuous challenge for families with members that required medical attention. Based on the government's model for outreach, we started "Telehealth Services". Online physician's consultations, free medicines, and reimbursements for pathological tests were provided to the families. Even in cases of hospitalisation, patients were referred to partner hospitals, covering entire expenses for the treatment. Telehealth services were even extended to previously sponsored families.

The entire phase has also been emotionally gruelling and anxiety-ridden for



1,646
Digital
Devices
for learning

4,435 cases
received
Telehealth
Services

the families primarily due to loss of income. The youngsters especially, with limited spaces for interaction, felt incarcerated within homes. Many were restless and hoped their schools and colleges would soon resume. The Resiliency programme precisely trained its participants to be more resilient in face of adversity, through a series of training sessions on Self Calm, Self-Replenishment, Hope and Optimism to engage these young minds.

In addition, the community's acceptance of availing the programmes and services online, and adapting to using gadgets are the key reasons for the successful outreach. Our field volunteers and youth participants demonstrated the usage of smart mobiles to the guardians of the children as a communicative interface. They became so privy that many of them even placed online orders for birthday gifts from sponsors to their children.

As activities are gradually resuming, most of the working population in the communities have returned to their previous jobs, while many have started their own businesses, and there are some others seeking other avenues of employment.

Also in 2020, due to amendments to the Foreign Contributions Regulations Act, we had to discontinue our partnerships and operations in several rural areas. However, we re-aligned our operations in areas integrated as Clusters, to reach the rural population. Clusters are closely monitored and equipped to deliver programmes and services efficiently.

The hybrid mode of programme delivery has already made inroads and integrated within the future design of our programmes. We look forward to tapping into every potential that provides scope for endless opportunities.



Emergency Grocery Assistance

The unprecedented duration of the lock down affected all segments of society. As businesses and employment were the foremost casualties, the economically disadvantaged were the most affected lot. Almost 7 million daily wage workers lost their jobs.

In our communities, most earning members are daily wage workers and micro-scale traders, who bore the maximum brunt, losing their sources of income, and falling into debt. Several families reportedly left the city and relocated to their respective villages. There were also instances where the children helped in their parents' business by lending a hand, while there were a few, who even started working part-time to support their families.

There were drives by the local administration to provide food to communities, whereas the local clubs took initiatives like running community kitchens to serve the worst affected. Other humanitarian organisations and individual donations were accumulated to address their emerging needs.

After the curbs were partially lifted, the situation slightly improved for a handful that found re-employment and those who started their own businesses, while the rest were still seeking other avenues of employment. With the mounting financial crisis, families struggled to tide over food shortage and an upsurge in the price of basic items. Food became the prime necessity for families.

Cognisant of the setback families were enduring each day, we provided Emergency Grocery assistance to the 11,500 sponsored families to avert the

ongoing humanitarian crisis affecting their lives irreparably, and to reduce their apprehensions about an unpredictable future.

The ration sufficed the families for more than two and a half months; where many families could save the money set aside for groceries, to pay off other expenses like their children's school and tuition fees; rent, and electricity bills.

The families regard the grocery assistance as a caring gesture that helped them re-establish their hopes for a better future.



Quotes & Snippets

Md. Abid, Daily Labourer

Md. Abid, has a family of five including his wife, 3 children, and mother. He supplies muffins and ice cream cups to wholesalers. His wife helps in making these cups. He makes 5,000-6,000 thousand rupees a month.

The lockdown dealt a harsh blow to the family. There were days that the family did not have food to eat. Ration relief from the government and the grocery support from the Community Centre helped the family to an extent, yet Abid had to take a loan to sustain the family. He wishes that the work would not stop abruptly again.



Saraswati Mallick, runs a roadside bakery items store

Both of Saraswati's daughters are sponsored youth. With the lockdown and intermittent restrictions in operating hours for stores, she found it extremely difficult to make enough money to support her family and bear the cost of their education as no rebates were available neither from the school nor the private tutors.

She barely managed to earn 7,000 rupees a month.

Food supplies was the biggest worry during the lock-down but the timely grocery support from the Community Centre was sufficient enough to support us for the following months.



Mahesh Das, Daily Labourer

Mahesh Das works as a daily wage labourer in a small-scale factory. His wife Gunja Das works in different households and together they share the expenses of their 3 children. During the lockdown period, both Mahesh and Gunja were out of employment and it was a difficult time for the family. The grocery support helped the family during these times.

There was no reprieve from payment of school fees for his 3 children. Despite paying the school fees neither they could go to school, nor attend any online classes as the family did not own a smartphone. It has been a while the factory resumed production and Mahesh has started earning his wages.



Multiplying Learning Opportunities

Closure of schools and colleges stymied the learning process for students. Losing almost a year and a half of their academic year has created a learning gap, especially for the slow learners, who find it difficult to cope with the lessons in the future.

Discontinuity in education, coupled with anxiety, depression, and continuous financial duress resulted in several children across the country from economically disadvantaged families opting-out of schools. Annual examinations in schools to entrance tests for several universities, including several, other competitive examinations had to be postponed or cancelled completely.

Learning via online mode replacing regular classes was completely unanticipated, and with this sudden transition to e-Learning mode, we altered our approach to education programme delivery within a short turnaround time.

Pre-empting these uncertainties, our team reviewed the existing programme delivery format and redesigned the entire lesson modules focussed towards online learning.

Prior to implementing the e-Learning programme, we assessed the viability of the proposed plan by conducting a survey, broadly based on the participants',

- Availability of smart device with internet connection
- Access to basic mobile phone handset
- Availability for online classes

Considering the number of children wishing to continue studying online, we also factored in the opportunities and associated risks for youngsters in the digital space.

Engaging the students and aiding teachers in creating a supportive learning environment was the primary objective. We conducted the tutoring programme virtually, for two and half hours per day, thrice a week. The teachers were trained to prepare lessons using internet tools and applications for interactive learning sessions.

A group of selected teachers and programme mentors compiled subject-specific videos, which were short, relevant, and informative. Some teachers even developed their own videos and e-worksheets for the programme participants. Worksheets were distributed to children who did not own a smart device. All materials developed were based on the government schools' curriculum.

We involved parents in the online classes to create a space for them to share their concerns regarding their children's performance in tutoring



The Education team will continue to conduct the programme through virtual mode with high-quality course content for a larger group of children. The team plans to increase the number of recipients through Hope scholarship and BASE PLUS programmes.

88% liked our videos related to the topic

89% liked our discussion on the topic

92% got help through this learning methodology

** opinion and analysis in NPS score*

programmes. Most parents were present during the e-sessions, which also fulfilled the two-adult policy' for Child Protection Policy compliances. Interactions between students and teachers was monitored, ensuring multilevel involvement of parents, mentors, Field Officers, Education Programme Coordinators, facilitators, volunteers, other project personnel as observers of the sessions.

After the temporary moratorium on school fees elapsed, many families were not in a position to incur the expense. To provide optimum opportunity to the students, we provided scholarships (HOPE- for students of higher secondary and graduation; BASE, and BASE plus for secondary level) and extended financial support for education. Meritorious students of higher classes received e-Tablets to continue with further studies.

There are some key insights that will shape our future course of action.

The demand for e-learning programmes will increase within the proximate future; hence our course and content design must create an impact on the level of understanding, memory retention, and recall among the students. Leveraging technology, learning can continue through virtual mediums. Teachers are already accustomed to this alternate method of teaching and interaction. Using digital platforms enable students to reuse and revise the materials whenever required.

Collecting participants' feedback seeking to know their experience and opinion on the e-learning sessions and analysed in NPS score, the following were responses to the survey.

Tablet for Education



“With constant headaches and eyesore, it became difficult for me to continue studying and might have completely dropped out of education. This tablet is a gift and the reason for me to continue with my studies. I want to make the most of this opportunity.”

- Debjani articulated.

Debjani's college admission coincided with the lockdown. It was announced that regular classes will remain shut and online classes would start soon, instead. Initially, as she had no prior experience regarding online mode of studying, she was apprehensive whether she would be able to cope with online classes and often worried about her future.

As her online classes begun, it took her a while to become privy to using her mobile to attend her classes, but eventually she adapted.

But, Debjani's prolonged use of mobile phone was a problem as it often resulted in splitting headaches. Strapping a headphone, trying to look into a small screen made it more difficult for her.

“Sometimes, I felt like giving up. Even the teachers would pity us and dismiss classes early, at times,” remarked Debjani.

However, it was a fleeting predicament as Debjani was shortlisted as a HOPE scholar receiving a tablet as a part of the scholarship. A total of 472 tablets for education were distributed to all HOPE Scholars. Many of the recipients share the tablet with their siblings and classmates, multiplying the scope of education among the users.

“I was equally surprised and excited. No more headaches or sore eyes. I will be able to continue with my studies online,” exclaimed Debjani.

With the tab now in hand, she could download various resources and even write her examinations to her satisfaction.

Hello for Health

As the lockdown restricted our regular programme activities, we provided appropriate interventions to ensure continuity in our services for the communities.

At the outset of COVID spread in the country, there was considerable panic among the public as well as the healthcare community. The health infrastructure had already surpassed its maximum threshold with patients outnumbering hospital beds, and over-occupied ICUs. Simultaneously, an acute shortage of frontline health care workers along with the rising number of COVID-cases threatened a catastrophic fallout.

Almost all hospitals turned into COVID-care units and private clinics were operating sporadically. Patients with chronic ailments and emergency conditions could not avail adequate medical attention. Treatment procedures and bed availability at private hospitals were beyond means of common salaried individuals. Medical consultations for non-COVID cases, recurring treatment, and medicines were incessant needs within the communities, but as the financial needs of the families preceded over any other need, their health and nutritional necessities were completely neglected.

Our Telehealth services provided doctor's consultations along with referral services to other hospitals for our families. Free medicines and pathological services could be availed as basic health care support. These services were available for the entire sponsored communities, including the previously sponsored families.

Orientation on important health issues, including ideal feeding habits and personal hygiene related to handwashing was provided to the sponsored children, youth, and caregivers. Laying special emphasis on children with

undernourishment, 413 families received added assistance, with increased allocation of items, from rupees Rs. 400 to 1,500 per child. The Nutrition programme with the caregivers was oriented over the phone in absence of physical training sessions.

Juhi, a youngster from our Community Centre at Hazra was referred for tests at our partner diagnostic centre, and subsequently detected with anaemia. She required immediate blood transfusion and was referred and admitted to a government hospital. As per protocol, she was examined for COVID-19 and tested positive. She was admitted on an urgent basis. The expenses incurred on bed charges, medicines, lab tests, COVID-19 tests, and urgent blood requirements were reimbursed while her treatment was ongoing. Juhi recovered and her condition has since improved. She is no more anaemic.

Similarly, **Sourav** from Community Centre at Jorasanko suffers from Thalassemia and requires blood transfusion every fortnight. But, due to the unavailability of transport during the lockdown, it was "situation critical" for the family. The health team stepped in to arrange an ambulance for Sourav, to be taken to the blood transfusion centre.

In another separate incident when Sourav was diagnosed with appendicitis and he was immediately referred to Peerless, one of our partner hospitals, where Sourav was admitted and treated.

12 year old, **Sayida** from the Community Centre at Narkeldanga was diagnosed with Cervical Tuberculosis that affected her dorsal spine as both her legs had become senseless with extreme back pain.



“With the outbreak of pandemic, we had to quickly re-plan the course of action for the programme. Switching from in-person clinic tests to Tele-consultancy, the families initially found it difficult to comprehend. But after a certain period, their fledgling reluctance paved way for trust and confidence.”

Dr. Chaity Das, one of the leading consultants.

Our health team immediately admitted her to our network hospital where she underwent spinal surgery to fix the collapsed spine. Sayida's family received complete support for the hospital, medicine, and diagnostic expenses through our Tele-Health Services. The family further received reimbursement for medical bills, ambulance charges, and purchase of mattress for back support, for post-operation recovery.

Sayida is currently stable with improvement in her condition as she is able to sit with support of the spine belt. With her pain reduced, she is continuing with her home physiotherapy for further improvement.

Referral services provided to the critical and chronic cases through the network hospitals (both Private. and Govt.) like RN Tagore, Peerless, Hope, Mercy, RG Kar, MS Bangur, and Calcutta Medical College. 58 sponsored children and youth, and 1 Volunteer received financial assistance towards their treatment.

Handmade Hygiene



As “hand hygiene” ranked among top most safeguards against Covid, in no time, liquid soaps and sanitisers flew out of shelves from pharmacies causing an acute shortage in availability. This is when one participant of our WASH programme-Oishiki, her mother Anima, also a caregiver participant, started preparing liquid hand wash at home after learning the process online.

Although the family was struggling to meet their daily needs, Anima knew the importance of hand hygiene from the training sessions of WASH programme. She knew the family needed to maintain and practice COVID appropriate behaviour. The high price of sanitizers coupled with unavailability due to the sudden demand for use propelled Anima to make liquid soap at home!

Oishiki and Anima followed a simple method for preparing the home-made product. Grating a regular soap bar and mixing into a stockpot of hot water to form a paste-like mixture. Then by adding glycerine and shampoo results in a creamy consistency of the hand wash. Finally, storing the liquid in bottles, she ensured her family continued practicing healthy behavior.

Oishiki and Anima urged their neighbours and relatives to practice hygiene and inspired many of them to replicate the process of preparing liquid soap at home at a fraction of the market price.

They both are grateful to WASH programme. Recalling the training components of the programme worked like an easy referral guide. This approach helped other guardians cope with challenges during a critical phase.



Rebooting with Resiliency

During the pandemic, children and parents feared to move out of their homes. Most parents lost their jobs and their children's schools and colleges shut. They were forbidden to step out of their houses or meet friends in the neighbourhood. If any member or family tested positive for Covid, they felt excluded and isolated from the community. The families were facing multi-pronged challenges. Some families even lost their near ones.

Such unrelenting circumstances caused major psychological issues. From children to the elderly, individuals with existing mental health issues were among the most vulnerable. There was also an upsurge in the number of COVID-19 related suicides in the country.

Psychological morbidities among the general population and COVID-19 patients was prevailing, reportedly about half the population faced psychological impacts leading to stress, anxiety, depression, insomnia, denial, anger and fear. The effect is even more pronounced in youngsters and continuous reinforcement was required to stave off any unfavourable outcome.

Chetana- a skill development programme was introduced, aiming to build facets of resilience among participants to achieve psychological balance, enhanced creativity, increase efficiency in work and personal relationships.

Resilience training was important as it equips with the emotional strength required to cope with adversities and overcome hardships. Those lacking in resilience get easily overwhelmed and may turn to unhealthy coping mechanisms.



The families also realised the needs of their children and helped them engage in the programme by providing smartphones for participating in the training. In the end, parents' involvement motivated children to engage and complete the programme.

Since the Resiliency training programme involves numerous activities, WhatsApp was the most feasible platform for participation and facilitation. Based on the modules of the training manual, young participants engaged in groups with a frequency of at least one activity per week followed by discussions.

Covering various facets of resiliency such as, Hope, Optimism, Self-care, Self-replenishment, Emotional expressiveness, Non-judgmental approach, Social support, Hardiness, Sense of coherence and ability to self-calm; the participants connected with all the activities, which were similar to their own situation.

The sessions conducted in virtual mode, integrated lessons with activities that worked well to keep participants engaged in positive mind frame and help them alleviate stress.

Keeping a positive approach, group-specific interventions were developed with proper risk assessment strategies, which were instrumental in guiding the plan, and prioritising mental health care to support the most vulnerable.

The role of social media has also been immense in this context. The public administration reiterated the need to address mental health issues to the masses. Newspapers too issued specific intervention strategies, psychiatric

consultations over the phone, and toll-free numbers, specifically for psychological and behavioural issues. Radio channels created public awareness with various articles and interactive talk shows with mental health experts. In 2021, the Resiliency training programme was changed to Emotional Well-being programme to cater to a wider age group and focus on areas such as Self-Calm, Self-Care, Emotion in Self, Social Support.



Soul Comfort

Arpita's biggest support was "Chetna" (Resiliency programme), and as a participant of the programme, she learned to cope with stress and handle peculiar situations.

Arpita lives with her mother and younger sister within the vicinity of the Jorasanko Community Centre. Last year's lockdown made circumstance unfavorable for the family. Arpita's mother, the sole earning member of their family lost her job. With schools shut and Community Centre activities suspended, Arpita was missing the regular interactions with her friends and teachers. This made her behave irrationally at times, which often ended in arguments at home with her sister and mother.

Arpita tried to reason out as to why she was going through the ordeal, but when she could not find answers, she turned more irritable.

Her studies were disrupted, her family was without income, and future insecurities crowded her mind, triggered unnecessary conflicts at home. She could neither concentrate on studies nor engage in her favourite activities. The situation was rough with considerable tension and stress brewing within the youngster. Yet, Arpita knew she could not be complacent with her studies because her exams were just round the corner. She emphasised on her greatest need-"concentration". She did not want to be distracted by anything, and at any cost.

Arpita's biggest support was "Chetna" (Resiliency programme), and as a participant of the programme, she learned to cope with stress and handle peculiar situations.

Arpita started applying the lessons she was learning from the programme in her own life, and the situation gradually started changing for her. Chetna

programme helped her understand the importance of unity, equipped her with tips to manage anger, and handle situations rationally.

The lessons on positivity Arpita received from the programme, helped her make amends with her sister and mother, strengthening their bond more than ever. She started indulging in hobbies at home. Singing is her favorite activity and she made arts & crafts with her sister. She learned how to cook from her mother and often rustles tasty dishes for the family.

Earlier, Arpita's her mother could not spend much time with the children due to her work schedule. But now with the time spent at home, she could have meaningful conversations with her children that helped all of them to understand each other better.

Arpita enjoyed her "prolonged" holidays with her family.



Small steps to big achievement



"I am Sutapa. I live with her parents and a sibling. My father is a daily wage labourer and mother is a homemaker. Our family income was Rs. 6,000 per month.

I completed Bachelor of Arts degree in graduation and joined the Career Readiness programme. A reputed institute conducted the training sessions, and every day I travelled around 10 km to reach the training centre. Regular interactions and inputs by the trainers and the Employed team, boosted my confidence to land a job. During the training, I learnt about workplace culture, job search techniques, and interview skills. Subsequently, my communication skills improved manifold.

After successfully completing the training course, I appeared for job interviews in various organisations like Fusion BPO and iMerit Technology Services. I joined iMerit Technology with a salary of Rs. 10,000, along with other statutory benefits. I am looking forward to growth in my career and my family is happy with my progress.

I thank the Employed team at SAHAY for the opportunity they provided in helping me in establishing my career. I could start my career in an IT company. It has been extremely useful for my current job, which has helped me to stand on my own feet and support my family

This training equipped me with improved communication skills, increased my confidence level, and provided me with all the inputs to better my work productivity. I feel blessed to be a part of my company, where I feel like that I am growing every day I am glad that I can help my family now.

formerly sponsored youth of Hooghly Cluster

~ Sutapa



New Beginings: Sponsorship Enrolment

The enrollment for sponsorship was overwhelming with 3,188 new entrants added to the list of beneficiaries. The families were shortlisted by the Field Officers of each Community Centre after their volunteers identified the most vulnerable and deprived families within the communities.

There is a strong conviction within the communities that sponsorship is the most reliable support that families can count on, even beyond material and service benefits.

The opportunity for their children to participate in various programmes, exposure to continuous learning, and imbibing life-skill lessons sets precedence for attitudinal transformation within youngsters. Their transition as goal-oriented and self-motivated individuals adds to their overall competency level.

Also, each Community Centre offers ample spaces within a safe environment along with a host of facilities, completely contrasts the living conditions within communities. Many children are eager to help the staff with their work at the Centres, so that they can stay back for a longer time.

This serves as a two-fold advantage. By assisting the

staff with documentation and bill process, the youth are spending their time in meaningful engagement. Secondly, when they see the process first-hand, they realise the effort and time each staff devotes to reach the families with support, builds a closer bond of trust within the youngsters for the organisation. They become ambassadors of the sponsorship programme.

Last year's closure hindered usual correspondence between the beneficiaries with their donors. During the height of the lockdown, several concerned donors inquired about the current financial status of families of their sponsored children. Many sponsors sent added financial support for the families as Special Needs Donation.

With all activities at the Community Centre suspended, writing letters to sponsors was replaced with Voice message clips and photos via WhatsApp as the preferred mode of correspondence. Most youngsters are mobile-savvy and convenience of digital communications resonated more, reflecting 75% higher engagement in their responses for Special Needs Donation.





Emergency Response: Amphan Aftermath

The COVID-induced lockdown and cyclone Amphan were like a double-whammy, adding miseries to an already dire situation.

The cyclone affected many families in rural and sub-urban areas, ravaging their properties and livelihoods. As it is, with the lockdown, their income had already reduced to a trickle. Most farmers did not have the money to buy pesticides for farming, as all trade activities and transport remained suspended due to the lockdown.

The mangled roofs overhead and collapsed walls were testimony to the severity of the storm. Roofs of most of the houses had been hauled away by the strong wind gusts and walls had crumbled, rooms in some houses were completely in rubbles, such that, the families did not have adequate protection to shelter themselves from rains or harsh sunlight. They were literally left with no option and nowhere to go.

An incessant downpour continued after the storm, destroying their inventory of crops for both, selling and self-

consumption purposes. Their fertile farmlands eroded with saltwater from the adjoining river rendered unsuitable for farming.

Teams from SAHAY coordinated at various levels to prepare a roadmap to rehabilitate families in distress. The teams travelled to remote locations, negotiating cratered roads and piles of uprooted trees, to assess the extent of damage suffered by the families. Post-assessment, the teams budgeted the expenses for repairs of houses and means of support to each affected household as Emergency Relief.

The lockdown and impact of the cyclone posed challenges to any emergency relief work. The supply of construction materials and the availability of labourers were the biggest impediments. Even after sourcing materials and labours, heavy rains and the monsoon were deterrents to construction work.

Despite such obstacles, all repair work and construction were completed. Over 270 families received emergency assistance, amounting to over Rs. 24 lacs.

Timely intervention prevented these families bear adverse repercussions for their own loss.



Leadership Development

SAHAY continues to invest in its workforce with the focus on developing leadership skills while creating a high-performing work culture, reflective of the organisational values.

Each task we accomplish is due to the hard work, passion, and commitment of our team members. With the aim to “build a high-performance, values-based culture where every employee and volunteer feel valued, and part of a winning team, doing meaningful work in an environment of trust,” as a continuous endeavour.

Aligning with organisational values, we are already in the process of designing and strengthening people-centric practices.

Emphasising on selection, learning & development, leadership development, succession management, and performance & potential management, are meant to enhance team effectiveness and engagement.

The aim of this initiative is to encourage managers and leaders across all levels within the organisation develop the right minds et, tools, and skill-set, so that in turn, they can create the right conditions for their teams to succeed to fulfill organisational goals.

In context to the current scenario, it was important for the team leaders to continuously re-adjust to varied situations, as well as influence each team member to be more effective and efficient in their domain of work.

Agency staff were provided access to participate in the Franklin Covey Leadership Training, build skills and life-changing habits with world-class learning solutions for individual effectiveness and leadership.

THE **5** CHOICES TO EXTRAORDINARY PRODUCTIVITY

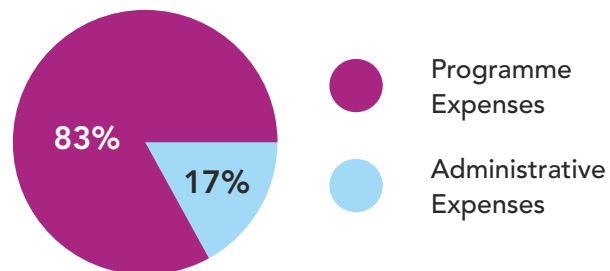
The 5 Choices to Extraordinary Productivity is not about getting everything done. It is about **getting the right things** done without burning out. **Time management** alone isn't enough. This course covers **decision management, attention management, and energy management**, which will ensure you achieve your business and personal goals.



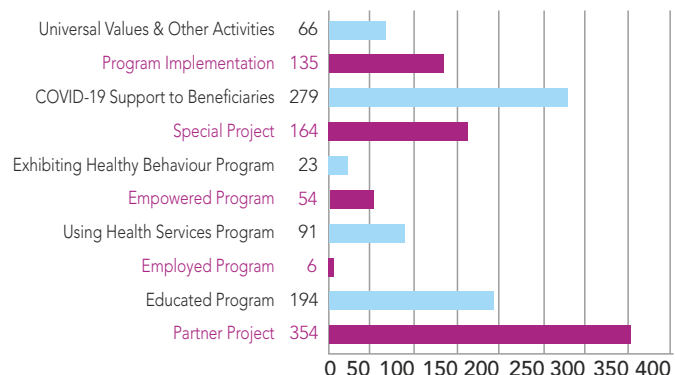
The 7 Habits of Highly Effective People Signature Edition 4.0 aligns timeless principles of effectiveness with modern technology and practices. The path to sustained and lasting success is possible when individuals can effectively lead themselves, influence, engage and collaborate with others, and continually improve and renew their capabilities.

Financial Statement Synopsis

Fund Utilisation for SAHAY



Programme Expenditure [INR in Lakhs]



Balance Sheet

as at 31st March, 2021

	31st March 2021	31st March 2020
Assets		
Net Current Assets	37,30,182	1,05,51,322
Fixed Assets	1,23,14,566	1,32,21,530
Capital Work-in-Progress	2,82,56,567	2,56,49,350
TOTAL	4,43,01,315	4,94,22,202
Liabilities		
Capital Fund	4,42,25,511	4,83,63,619
Earnest Money	75,804	10,58,583
TOTAL	4,43,01,315	4,94,22,202

SAHAY opened account at State Bank of India, New Delhi (Main Branch) in compliance with the FCRA Amendment Act, 2020.

Income & Expenditure Account

for the year ended 31st March, 2021

	31st March 2021	31st March 2020
Income		
Contribution Received	16,15,11,853	18,57,50,910
Other Income	29,12,191	27,40,159
TOTAL	16,44,24,044	18,84,91,069
Expenditure		
Total Expenditure [Note - 1]	16,85,62,147	16,82,09,680
Excess / [Deficit] of Income over Expense	[41,38,103]	2,02,81,389
TOTAL	16,44,24,044	18,84,91,069

Children International, U.S.A. is the primary donor for SAHAY.

To access our full audited financial report visit our website www.sahaywb.in

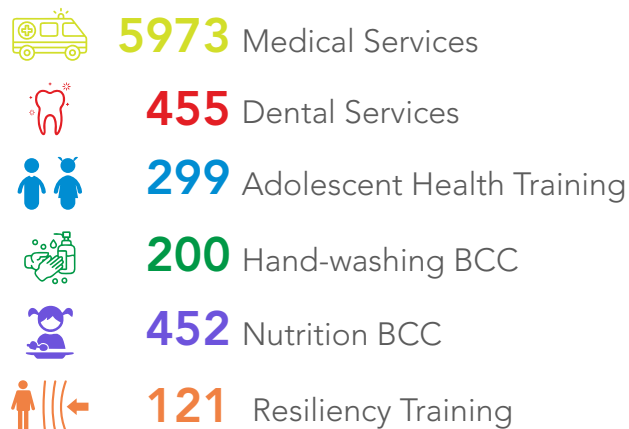
Note - 1

Total Expenditure	31st March 2021	31st March 2020
Partner Project (Refer Note No. 14)	3,56,58,236	4,63,68,707
Educated Program	1,94,67,051	1,84,86,630
Employed Program	6,32,394	13,33,239
Using Health Services Program	91,40,576	1,38,22,506
Empowered Program	54,77,285	1,32,15,306
Exhibiting Healthy Behaviour Prog.	23,74,674	49,17,237
Special Project	1,64,17,930	44,43,741
Training and Development	--	32,84,872
Connecting with Families	1,206	--
Covid-19 Support to Beneficiaries	2,79,26,228	--
Program Implementation	1,35,35,261	1,07,47,918
Universal Values & Other activities Program	66,39,136	1,62,58,416
Administrative	2,89,01,434	3,26,60,343
Depreciation	23,90,736	26,70,765
TOTAL	16,85,62,147	16,82,09,680

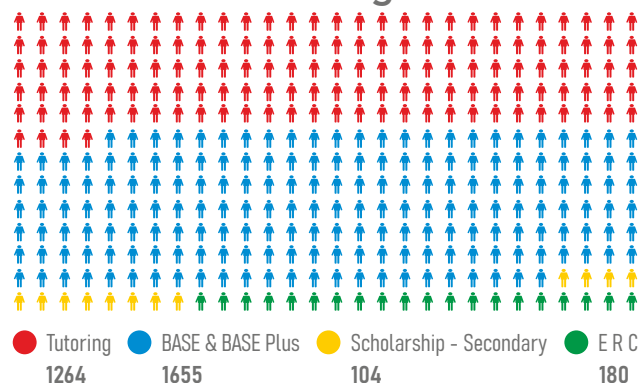
Milestones at a glance

The unforeseen circumstances arising due to the COVID outbreak prompted us to focus more on programme participation and completion than outcome. Also, partnerships in certain rural projects were discontinued because of the recent amendments in the FCRA regulations. This resulted in deviation in the target and achieved outreach. Despite such challenges, we successfully transitioned all our programmes to virtual delivery mode.

Health Services



Access to Education & Continued Learning

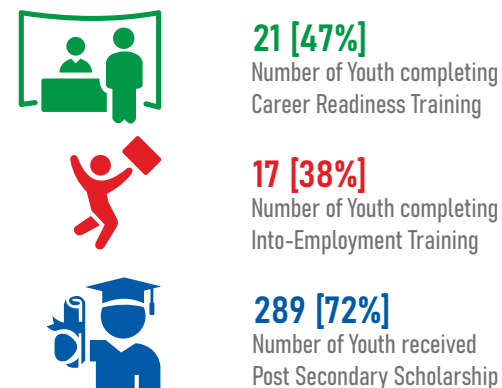


Empowerment Programmes

[Life Skill & Social Responsibility]



[Job Readiness Skills]



Programme Coverage

4435 cases received
Telehealth Services



11,500 families were provided
Emergency Grocery Assistance



1,735 completed Life Skill, Social
Responsibility and Resiliency Training



413 families received added
assistance with increased allocation
of items, from ₹400 to ₹1500 per child



393

children and youth awarded scholarship
for Secondary and Post Secondary

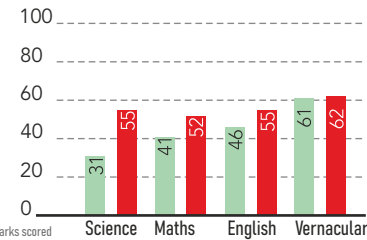


94% average attendance from participants
of **Group Tutoring Programme**, with
classes held for five days a week

Change in average score
from Baseline to Endline

● Baseline
● Endline

* the above figures are average marks scored



Content **88%** Discussion **89%** Learning **92%**

NPS Score from Participants Feedback
from Group Tutoring programme

Board Members



Mr. Gautam Ghosh
President



Mr. S. V. Raman
Secretary



Mr. Sandipto Bose
Treasurer



Dr. Bula Bhadra
Member



Ms. Ipsita Sapra
Member



Dr. Madhumita Roychoudhury
Member



Ms. Seema Paul
Member



Ms. Swati Chaudhuri
Member

SAHAY Leadership Team

Ms. Kirtimayi Mishra, Agency Director

Ms. Rinku Gupta, Accounting Manager

Mr. Bijoy Pati, Information Technology Manager

Mr. Archit Bose, Operations Manager

Mr. Sambhu Kujur, Programme Manager

Ms. Shikta Banerjee, Sponsorship Programme Manager

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~ Nurse
~ Doctor
~ Delivery Boy
~ Traffic Signal
~ Traffic Light
~ Junk Bins
~ Junk Busters
~ The Government Officer
THANK YOU!



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🌐 www.sahaywb.in