



POWER WITHIN

CARE INDIA
ANNUAL REPORT
2021-2022

careindia.org

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About us

We are a not-for-profit organisation that builds capacity of communities to ensure empowerment for marginalised women and girls. Our sustainable and holistic interventions in Health, Livelihood, Education and Disaster Relief and Resilience, provide innovative solutions to deep-rooted development problems.

Along with access to the international confederation of expertise, we integrate internal knowledge and strong network of partnerships to deliver outcomes at scale to varied stakeholders.

CARE India is a part of the CARE International Confederation, which is helping millions of people in living a life of dignity. We have a presence in over 100 countries.

We have been contributing to India's explosive growth for over 70 years, starting from the time when it was a newly formed nation, till today when it is among the world's fastest developing economies.

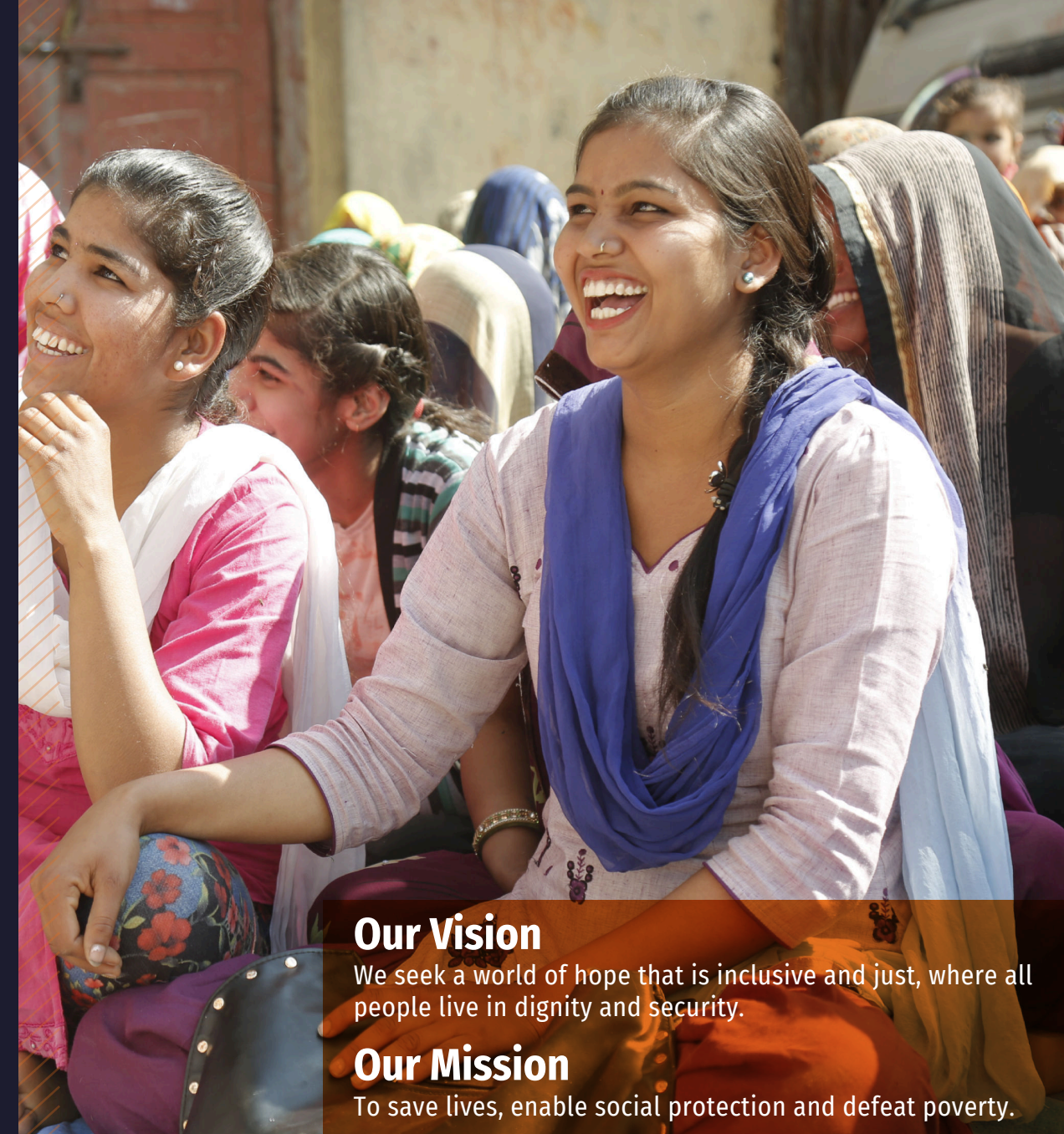
In 2021-22, we impacted the lives of more than 84.3 million people, through 93 projects, carried across 21 states.

Our Vision

We seek a world of hope that is inclusive and just, where all people live in dignity and security.

Our Mission

To save lives, enable social protection and defeat poverty.





Your Power Comes from Within

POWER WITHIN

As the second wave of the COVID-19 pandemic hit us, we faced new challenges. As we bore challenges, we learnt lessons and become stronger. We found the strength within us to look at our resolve and commitment to goals.

With our timely interventions, however, we could touch the lives of millions of people in 21 states of India.

We learnt how women were deeply impacted by the pandemic, giving us more ground to work for economic growth and gender equality rights.

Our outreach workers worked hand in hand with government departments for COVID vaccination and the delivery of critical medical equipment such as oxygen concentrators, saving lives in the process. We played an important role in fighting hesitancy and stigma in vaccination.

As we reached out to different corners of the country in the areas of health, education, and disaster management, we are emerging as a key player in helping to achieve the Sustainable Development Goals 2, 3 and 6.

With every passing day, we realise that we have the power within us to overcome adverse situations and emerge victorious.



Manoj Gopalakrishna

Chief Executive Officer

It gives me immense pleasure to present the latest edition of CARE India's Annual Report for the Financial Year 2021-22.

The past two years have been challenging for all and has

devastated populations, particularly those from marginalised communities. At CARE India, it was a period of rapidly scaling up our response on health, livelihood, education and humanitarian assistance focused on the needs of the women and girls from the marginalised communities we work with.

With the challenge faced with COVID in Wave 2 we made rapid strides in ensuring timely COVID response, disaster relief and programmatic work supporting communities recover from setbacks related to healthcare, livelihoods, recovering learning loss among children and building safe and supportive local ecosystems to build resilient communities. Our health response work scaled up to fifteen states of India addressing diverse needs of the states for timely response to COVID pandemic. We have collaborated with the state governments in delivering vaccines to marginalised communities.

For us, this past year has seen several collaborations and partnerships which have contributed significantly to improving our reach and programmatic impact among women and girls, especially from the most marginalised communities in the poorest and remotest regions, and brought about meaningful and sustainable change in their lives and livelihoods.

During the year, CARE India directly reached out to more than 84.3 million people in 21 states across 93 projects through interventions in health, education, livelihoods, and disaster preparedness and response.

This was only possible by building cross-sectoral partnerships with various governments and non-government organisations, and our generous donors, who together steadfastly supported us in planning, implementing, monitoring, knowledge generation and delivering large scale impact on the ground.

We are grateful to all our partners for their support in driving the execution of various programmes in this unprecedented environment. We are also deeply indebted to our members of CARE confederation, corporate partners and foundations for the immediate funding to deliver the much-needed assistance to communities and healthcare workers. In addition, the support various state governments, district and municipal administrations provided to us was of immense help in delivering aid where needed.

Looking back, we have emerged stronger and more resilient to take on the setbacks caused by the pandemic. With the support of our donors and collaborators, we are determined to build systems towards delivering impact at scale.



Mathew Cherian

Board chair

As we step into a new "post-COVID" world, brimming with hope and armed with the determination to mitigate and emerge stronger from the impact of the pandemic, CARE India has evolved as a preferred partner with communities, local,

state and central governments, corporates and other diverse stakeholders, by delivering planned outcomes at the programmatic level and by creating an adaptable knowledge pool of utility in diverse situations.

As a development and humanitarian organisation, CARE's programmes are designed to work with the communities to catalyse demand for services and enhance their leadership skills, promote local capacities and create a supportive environment, strengthen systems to deliver quality and equitable services and be with the people providing relief and rehabilitation in the time of disasters. It gives me immense pleasure and a sense of pride to share that we have remained at the forefront of all endeavours to combat the impact of the pandemic through our programmatic approach as well as our partnerships with diverse stakeholders over the last year.

This has resulted in making a difference in lives and livelihoods of more than 84.3 million people in the financial year 2021-22 which keeping is us on course towards achieving the ambitious Vision 2030 goal to impact 100 million people from the poor and marginalised communities to overcome poverty and live in dignity and security.

We have continued to strengthen the planning and implementation efforts in various government programmes and have also expanded our partnerships with individuals, communities, corporates and other stakeholders to bring in new synergies.

We could not have achieved this without the unwavering support of our existing partners and the deep faith placed in us by new partners who have joined us in this journey. I would like to thank our individual, corporate and institutional partners for their trust in us.

And finally, I would like to thank all members of the CARE family, donors, peer organisations, and other stakeholders who continue to support and believe in our work.

AP ANDHRA PRADESH

- COVID-19 Response: Behavior Change Communication and PPE Distribution
- Strengthening PHCs and AINCs in Nellore, Srikakulam and Vizianagram districts of Andhra Pradesh/Udayam
- India COVID-19 Response Pooled Funds
- India COVID-19 Response Jack Dorsey
- India COVID-19 Response Margaret A. Cargill Philanthropies

AS ASSAM

- COVID-19 Vaccination Initiative BIHAR

B BIHAR

- Khushaal Madhepura Ph 3
- COVID 19 Response: Medical Isolation Centre in Bihar
- India COVID-19 Response/ICR-B
- India COVID-19 Response/ICR-C
- India COVID-19 Response Pooled Funds
- India COVID-19 Response
- COVID Care Hospital in Patna city
- India COVID-19 Response Jack Dorsey
- India COVID-19 Response
- India COVID-19 Response Doctors For You
- Child Health in Bihar—TCH
- TMS
- Bihar VL—Phase-3
- Strengthening GOB_FP
- GBV
- Nutrition Technical—MIYCN
- MNCH Phase 2
- FP MLE Rapid Assessments for TSU
- Responsive Technical Support—AES
- Technical Assistance by POSHAN
- FLW Performance Management
- CARE USA TSU Bridge Funding
- CUSA Pooled Fund TMS Match
- Supporting ICDS-CAS Training

CH CHHATTISGARH

- More Secure and Resilient Livelihoods/MSRL
- India COVID-19 Response Jack Dorsey

DL DELHI NCR

- Response to support hospitals to fight COVID-19 in India
- Oxygen Project France solidarity mission
- India COVID-19 Response/ICR-B
- Support Hospitals and Health Workers to Fight COVID-19 in Delhi/IRSH

GJ GUJARAT

- IADVC Phase 2
- More secure and resilient livelihood for small holders and forest small holders
- Vrudhhi-TPON
- Enabling Switching to Clean Alternatives/ESCA
- Empowering Smallholder Farmers through strengthening agri & allied clusters in Chhota Udepur, Gujarat/SAAC

HR HARYANA

- Safe and Secure Learning Environment for Marginalized Adolescent Girls/Parwaaz
- Research on GEP
- Creating Opportunity for Reading in Difficult Situation/CORDS

JH JHARKHAND

- Bihar VL Phase-3

K KARNATAKA

- Empowering waste pickers in Bengaluru to pursue a sustainable and gainful alternative livelihood
- India COVID-19 Response/ICR-C
- Providing humanitarian aid to Government or State
- India COVID-19 Response Hospital/Community

KL KERALA

- Response to support hospitals to fight COVID-19 in India

MH MAHARASHTRA

- Women + Water Alliance
- Empowering Marginalised Adolescent Girls to Become Changemakers/Power Within
- India COVID-19 Response Jack Dorsey
- India COVID-19 Response
- Response to support hospitals to fight COVID-19 in India

MP MADHYA PRADESH

- Women + Water Alliance
- Building Climate Smart Integrated Agriculture for Smallholder Farmers in Damoh, Madhya Pradesh/CSIA
- India COVID-19 Response Pooled Funds
- India COVID-19 Response Jack Dorsey
- India COVID-19 Response

OD ODISHA

- TARINA
- Strengthening RMNCHA Outcomes through Services and Community Access/IMCH
- Shakti

P PUNJAB

- Empowering Smallholder Farmers through promotion of sustainable agriculture and water harvesting & conservation methods in Bathinda, Punjab/SAW

RJ RAJASTHAN

- Khushi B & C
- India Covid-19 Response Jack Dorsey
- India COVID-19 Response Margaret A. Cargill Philanthropies

TS TELENGANA

- COVID-19 Response: Behavior Change Communication and PPE Distribution
- Strengthening RMNCHA Outcomes through Services and Community Access/IMCH
- Informal Workers Study/IWS
- India COVID-19 Response Pooled Funds
- India COVID-19 Response Jack Dorsey

TN TAMIL NADU

- Enhancing community well-being in Tamil Nadu
- Kanya Sampurna
- Promotion of Women's Economic Empowerment through Entrepreneurship/PINEE
- Informal Workers Study/IWS
- India COVID-19 Response Jack Dorsey
- India COVID-19 Response Margaret A. Cargill Philanthropies
- COVID Health Centre (DCHC)

UP UTTAR PRADESH

- Shubh Mint Project/SMP
- India COVID-19 Response
- PACE module Training/PACE-UP
- India COVID-19 Response Pooled Funds
- To strengthen healthcare facilities of the existing government facility to act as COVID-centre and Improve the Quality of care of the COVID affected patients
- India COVID-19 Response Jack Dorsey
- Response to support hospitals to fight COVID-19 in India

WB WEST BENGAL

- Towards identifying Strategic Research and Development Priorities for Living with Arsenic in the Environment



Achievements

2021–2022



84.3 Million Direct Reach

**Projects
93**

**States
21**

**Districts
290+**

**Blocks
3000+**

**Villages
1,40,000+**



End Poverty

Out of **1,24,684** participants, **89,406** women were directly benefitted.



Adequate Food and Nutrition

47,271,556 benefitted with adequate food and nutrition, **90%** women and girls were benefitted.



Quality Healthcare

Out of **84,353,989** participants, **61%** women and girls were helped with quality health-care and support during COVID.



Inclusive Education

Out of **177,473** participants, **66%** women and girls were helped with quality and inclusive education.



Gender Equality

Out of **3,82,754** were educated with gender equality rights, **74%** women and girls were benefitted.



Clean Water and Sanitation

2,14,719 people were provided with clean water and sanitation of which **73%** were girls and women.



Clean Energy

Out of **13,206** people who were benefitted with clean energy, **73%** were women.



Economic Growth

1,48,954 people were provided with decent work for enhancement of their economic growth, **72%** were girls and women.



Reduce Inequality

Reduction of inequality was recorded directly in **10,152** people, of which **66%** were women and girls.



Humanitarian Aids

45,92,524 people were benefitted with humanitarian aids, of which **48%** were women and girls.



Climate Resilience

16,549 people were provided with climate resilience of which **76%** were women and girls.



COVID Response

45,92,524 people benefitted from humanitarian aid, of which **48%** were women and girls.

COVID-19 Response



CARE India responded pan India in a strategic manner to the second COVID surge in India. In partnership with state governments and local administrations with funding from generous donors, CARE India executed and adapted its COVID-19 response, which evolved in alignment with the government directives.

COVID facilities, equipping intensive-care centres, oxygen and medical supplies, maintenance of bio-medical equipment, community resilience, capacitating human resources for critical emergency care, the COVID-19 response was comprehensive across more than 20 states in India and pivoted around vaccinations, system strengthening and community resilience.

Reaching the Unreachable

The COVID vaccine delivery in India was guided by the government. CARE India worked to provide logistical support for administering the vaccines. Under investment in rollout and staff delivering vaccines; people's reluctance to get vaccinated and getting enough vaccines to the right place were big challenges that the CARE teams across the country worked closely with various administrations to overcome.

Innovative delivery and demand side methods—24/7 Camps, Teeka express vans with vaccinators and data entry operators; Teeka naav (Vaccination Boats); Cheeta express bikes, Pink booths, Drive through camps, Booth for youth (15–18 years), deep community relationships to address hesitancy were the key to drive impact at scale.

Last Mile Delivery



CARE India worked in difficult times to reach communities, with state and local governments across India towards control and containment of COVID-19.



VACCINATIONS

- Access and Delivery
- Addressing Hesitancy & Stigma
- Reaching the Unreached



SYSTEM STRENGTHENING

- Critical Medical Equipment
- Biomedical Equipment Maintenance
- HR Augmentation and Support



COMMUNITY RESILIENCE

- Isolation Kits/ Wellness and Health services
- Support to COVID Orphans and Widows

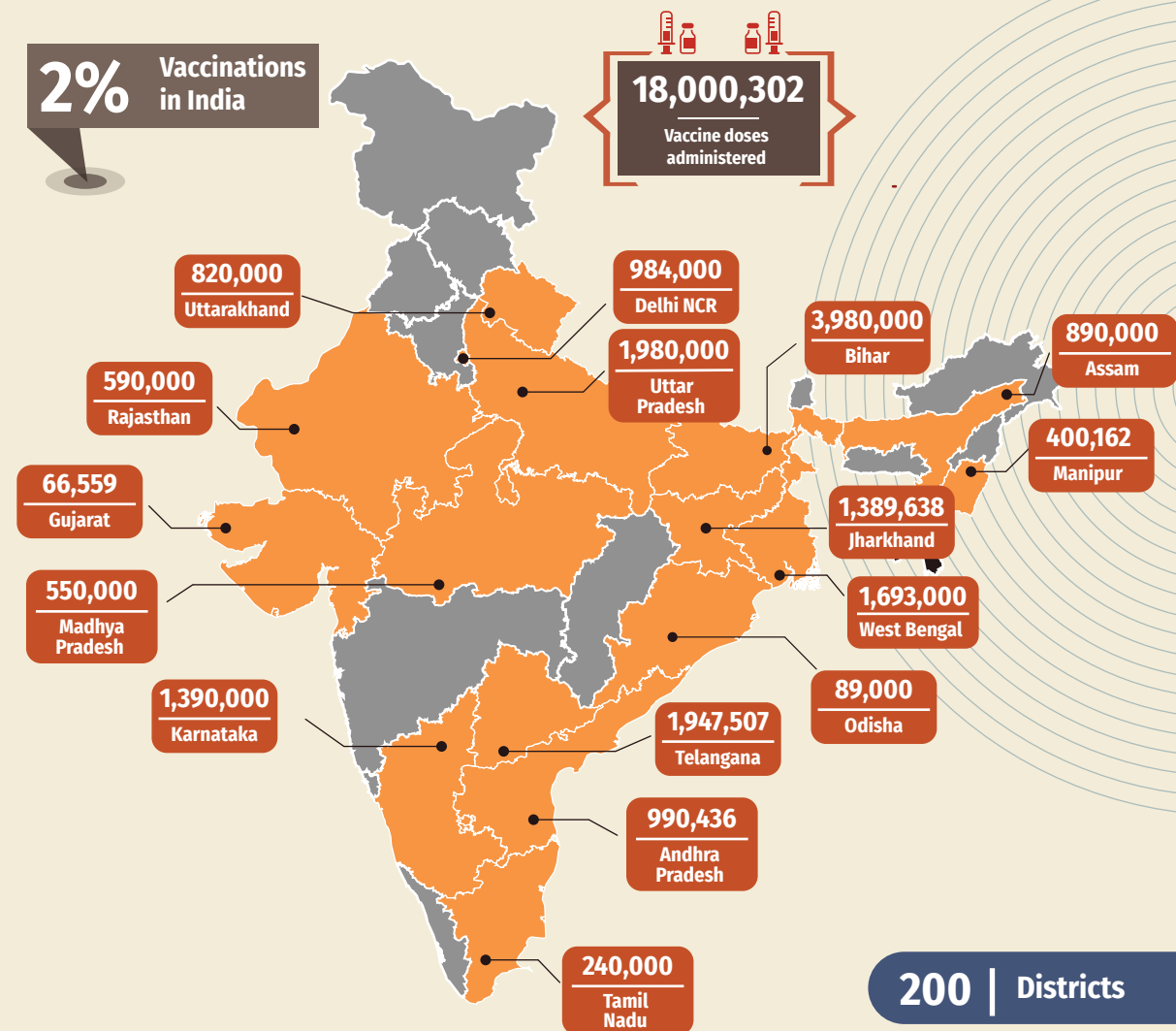
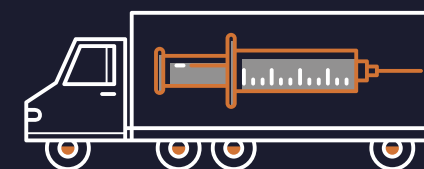
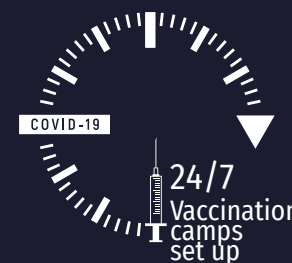
VACCINATION

CARE volunteers coordinated with frontline workers to mobilise and vaccinate

Access and Delivery

1324

CARE-run mobile vaccination vehicles



200 | Districts

ADDRESSING HESITANCY and STIGMA

Community specific
approaches

PINK BOOTH

Vaccination camps
exclusively for women

INNOVATIVE SOLUTIONS

Nukkad Natak and
local songs

REACHING THE UNREACHED

Last-mile delivery aiming
at vaccination for all

HAR GHAR DASTAK

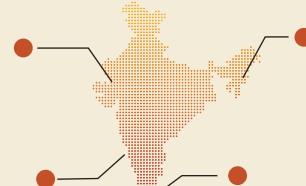
TIKA EXPRESS

TIKA NAV

Reached over
100 million+



Across
17 states



35

Mega Vax
Camps/COVID
Vaccination
Centers



DCHCs With
2100 beds

COVID-19
patients
18,000



Health



The year proved to be vital for the health and nutrition interventions, wherein the associated teams not only delivered extensive and expansive pandemic relief support but also continued their resolve to build healthier and happier communities.

Through various ongoing projects that strengthen the healthcare and associated services we improve water and sanitation practices, refine systems to ensure adequate food and nutrition, at individual and system levels.

Our long-term projects align with CARE's 2024 goal and the Sustainable Development Goals 2, 3 and 6 to achieve improved health outcomes through programmes spanning across



Reproductive, Maternal, Neonatal, Child and Adolescent (RMNCH+A) services

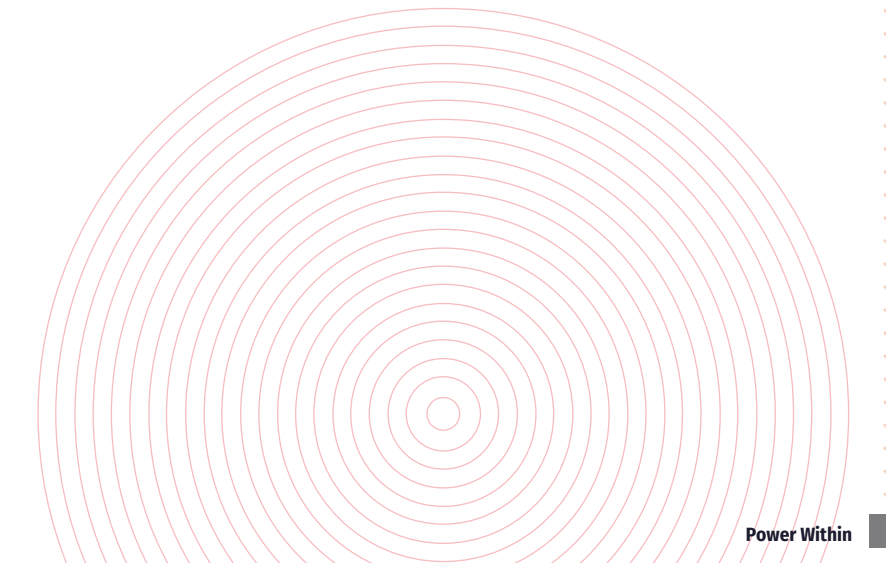


Disease Control



Strengthening domains of health systems leveraging ICT tools, gender transformative approaches Despite challenges posed by the COVID-19 pandemic

Innovations and evidence-based approaches continued to remain our priority.



Key Programmes and Achievements



Techno Managerial Support to the Government of Bihar with Bill & Melinda Gates Foundation

In Bihar, our focus has remained on strengthening health systems and influencing the microsystems at the public health facility and outreach levels. Dedicated verticals and technical teams were engaged in advocating and facilitating reformative and renovative transformation in existing systems.

We have emphasised on supporting the state in tackling the pandemic and limiting the disruptions made by COVID - 19. We have worked at the state, district, and block level to ensure regular maternal, child and other family services and have remained involved in innovations and interventions around state-wide clinical mentoring of nurses, quality improvement of public hospitals and robust outreach mechanisms including capacity building of frontline workers and improvements in supply chain and procurement processes.

Key Achievements



Improved RMNCH+A across 38 districts and 534 blocks of the state.



Enabling the setting up of new COVID care facilities and training the government staff of secondary and tertiary level hospitals on emergency case management as per evolving guidelines and SOPs.



Reaching more than 16 crore citizens every year along with the neglected disease elimination projects.



Elimination of non- tropical diseases

Kala Azar

Kala-azar (Visceral leishmaniasis) is a neglected tropical disease that is almost always fatal if left untreated. It spreads through the bite of a sandfly and disproportionately affects the poorest and most vulnerable communities. With support from the Bill & Melinda Gates Foundation, our area of work includes providing support to the national kala-azar elimination programme.

Our teams support the government in active case detection, treatment, development of the indoor residual spray and development and maintenance of the management information system. We are also involved in the establishment and running of six Entomological Surveillance Sites in Bihar and one each in West Bengal and Jharkhand.

Key Achievements



Increase in active case detection. Currently, it is 55% in Bihar and 84% in Jharkhand.



The follow-up rate is 90%.



- From the vast pool of data collected by the programme team, three papers have been published in journals of international repute:
- Development and Evaluation of Active Case Detection Methods to Support Visceral Leishmaniasis Elimination in India
 - Optimising Village-Level Targeting of Active Case Detection to Support Visceral Leishmaniasis Elimination in India
 - Towards a Sustainable Vector-Control Strategy in the Post Kala-Azar Elimination Era.



Lymphatic Filariasis

Lymphatic Filariasis (LF) is a vector-bourne disease that causes painful and disabling complications when one suffers from it. We recently forayed into the elimination efforts by supporting the government of Bihar and Jharkhand in Night Blood Surveys, Mass Drug Administration (MDA) exercises at population scale, and line listing of patients.

Key Achievements



Supported the MDA-IDA round in Sheohar, Aurangabad, Sheikhpura districts in Bihar. In Jharkhand, MDA rounds in Bokaro, Dhanbad, Ramgarh, Deoghar, Gumla and Sahebganj were conducted.



Both the states have started executing Morbidity management and disability prevention and hydrocelectomy camps in most of the districts.



Jharkhand is the first State to adopt block-wise MDA across 15 districts.



Few districts like Muzaffarpur have initiated search of LF patients through Jeevika (Bihar Rural Livelihoods Promotion Society) workers in every village, monitored by the district administration directly. This pilot is now being showcased at the state level to be replicated in other districts.



Strengthening Health, Nutrition, Sanitation and Hygiene for improved healthcare services

With the support of TATA Projects, a multi-thematic programme is getting implemented in Telangana and Odisha. The intervention aims to improve access to quality health services for poor and marginalised communities. The project focuses on monitoring the processes and outcomes that lead to improvement in delivery of health services as well as improved RMNCHA health outcomes for pregnant and lactating women, new-born babies, infants, and adolescent girls.

Key Achievements



18,447 community based events were organised.



Supported **2,679** pregnant and lactating women who reached out for receiving MNCH services and **735** newborns and infants (under 2 years) and their caregivers in receiving newborns care interventions.



657 training sessions for frontline workers on Health and Nutrition, **643** sessions on WASH for community leaders, and **466** trainings on WASH for Anganwadi workers and school teachers.



The programme reached out to **1,435** adolescent girls to receive their entitled services.



A total of 11 Primary Health Centres and 30 Anganwadi Centres underwent improvement/refurbishment developments through this intervention.

Strengthening Primary Health Centres and Anganwadi Centres

In association with Aurobindo Foundation a project got initiated in eight selected Mandals of Andhra Pradesh to improve the health and nutritional status of the communities by providing accessibility to quality, comprehensive health and nutrition care at public health facilities and community level. The approach was aimed at enhancing the effectiveness of public health programmes on the ground by supporting the system's efforts in adapting the interventions suited to the need of the communities involved.



3000 Self-Help Group (SHG) Cluster Coordinators, Ward Volunteers and **1,287** Frontline workers (ANM/ASHA/AWW) on Health and Nutrition themes.



Vruddhi: Poshit Gujarat, Viksit Gujarat (Action Against Hunger India and The Power of Nutrition)

An initiative to support the Health & Family Welfare Department and Women & Child Development Department of the Government of Gujarat to achieve accelerated progress towards nutrition outcomes identified under POSHAN Abhiyan. The project is currently being implemented in Bhavnagar and Sabarkantha and is aimed at improving essential health and nutrition practises in the community by building knowledge, skills and creating an enabling environment to support the health and ICDS systems to deliver improved nutrition services. It focusses on timely initiation of breastfeeding, ensuring exclusive breastfeeding, complimentary feeding and IFA supplementation through maternal counselling.

Key Achievements



Assessment of more than 3,500 Angwanwadi Centres to estimate their capacity in availability, functionality and calibration of anthropometric equipment.



Review of data on growth monitoring of children under five years registered in Angawadi centres to understand the seasonal trends and estimate the prevalence of undernourished children as reported.



Induction trainings for Block MLE Coordinators on technical areas and MEAL protocols have been successfully conducted. undernourished children as reported.

Sajha (Integrated Secondary Prevention Approaches for Intimate Partner Violence)

Sajha meaning ‘sharing.’ The project is a pilot initiative, implemented in four blocks of district Vaishali, Bihar with an aim to strengthen the health sector’s response to survivors of gender-based violence, primarily from intimate partners. It focuses on building the capacities of healthcare providers and equipping them to identify and support women and girls who access the health facility to seek care and treatment for violence.

Key Achievements



Close to **300** survivors of domestic violence and **39** survivors of sexual violence were assisted by healthcare providers.



25 orientation programmes for new doctors, nurses and ANMs were conducted.



950 ASHAs were trained.



400 medical doctors who attend to survivors of sexual violence in **20** districts were trained as per health ministry guidelines.



Effectively reinforced the referral network within the district and enabled staff and personnel in other sectors and organisations to be part of the intra district referral network for survivors.



Powering through the COVID-19 pandemic

CARE India has extensively worked towards controlling the spread of COVID-19 and supplemented multiple state governments in their fight against the disease by deploying personnel with expertise, mobilising and streamlining requisite resources such as medicine, consumables, life-saving critical equipment and lab testing services.

In the year, CARE India's COVID response has been geared towards:



Scaling COVID-19 Vaccinations by addressing vaccine hesitancy and mobilising communities with the help of frontline workers and focusing on complete vaccination. Scaling COVID-19 Vaccinations by addressing vaccine hesitancy and mobilising communities with the help of frontline workers and focusing on complete vaccination uptake through innovative mechanisms, curated approaches to vaccinate newer age groups, children and the youth. We also supported data decisions for improved vaccine supply chains and piloting models for subsequent nationwide scale-up.



Strengthening the country's public health systems by strengthening public hospitals, setting up new makeshift facilities, imbibing WASH elements in public health facilities and upskilling their emergency and critical care wards. We also supported medical staff with protective gear and state-wide biomedical engineering interventions to improve the tracking, monitoring and maintenance of critical care equipment and supplies.



Community-centric approaches towards pandemic handling, resilience building and restoration of livelihoods involving caring for the COVID orphans, semi-orphans, and widows, rebuilding livelihoods of those affected by COVID-19 and providing physiological and psychological care for affected individuals and families.





Battling a raging pandemic to ensure accessibility and inclusion

CARE's frontline workers led the Mobile Vaccination initiative which addressed the problem of inaccessibility by bridging the gap in service delivery. Being a country with diverse geographical terrain and about 60% of the population residing in rural geography, achieving comprehensive vaccination coverage required innovative and agile vaccination strategies. The frontline workers through dynamic delivery points ensured dignified vaccination to vulnerable, hard-to-reach and left out pockets of the population.

At a time of unrest and crisis, the healthcare workers kept service before themselves and went to extraordinary lengths by traversing through vans, bikes, boats or even on foot with the deep rooted purpose to inoculate and safeguard the people from the deadly virus. Despite steep slopes, rushing rivers, unmotorable roads, dense forests and treacherous rains, these COVID warriors combatted all odds unceasingly to reach the last mile. From having trekked hour-long journeys, walking on muddy and rugged roads, crossing streams to battling network connectivity, they have conquered it all!

The sheer dedication and determination of the healthcare workers have helped vaccines reach the otherwise inaccessible and unvaccinated pockets. Along with vaccine delivery, they further engaged in accelerating vaccine acceptance and demand creation through community engagement and counselling. This compounded effort of ensuring the supply of vaccines and creating demand at the last mile required sheer devotion and sacrifice.

The frontline workers at CARE's COVID Vaccination Centres across the country immunised the urban and peri-urban population. While putting their own lives at risk, they targeted widespread coverage to attain herd immunity, without undermining the quality of the services being offered. The dark pandemic hour has given rise to warriors such as Patna Team Leader Monsoon Mohanty and vaccinators Anjali, Pushpa Topno and Kanchan Kumari, who were felicitated by Ministry of Culture. These are the unsung heroes who have radiated hope, embodied courage, commitment and zeal.

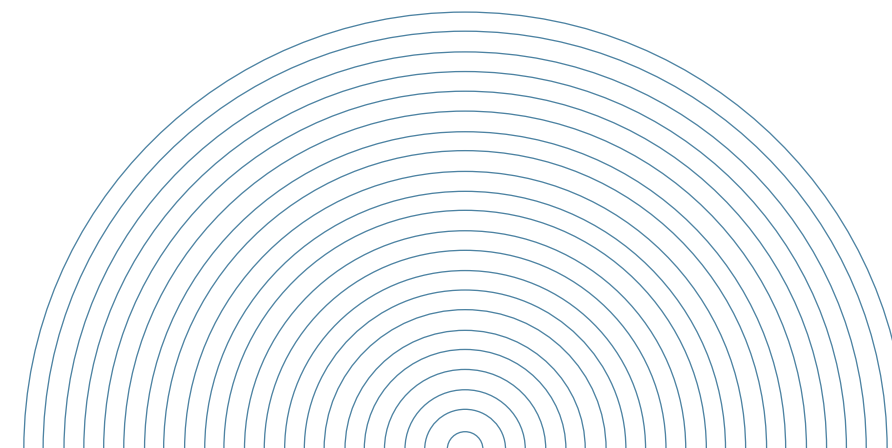
Education



Our Girls' Education Programme focuses on bringing transformative change in the lives of children from marginalised communities, especially girls, by inculcating leadership skills and enabling them to lead a bright future. We focus on ensuring participation, enhancing learning outcomes and promoting gender equity through enabling a safe and secure learning environment and incorporating sustainable solutions.

CARE India partners with state governments to implement large-scale programmes in public schools and communities and collaborate with like-minded organisations and networks to deliver gender transformative education models.

Our programmes and projects are designed to work with girls through the ages 3–18 years and focus on building strong foundational skills in children and supporting leadership in adolescents to become innovators and change makers.



Key Programmes and Achievements



Learning Recovery Programme

To address the learning loss of children due to extended school closures during COVID - 19, CARE India initiated a multi-pronged approach to ensure continued learning for the children living in areas with low internet penetration in partnership with the state governments of Jharkhand, Tamil Nadu, Haryana, Bihar, Madhya Pradesh and Maharashtra and setting up community learning centres (CLCs).



Sharp increase in higher order competencies in language and numeracy. In language, 32.63% of children achieved higher order language competencies compared to 15.18% in baseline and 71.20% children showed higher order competencies compared to 26.26% children from baseline in numeracy.



Inculcation of leadership skills amongst 7,261 adolescent girls and boys through revitalising school-based leadership platforms.



India Partnership for Early Learning (IPEL) project

IPEL is a USAID funded five-year project which is being implemented in India in the states of Bihar, Jharkhand, Uttar Pradesh and Municipal Corporation of Delhi. CARE seeks to transform foundational learning service delivery for public and private schools in **137** districts, reaching **3,30,519** Anganwadi Centres, **1,81,528** public primary schools, and over **66.5** million public school children (ages 3–8) during the project period.



Supported department of School Education in Jharkhand and Bihar to develop 12-weeks school readiness package for class 1 for government schools, teachers and children of Bihar and Jharkhand.



Technically anchored the development of a tool kit to bring structured instructional approach in literacy and numeracy in Jharkhand. Also supported training of state resource groups and **59,000** teachers on Foundational Literacy and Numeracy (FLN) teaching approach.



First of its kind, landscaping study to map private sector engagement on FLN in each state initiated in partnership with KPMG. IPEL anchored designing and conduct of children learners' assessment in the state of Bihar. The study findings will set the district level benchmark basis children learning level and track progress effectively.



Khushi and Kanya Sampoorna

Implementing early childhood care and education programme in Rajasthan and Tamil Nadu, with an aim to develop school readiness skills amongst children.



Overall Girls Leadership Index score increased to **78** from **56**



Improved oral reading competency (Grade 2) from 10% to **86%**



Trained **16,387** girls on career guidance, leadership, adolescent nutrition, psychosocial care and civic action



Udaan

Developing workbooks, teacher handbooks, and assessment tools around 21st century skills such as functional English, Digital literacy, Social emotional wellbeing, Entrepreneurship and leadership in Tamil Nadu, Jharkhand, Uttar Pradesh, Haryana and Maharashtra.



Ensured safe reopening of schools after the pandemic by providing training to **50** school teachers and **400** School Management Committee members on COVID safety protocols.



1,714 children were re-enrolled in **50** schools in Nuh.



Developed a “Strategic plan for education recovery and building resilient system in India” through nationwide consultations to support state governments in planning a safe return to school and in learning recovery of children.

Innovator’s Lab

Setting up Innovators’ Laboratory model for building STEM and thinking skills in adolescent girls in Karnataka, Jharkhand and Maharashtra. This model focused on building foundation science and mathematics competencies, in addition to higher order thinking and enquiry skills in children from the most marginalised context.



Reached more than **2,000** vulnerable girls in Bengaluru and Mumbai to build key 21st century and STEM capabilities and dispositions in them.



Girls and boys supported through CARE India’s STEM education programme in Bengaluru Rural showed up to 18% improvement in the scientific knowledge and reasoning skills of girls and boys supported by the STEM education Programme in Bengaluru (Rural).



Powering Through COVID-19

As we witnessed COVID-19 reverse decades of progress and pivotal achievements in the last two years, CARE India continued to relentlessly work towards poverty alleviation, bridging learning loss and empowering the local ecosystem.

To address the issue of learning loss amongst the children, CARE India adopted three pronged approach so that children especially girls are able to recover their learning loss and develop resilience.

Methods adopted to reach out to children to address the learning loss

Operationalised Community Learning Centres/community Library

- Identified safe spaces in community through parents/community leaders
- Haryana, Tamil Nadu, Jharkhand, Bihar, Uttar Pradesh
- Trained community volunteers/youths on CLC concept

Training/mentoring of Government-appointed volunteers and school teachers

- Training on CARE India developed learning recovery curriculum and assessment processes in Haryana and Tamil Nadu
- Technical support to state education departments (Jharkhand, Bihar, UP) in developing FLN toolkit which also address the learning recovery of children
- Training of school teachers AWWs on learning recovery strategy

Strengthening of school

- Building capacity of SMCs on identification and selection of CVs and operationalisation of CLCs
- Monitoring functioning of CLCs on a regular basis
- Mobilising community to increase regular attendance

Developed an accelerated learning kit — a set of self-instructional worksheets and workbooks in language and mathematics, teacher/volunteer support material, a set of story cards/books, word card, picture cards, number cards, shape chart and basic stationary items.





Balika Manch: A new lease of confidence for girls to build the future of their dreams

Fifteen-year-old Sabrina is a student of class VIII in the government middle school at Bawla, Haryana. While she studies all subjects diligently, Sabrina's favourite is Hindi. After two years of being homebound on account of prolonged closure of schools and burdened by household chores during the COVID-19 pandemic, Sabrina's enthusiasm for school only increased after the lockdown restrictions were lifted.

Sabrina wishes to complete her studies and become a police officer. She hopes to be a strong support for girls who find themselves in challenging circumstances and are unable to voice their concerns and dreams. "I want to help girls in any way I can. If they have any trouble, I want to be there for them. This is what I will do when I join the police force."

Till last year, Sabrina would not have been sure of pursuing her dreams. Like most girls in her village, Sabrina too faced the risk of dropping out after completing middle school as the government secondary school is too far from their village. Due to existing gender discriminatory social and cultural norms, as well as the absence of a safe means of conveyance for the girls to travel to school, the dropout rate in the region is very high.

In the past year, Sabrina feels that she has gained a new confidence and desire to complete her studies till class XII and pursue her dream of a future where she is able to help other girls overcome these barriers. She is looking to join secondary school as her father has agreed to drop her to school and enable her to complete her studies.

She attributes this pivotal change in her faith in herself to the Balika Manch, a unique weekly forum created by the government to equip girls with leadership skills and raise awareness amongst them on gender issues. The weekly forum was initiated at her school a year ago and is supported by CARE India as part of its Be the Change programme. The coordinators of the programme involve girls in a variety of activities such as *Kanafoosi* (Chinese Whispers), Good Touch-Bad Touch and Darpan (Mirror game) that are aimed at encouraging them to speak up about their challenges, desires and opinions.

Sabrina appreciates the non-discriminatory approach of the forum and says that it has given her and her school mates the confidence and courage to freely raise their voices against gender discrimination and eve-teasing and confide with their parents and teachers. Sabrina feels that this has enabled them to actively participate in bringing change in the attitudes towards girls within the community and have given them the opportunity to look ahead towards the future.

While Balika Manch is currently organised for girls till class VIII, Sabrina hopes the sessions are extended further for higher classes.

Livelihood

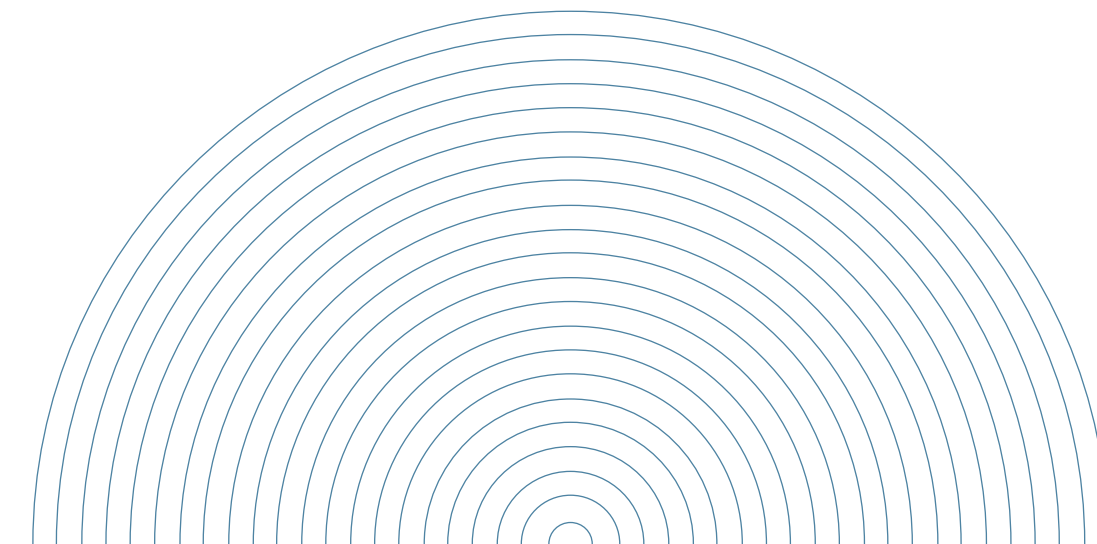


CARE's livelihood programmes focus on women smallholders engaged in agriculture, small businesses, employees and homeworkers from economically and socially marginalised communities.

Our objective is to empower marginalised women and girls to earn their livelihood and ensure food security by helping them in developing skills for initiating their own enterprise and by providing opportunities towards clean energy pathways.

We do this by building and designing innovative programmes under three thematic pillars of Climate Justice, Women Economic Justice and Food, Water and Nutrition security.

The programme is evolving to address issues related to environment and climate change, which impact women and girls. Climate justice and climate smart agriculture therefore have emerged as key areas of expertise and work. Equity in access to natural resources, agriculture-water-energy intersect and sustainable household energy (SHE) programmes are approaches towards gender transformative change.



Key Programmes and Achievements



Bachat

The use of solid fuels for cooking is likely to be the largest source of indoor air pollution on a global scale, affecting women and young children the most and contributing to climate change through emission of greenhouse gases such as carbon dioxide, methane and aerosols such as black carbon. CARE India has designed Bachat-II as a clean cooking project with Fair Climate Fund (FCF) based on carbon financing and aligned with the Gold Standard carbon project in Odisha's Kalahandi and Kandhamal districts.

Key Achievements



To be continued till December 2024 benefitting over 9,000 traditional polluting cookstove-dependant households.



3,150 women Self Help-Group (SHG) women leaders have become Sustainable Household (SHE) School members for creating awareness on sustainable consumption and production.



2,045 forest-dependant households have adopted Improved Cookstoves.



A community institution called Revitalising Opportunities for Sustainable Energy Initiative has been formed.



Secure and Resilient Livelihoods for Smallholders (SRL)

This project in Hazira and Umarpada in Surat, Gujarat, is getting implemented with funding support from Shell Energy India Pvt Ltd, to promote more secure and resilient livelihoods for smallholder farmers and forest fringe households. To support the community, the project has adopted a system-based approach and provides support to each of the 5,750 households across 21 villages in agriculture, livestock, and institution building through demonstrations or through input support, training and capacity building.

Key Achievements



Reduced irrigations costs and water made available for irrigation in both the Rabi and Kharif seasons benefitting **85** households



11–35% improvement in productivity of crops in Umarpada



In Hazira, **88%** of cattle owners reported an increase in fat levels in milk and **84%** reported increase in income through the sale of milk



Establishment of four women-based collective enterprises such as bakery, jewellery and stitching units. **55** women members have initiated their entrepreneurship ventures



Women + Water Alliance

The project, in partnership with USAID and GAP Inc., is aimed at improving and sustaining the health and well-being of women, their households and communities touched by the apparel industry and has been initiated in five districts of Madhya Pradesh and two districts of Maharashtra. CARE India has implemented the project in 4,000 villages and 44 blocks in both the states.

Key Achievements



More than **1,94,000** women in **5,908** Learning Groups are actively enrolled in GAP Inc.'s capacity building programme called Personal Advancement and Career Enhancement (P.A.C.E.)



1,51,000 women have graduated from the curriculum



24,000 male beneficiaries; **3,710** male champions out of **5,567** champions








More than **100** Storeys of Change reflecting positive change among individuals and communities

Economic Empowerment of Women Smallholders and Workers through Improved Agriculture and Inclusive Dairy Value Chain Promotion (IAIDVC)

Initiated by CARE India in 2017 in Gujarat’s Jambusar block in Bharuch district, with funding support from PI Industries, the project is currently in the second phase of its implementation. IAIDVC is aimed at the economic empowerment of women farmers and landless workers for enabling long-term development in the remote block through innovative interventions such as creating access to quality technology, market and resources, formation of SHGs and cluster level federations meant to enhance the income and productivity of women smallholders and workers in the areas of agriculture, livestock and dairy value chain.

Key Achievements

-  Improved livelihoods of **3,369** women smallholders and workers
-  **427** women part of **300** SHGs and six cluster level federations.
-  Six milk collection centres being run successfully by SHG women independently; the centres received a bonus of INR **3,12,763** from the District Milk Cooperative Society.
-  **1,015** women small holders and workers availed the benefits of relevant government schemes through support provided.
-  **110** landless women were trained as Pashu sakhis, beauticians, in tailors, imitation jewelry makers, khatli workers, and makers of home décor items and supported in establishing micro-enterprises.



Powering through COVID-19

Due to the second wave of pandemic, the project activities were highly impacted and the team's movement to the field was restricted. To avoid the infection and spread, team had carried out the activities virtually like training of community resource person, interaction with experts and worked along with partners for providing relief during COVID - 19.



Online session on vegetable farming, cotton farming and soil testing was conducted by engaging experts from Krishi Vigyan Kendra.



The waste picker collectives were provided with safety kit and trained them to protect themselves from the pandemic by using the safety materials provided to them. The project was instrumental in supporting the District Health officer with required paediatric and adult surgical materials to set up facilities to treat the COVID affected people.



Digital content of various trainings, soft skills, career skills, basic English conversation and digital literacy content was developed and shared with the target people through digital platforms. Online placement assistance workshops and interviews for candidates looking for employment opportunities was organised to benefit the participants.



Established a formal feedback mechanism through Maasik Samvad, a monthly virtual meeting for participants to share their issues, raise questions and provide suggestions during the call; **700** SHG women participated every month and the platform has become the meeting for government departments and other stakeholders to connect with SHG women.



Voice messaging system in the regional language was initiated to benefit **2,000** SHG women regarding COVID-19 guidelines, information on weather conditions, government schemes and digital fraud.





Waste picker to entrepreneur in micro food processing: Empowering waste pickers to pursue a sustainable and gainful alternative livelihood

Forty-six-year-old Kalavathi, an informal waste picker resides in GD Mara slum of Bengaluru, Karnataka with her two sons, one daughter and an ailing husband. She is the only earning member in her family. With no other means of livelihood and family support, Kalavathi makes ends meet by waste picking in the morning and selling fritters in the neighbourhood during the rest of the day. Kalavathi began waste picking in her childhood with her parents and continued the same to support her family on being married at the age of 16.

As part of CARE India's Kanya Samuhika Shakti Project with H&M Foundation to enable and empower women waste pickers to pursue sustainable livelihoods, Kalavathi was introduced to trainings in life skills and entrepreneurship development.

After receiving the trainings, she decided to expand to a tiffin making business by including *dosas* and *idlis* to her menu. CARE India supported her in procuring the necessary equipment which included an Idli storage box, grinder, *kadhai*, steel bowls, spatulas and *dosa* pan.

This helped her diversify her menu and prepare *dosas* and *Idli* as well. CARE India also facilitated her enrolment for a gas cylinder connection and a stove for hassle-free cooking.

While she continues to work as a waste picker, Kalavathi's expansion to the tiffin business has increased her daily income to INR 700, enabling her to ensure the wellbeing of her children and ailing husband.

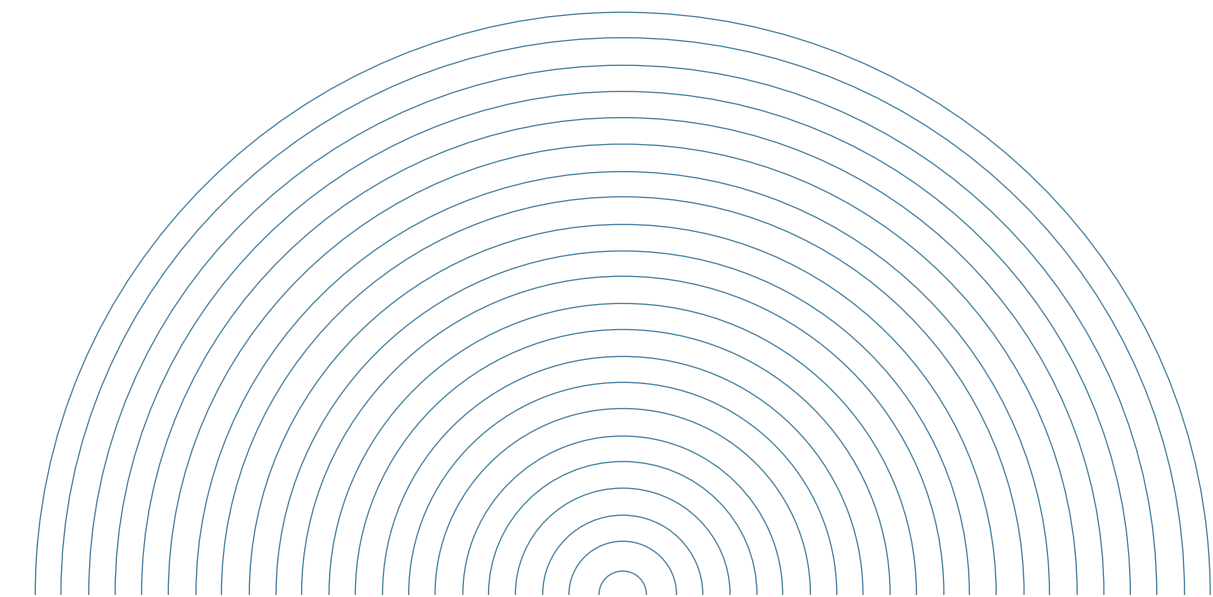
Disaster Relief



Humanitarian response and disaster risk reduction

Disaster Management initiative works to provide rapid and effective relief measures to the regions impacted by natural calamities. Our strategy encompasses Preparedness, Response, Recovery, and Rehabilitation with an approach of 'Building Back Safer'. We use post disaster recovery programming to increase the resilience of buildings and communities to future hazards.

CARE India carries out an annual risk profiling and mapping of vulnerable locations in India to enhance its preparedness to respond during emergencies. Long-term engagement with the affected communities and efforts made to provide them immediate relief for recovery are the primary focus of our Disaster Management mandate.



Key programmes and Achievements



Cyclone Yaas Response

Cyclonic Storm Yaas was a relatively strong and very damaging tropical cyclone that made landfall in Odisha and brought significant impacts to West Bengal during late May 2021. It devastated coastal towns in Bhadrak, Balasore, Jagatsinghpur in Odisha along with East Medinipur coastal area and Sagar Islands under South 24 Parganas district in West Bengal, with 5.8 lakhs people evacuated in Odisha and 15 lakhs in West Bengal.

Due to Cyclone Yaas people have been displaced and lost most of their household items. There are huge villages scattered across several blocks where tidal surges and rainfall has led to large numbers of villages being under water, which resulted in a huge requirement for shelter, drinking water, food needs and hygiene, especially due to the pandemic situation.



CARE India with support of its partner organisation FORWARD (Favourable Organisation Rural Welfare and Regional development), completed Rapid Need Assessment of the affected blocks.



Immediate relief with **580** full relief kits (Shelter and WASH NFIs) to **580** households across two Gram Panchayats, whose houses were completely damaged.



Reached out to **2,900** people from the most marginalised sections, particularly the scheduled caste and minority communities displaced due to cyclone.

While implementing a humanitarian response within a pandemic scenario, our teams quickly gained the knowledge and skills required to carry out relief distribution processes, quality and accountability mechanisms. The team members adhered to necessary physical distancing and used protection items like masks, gloves etc. while ensuring the completion of all the procedures of relief distribution.



Flood Response



Provision of Shelter support to **348** households in Cuddalore district, Tamil Nadu

CARE India reached out to **567** households with shelter support in Jalaun district in Uttar Pradesh



The team distributed utensils and mosquito net to **22** nomadic families living in open space with no major assets.



617 girls who are members of adolescent collectives were distributed dress materials (Churidars) Additionally, distribution of towels was done in **126** schools.



COVID 19 Response







Reached out to **19,500** health personnel by provisioning of **52,06,000** masks and **2,00,000** gloves in RML and AIIMS, Delhi.



Provisioning of medical equipment in Government Hospitals in Kerala, Maharashtra, Uttar Pradesh and Delhi including set-up of Oxygen plants in Delhi and Kerala (**5** Plants of **1000** LPM each).

Capacity Building Training Programme

Participants from Tamil Nadu attended the training on Emergency Response with the idea:

-  To build the capacity of CARE's partner staff and project team members
-  To improve preparedness to respond at all levels before, during and after disasters
-  To create a cadre of trainers
-  To provide the participants with an understanding of a systematic approach towards emergency assessments and relief operations in the field.





Getting Back on Feet

Our house was shattered by the strong winds, leaving my family of seven without shelter.

Bhawprasad's lives in Balasore district of Odisha and his main source of income is farming. Along with his wife, he also takes care of the livestock and earns enough money to support his family.

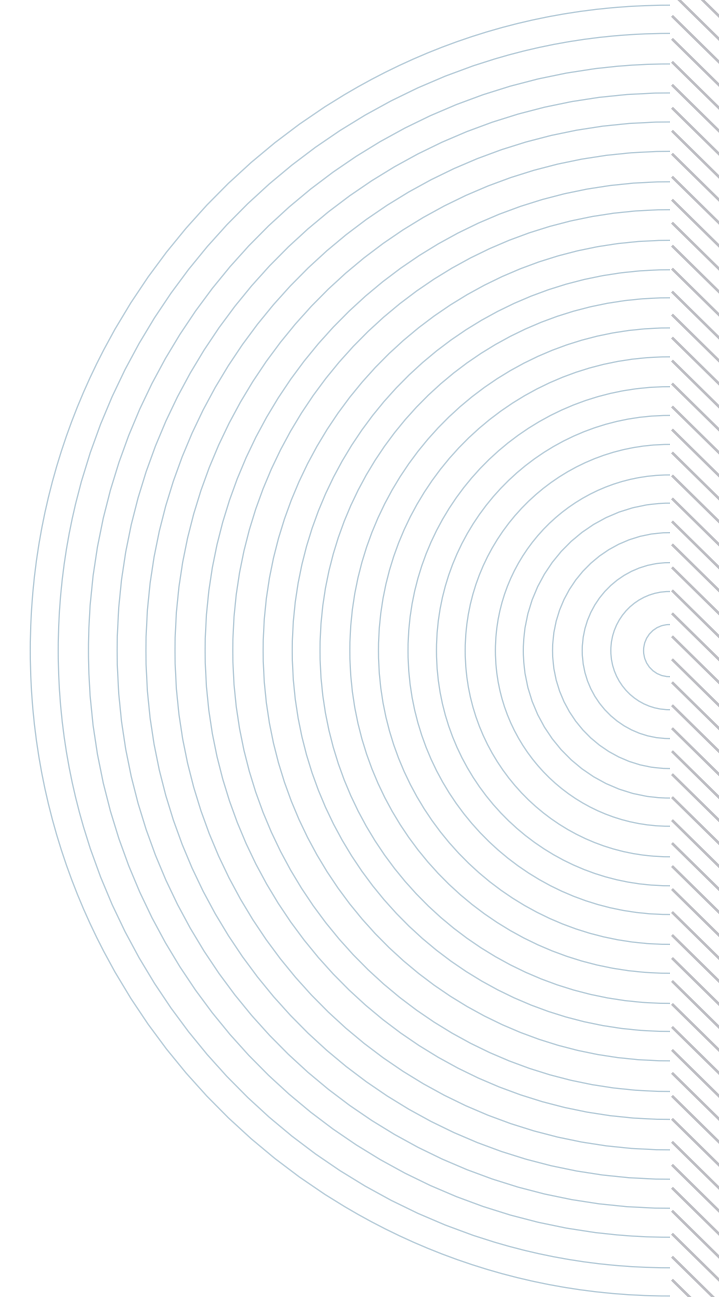
Their lives were going well until the very severe cyclonic storm Yaas caused landslides in Odisha.

Farms could not be seen because they were covered in debris. Their crops were damaged, resulting in a loss of income and investment. Two cattle were lost and one was severely injured. Bhawprasad neither had money nor means to arrange meals to feed his family.

When Bhawprasad's hopes were dashed, community resource mobiliser connected with him. After understanding the dire situation, CARE India provided immediate relief kits consisting of Water, Sanitation and Hygiene (WASH), Non-food Items, Dignity kit and Shelter kits to him.

With the immediate help, he could get back on his feet and revive his livelihood.

"I express my gratitude to CARE India for helping us during the most difficult times. The mud walls and other household goods were washed away during cyclone 'YAAS'. Now I can protect my shelter for the time being and can manage for 2-3 moths with the household goods" added Bhawprasad.



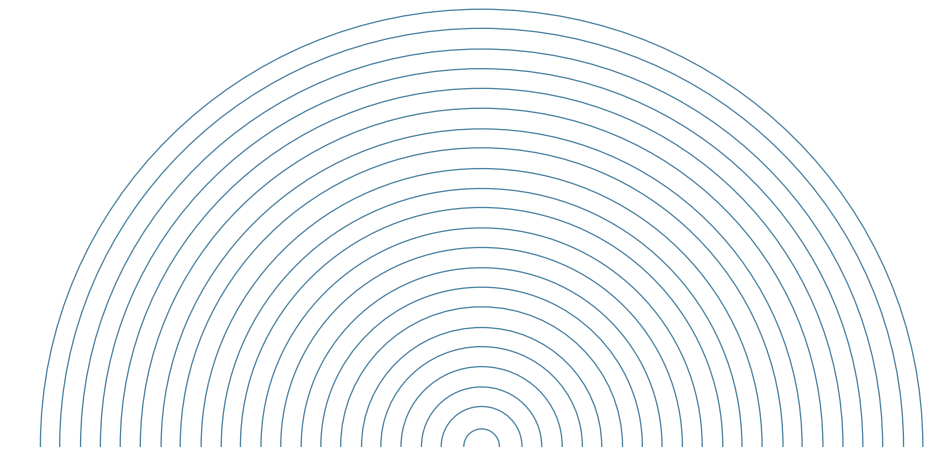
Design Centre



The Design and Innovation Centre is driven by the vision to design breakthrough innovations leveraging CARE India's existing programmes in health, education, livelihoods and humanitarian assistance; validate them through CARE India's global network and productise the validated solutions for global deployment. The objectives are to: design, innovate and scale breakthrough solutions for global challenges; enhance impact of programmes by leveraging technology and innovations for social change; build and nurture the culture of innovation and design across the organisation.

The design centre is strategically placed in the International Institute of Information Technology, Hyderabad, to leverage their AI and ML technology to develop data-led informatics solutions. Since July 2021, the design centre has forged strategic partnerships with key stakeholders from the innovation ecosystem in Telangana such as T-Works (India's largest prototyping centre) and Research and Innovation Circle of Hyderabad to co-create solutions for the innovation projects at the design centre.

Since its inception, the design centre has been working on innovations for clean cooking, developing a curriculum to enhance curiosity in students and a digital solution for frontline health workers.



Key Activities

-  Immersion into programmes
-  Sharpen problem statements with insights on user journeys
-  Facilitate partnerships/relationships
-  Advocacy with key stakeholders – government, donors, partners, academia
-  Intellectual Capital by building a knowledge base
-  Ideate and create prototypes
-  Real time testing and modelling of solution iterations
-  Building pathways to productization and scaling of validated Minimum Viable Products



The Design Centre Process

-  **Opportunities and Challenges**
Screening high-impact problem areas through discovery workshops and programme immersions
-  **Generating Ideas**
Brainstorming, Hackathons, Open Innovation
-  **Developing and Testing**
Prototyping and experimentation; proof of concepts
-  **Making the Case**
Innovation pitch to key stakeholders for validation
-  **Delivering and Implementing**
Pilot studies at CARE India's existing programme locations
-  **Growing and Scaling**
Growing and spreading successful solutions at the national and global level
-  **Changing System**
Buy in from key public and private sector stakeholders over a long period of time

Knowledge Management and Learning



The Knowledge Management and Learning Centre (KMLC) evolved as one of the Centres of Excellence (CoE) for Knowledge Management; Monitoring, Learning and Evaluation (MLE) and research-related activities in the organisation based on CARE India's decades of journey in evidence-based programme management and implementation.

CARE India has established a strong in-house scientifically equipped MLE teams with research capabilities over the past decade.

This KMLC is envisioned to take over the responsibility of establishing systems to manage the organisation's in-house knowledge, to promote cross-thematic learnings and also to establish a centralised knowledge platform for the development sector.

The need for scientific research driven project designing is a critical aspect of every social development project to ensure optimal utilisation of resources so as to make maximum on-ground impact.

Tapping into the Opportunity

There exists an absence of organisations having ground presence and experience in implementation as well as research. To facilitate other development partner organisations to leverage these scientific MLE capabilities to design their interventions, mid-project course correction opportunities and ensure the optimisation of their available resources for maximising social impact. CARE India plans to have a cascading impact in the overall Indian development sector including the developmental efforts of its own.

KMLC also plans to extend services to CARE International confederation, supporting them in design and implementation of MLE activities in a turnkey basis (except for data collection).

Currently, KLMC is partnering with different implementing organisations to leverage its existing knowledge bases to support project MLE requirements.

KLMC plans to offer mainly four kinds of services to its donors, partners, CARE International confederation and others:



KMLE Learning Across Projects and Programmes: Provide consulting service on project KMLE management, impact reporting, ME-MIS Development and quality control



Scientific Research: Design studies, methodologies, tools; work on ready real-time data analytics platform, develop and offer standardised MLE packages



Knowledge Creation and Dissemination: Analyse CARE India's studies and publish research papers/publications (beyond journals) for the greater development sector to leverage these learnings for their development intervention projects, offer consulting services for repository building and design CARE India Design Box



Learning: Undertake need based orientation and learnings sessions for CARE India staff across projects and a long-term vision to establish 'CARE India Academy of Learning' offering internships, fellowships, certifications, degrees and trainings.



Gender Equality Centre



Walk the Talk

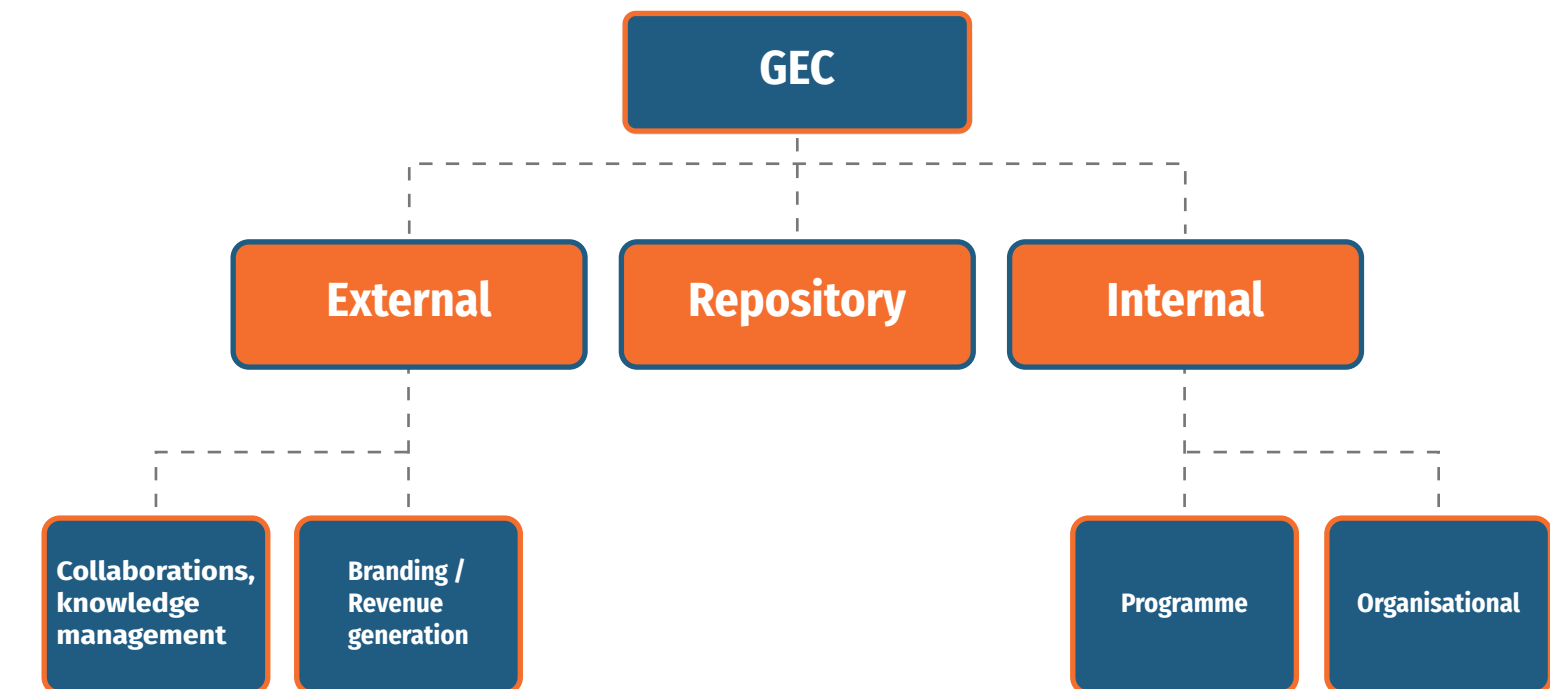
CARE India is committed to design its interventions in a way such that women and girls are the main beneficiaries. The Gender Equality Centre (GEC) is envisioned to actualise CARE India's 2030 Vision of placing women and girls at the centre of all interventions and integrating gender across all projects and programmes. Historically, CARE has worked with women and girls; however, the integration needs to align with our theory of change, be systematic and sustainable. It is the mandate of the GEC to ensure that we are able to efficiently synthesise our learnings across projects and programmes, build collaborative relationship with other country offices and feed the learnings into our interventions such that the programmes are gender transformative.

Our Objectives

GEC shall focus on gender integrative work at two levels – internally (within the organisation) and externally (outside the organisation).

At the internal level, it shall focus on two components – programmatic (all projects and programmes) and organisational (policies, processes and staff-related aspects).

Additionally, it shall evolve as a one-stop repository for CARE for products, project ideas, evidence, modules, tools, SOPs which shall be both collated as well as developed and synthesised with technical and academic inputs from domain experts around the world, internal expertise and expertise from the CARE Confederation.



Our Activities

Organisational level

- Work across existing and new programmes to ensure integration of gender transformative strategies.
- Orient project staff on gender integration into their respective programmes.
- Work with the project team on the different stages of a programme, viz. conceptualisation, proposal writing, development of implementation plan, roll out of implementation and evaluation on appropriate methodologies of integrating gender.
- Develop Gender-Based Violence as a separate programmatic vertical.
- Work with departments within the organisation to facilitate revision and development of policies such that they become socially inclusive, gender responsive and in absolute alignment with CARE's vision.
- Develop a dedicated forum for all women staff who shall take ownership of brainstorming on and developing ideas to address the current gender skew in recruitment, to retain more female staff, develop supportive policies and focus on capacity building of women staff.
- Work with the KMLC to develop tools for evaluating the integration of gender sensitive and inclusive attitudes at all tiers within the organisation.
- Develop itself as a brand for a one-stop repository for products, innovations, properties, systematic evidence, innovative tools and methodologies for ensuring and assessing gender integration into different domains and thematic areas, training and orientation modules, SOPs and reports.



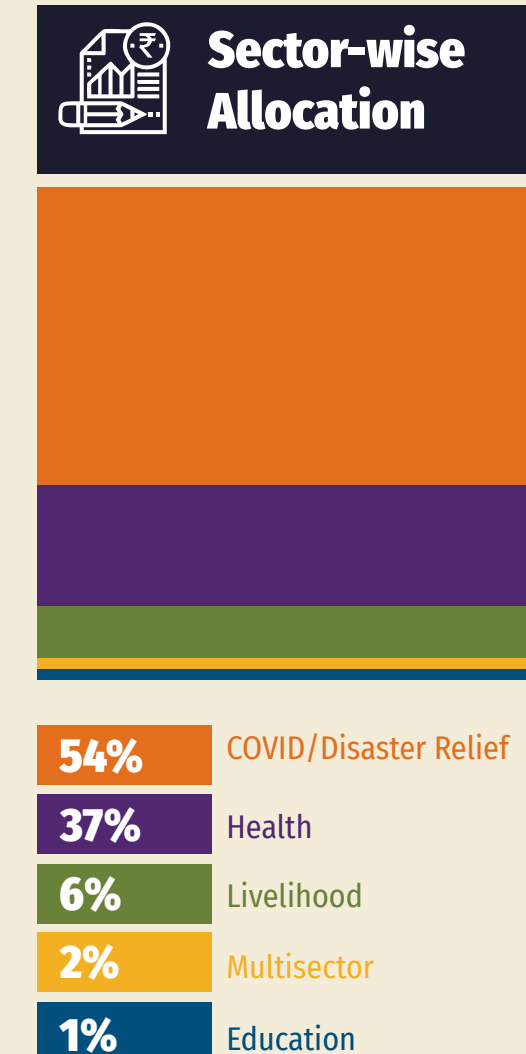
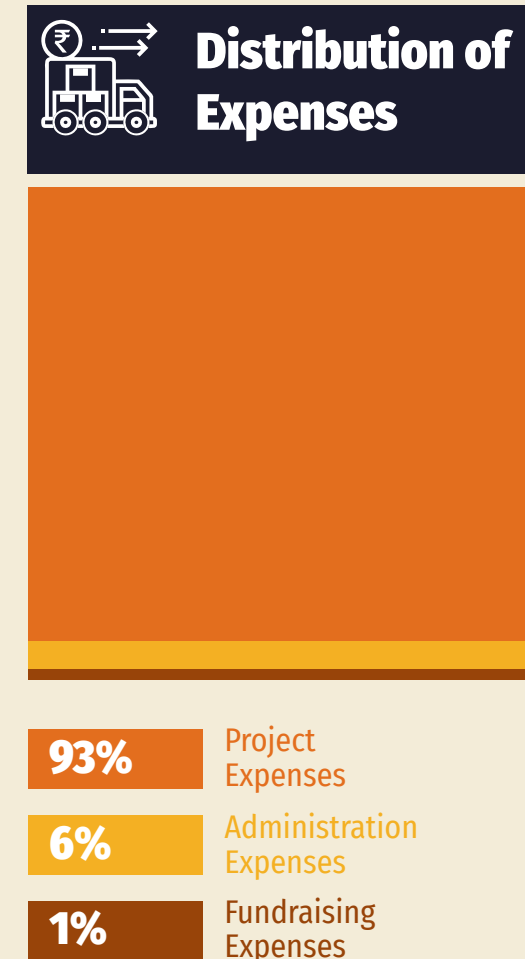
External level

- Identify knowledge and implementation partners and set up collaborations with an objective to cross-learn, co-ideate, co-develop products, disseminate, and build its visibility as a knowledge brand of CARE.
- Identify and invite experts from each thematic area to form an advisory group to provide time-to-time inputs and help strengthen the direction, structure and relevance of the gender integration across all programmes.
- Focus on generating revenue through grant writing, offering fee-based technical support and services to other peer organisations, corporates, etc.
- Create an annual property – such as a conference and/or a campaign that shall establish its identity as a national leader in talking about gender integration in development and humanitarian programming in the low- and middle-income world.

Financials



We are grateful for the support provided by all our stakeholders, especially donors and partner organisations, who provided the resources necessary to further our work. Across India, finance teams worked together to improve processes and practices and enhance efficiency and productivity.



Care India Solutions For Sustainable Development
Balance sheet as at 31 March 2022
(All amounts in Lakhs of Rupees unless otherwise stated)

	Note	As at 31 March 2022	As at 31 March 2021
EQUITY AND LIABILITIES			
Shareholder's funds			
Share capital	3	0.00	0.00
Reserves and surplus	4	8,017.75	4,132.36
		8,017.75	4,132.36
Non current liabilities			
Long-term provisions	5	628.66	775.92
Other long term liabilities	6	4.86	0.59
		633.52	776.51
Current liabilities			
Trade payables			
- Total outstanding dues of micro enterprises and small enterprises	7	875.43	213.28
- Total outstanding dues of creditors other than micro and small enterprises	7	2,515.23	1,129.78
Other current liabilities	8	6,487.29	5,974.54
Short-term provisions	9	792.37	375.70
		10,670.32	7,693.30
		19,321.59	12,602.17
ASSETS			
Non-current assets			
Property, plant & equipment and intangible assets			
- Property, plant and equipment	10	2,730.02	520.80
- Intangible assets	10	79.80	36.40
		2,809.82	557.20
Long-term loans and advances	11	36.04	46.75
Other non-current assets	12	49.93	341.03
		2,895.79	944.98
Current assets			
Cash and cash equivalents	13	15,193.90	11,203.81
Short-term loans and advances	14	868.33	363.92
Other current assets	15	363.57	89.46
		16,425.80	11,657.19
		19,321.59	12,602.17

Background and significant accounting policies

The accompanying notes form an integral part of the financial statements

As per our report of even date attached

For **B S R & Associates LLP**
Chartered Accountants
Firm Registration No. 116231W/W-100024

RAMAN TULSIANI
Digitally signed by
RAMAN TULSIANI
Date: 2022.09.29 22:24:50
+05'30'

Raman Tulsiani
Partner
Membership No: 510590

Place: New Delhi
Date: 29 Sept 2022

For and on behalf of the Board of Directors of
Care India Solutions For Sustainable Development

Namrata Kaul Khazanchi
Digitally signed by
Namrata Kaul Khazanchi
Date: 2022.09.29 20:50:14 +05'30'

Namrata Kaul
Director
DIN: 00994532

Place: New Delhi
Date: 29 Sept 2022

MATHEW CHERIAN
Digitally signed by
MATHEW CHERIAN
Date: 2022.09.29 19:57:13 +05'30'

Mathew Cherian
Director
DIN: 02467609

Place: New Delhi
Date: 29 Sept 2022

MANOJ GOPALA KRISHNA
Digitally signed by
MANOJ GOPALA KRISHNA
Date: 2022.09.29 19:37:22 +05'30'

Manoj Gopalakrishna
Chief Executive Officer

Place: New Delhi
Date: 29 Sept 2022

Care India Solutions For Sustainable Development
Income and expenditure account for the year ended 31 March 2022
(All amounts in Lakhs of Rupees unless otherwise stated)

	Note	For the year ended 31 March 2022	For the year ended 31 March 2021
Income			
Grants and donations	16	47,710.31	23,251.03
Other income	17	603.75	445.65
Total		48,314.06	23,696.68
Expenses			
Project expenses	18	43,109.12	20,993.90
Fund raising expenses	19	480.70	426.88
Other administrative expenses	20	2,776.11	1,667.92
Depreciation	10	589.54	404.01
Total expenditure		46,955.47	23,492.71
Excess of income over expenses			
Appropriations		1,358.59	203.97
Add: Transfer from asset fund account	4c	487.26	354.88
Amount transferred to general fund	4a	1,845.85	558.85

Earning per equity share:

Basic	92.29	27.94
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Background and significant accounting policies

The accompanying notes form an integral part of the financial statements

As per our report of even date attached

For **B S R & Associates LLP**
Chartered Accountants
Firm Registration No. 116231W/W-100024

RAMAN TULSIANI
Digitally signed by
RAMAN TULSIANI
Date: 2022.09.29 22:25:15
+05'30'

Raman Tulsiani
Partner
Membership No: 510590

Place: New Delhi
Date: 29 Sept 2022

For and on behalf of the Board of Directors of
Care India Solutions For Sustainable Development

Namrata Kaul Khazanchi
Digitally signed by
Namrata Kaul Khazanchi
Date: 2022.09.29 20:51:44 +05'30'

Namrata Kaul
Director
DIN: 00994532

Place: New Delhi
Date: 29 Sept 2022

MATHEW CHERIAN
Digitally signed by
MATHEW CHERIAN
Date: 2022.09.29 19:58:12 +05'30'

Mathew Cherian
Director
DIN: 02467609

Place: New Delhi
Date: 29 Sept 2022

MANOJ GOPALA KRISHNA
Digitally signed by
MANOJ GOPALA KRISHNA
Date: 2022.09.29 19:38:39 +05'30'

Manoj Gopalakrishna
Chief Executive Officer

Place: New Delhi
Date: 29 Sept 2022

Care India Solutions For Sustainable Development
Cash Flow Statement for the year ended 31 March 2022
(All amounts are in Indian Rupees unless otherwise stated)

	For the year ended 31 March 2022	For the year ended 31 March 2021
A. Cash flow from operating activities		
Excess of Income over expenses (after transfer from Asset fund account)	1,845.85	558.84
Adjustment for:		
Fixed assets purchased charged off in project expenses	2,634.68	314.94
Fixed assets sold considered as income	(7.11)	(0.50)
Amount written off		0.11
Depreciation on Owned Assests	102.27	49.13
Interest on fixed deposit	(169.87)	(175.90)
Provision for gratuity	213.32	188.90
Working capital adjustments:		
(Increase) / Decrease in loans and advances	(471.80)	107.35
(Increase) in other current assets	(15.61)	(9.57)
Increase in trade payables	2,047.56	631.37
Increase in provisions for employees benefits	56.10	90.51
Increase in other liabilities	(357.66)	490.92
Net cash from operating activities	5,877.73	2,246.10
Income tax Refund/(paid) (including tax deducted at source)	10.71	5.82
Net cash generated from operations	5,888.44	2,251.92
B. Cash flow from investing activities		
Interest on fixed deposit	169.87	175.90
Purchase of fixed assets	(2,075.33)	(363.74)
Fixed Deposit made during the year	(3,800.00)	(4,150.00)
Fixed Deposit matured during the Year	3,800.00	3,850.00
Sale of fixed assets	7.11	0.50
Net cash (used) for investing activities	(1,898.35)	(487.34)
C. Cash flow from financing activities		
	-	-
Net increase in cash and cash equivalents (A+B+C)	3,990.09	1,764.58
Cash and cash equivalents at the beginning of the year	11,203.81	9,439.23
Cash and cash equivalents at the end of the year	15,193.90	11,203.81
Components of cash and cash equivalents:		
Cash in hand	-	-
Balances with scheduled banks	15,193.90	11,203.81
	15,193.90	11,203.81

The Cash Flow Statement has been prepared in accordance with the 'Indirect Method' as set out in the Accounting Standard (AS) - 3 on 'Cash Flow Statements' as prescribed under Section 133 of the Companies Act, 2013 ('Act')

As per our report of even date attached

For **B S R & Associates LLP**
Chartered Accountants
Firm Registration No. 116231W/W-100024

RAMAN TULSIANI
Digitally signed by
RAMAN TULSIANI
Date: 2022.09.29 22:25:39 +05'30'

Raman Tulsiani
Partner
Membership No: 510590

Place: New Delhi
Date: 29 Sept 2022

Namrata Kaul Khazanchi
Digitally signed by
Namrata Kaul Khazanchi
Date: 2022.09.29 20:52:29 +05'30'

Namrata Kaul
Director
DIN: 00994532

Place: New Delhi
Date: 29 Sept 2022

MATHEW CHERIAN
Digitally signed by
MATHEW CHERIAN
Date: 2022.09.29 19:59:21 +05'30'

Mathew Cherian
Director
DIN: 02467609

Place: New Delhi
Date: 29 Sept 2022

MANOJ GOPALA KRISHNA
Digitally signed by
MANOJ GOPALA KRISHNA
Date: 2022.09.29 19:39:22 +05'30'

Manoj Gopalakrishna
Chief Executive Officer

Place: New Delhi
Date: 29 Sept 2022

Partnerships



Our partners have always been a significant facet of any of our intervention initiatives. Their investments have gone a long way towards strengthening communities and have enabled us to run our programmes more effectively and efficiently.

Over the years, CARE India has partnered with marquee institutions in both the public and private sectors to maximise the impact and influence of its projects and programmes across the country. We are truly grateful to be the partner of choice for multiple government organisations and social and economic institutions, who extend their humanitarian efforts and make a difference in society.

We want to express our gratitude to all our partners for their constructive, collaborative, and innovative engagement with us, which has amplified the impact of our programmes and intervention.

Accenture	Disney Asianet	Mahindra and Mahindra Financial Services Limited	Societe Generale Securities India Pvt. Ltd.
Alstom foundation	Doctor For You	Malala Fund	Standard Chartered Bank
Amazon	Eicher	Margaret A. Cargill Foundation	Star India Provate Limited
American India Foundation	Ericsson	Mars	Tata Cornell Institute
Arhant Social Foundation	Evolis	McCormick	Tata Projects
Aurobindo Pharama Foundation	Fair Climate Fund	Merck Family Foundation	Thales
AVT McCormick Ingredients Pvt Ltd	GAP Inc.	Michelin	The Disasters Emergency Committee
Azim Premji Foundation	Google India Pvt. Ltd.	Moet Hennessy India Private Limited	The One Foundation
Bajaj Electricals	H&M Foundation	Mondelez	The Power of Nutrition
Bank of America	Hazira Port Pvt. Ltd.	NASSCOM Foundation	Titan
Bill & Melinda Gates Foundation	HCL Foundation	NBIPL (Link Solutions)	TPL
BioMérieux	HDFC Bank	Novateur-Legrand	Trigyn Technologies Limited
Blackstone	Helma Solution	Pasty Collins Trust Fund Initiative	United States Agency for International Aid
BNP Paribas	Hermes	PI foundation Trust	University of Sheffield
Boeing	Hindustan Zinc Limited	PricewaterhouseCoopers	Various donors for India COVID-19 Emergency Response Pooled Fund
Cadence	IFPRI	Project Concern International	Wise
Center for Disaster Philanthropy	IHG	RNTBCI (Renault)	World Bank
Cisco Foundation	Indo-French Chamber of Commerce and Industry	SAP Concur	
Container Corporation of India Limited	IndusInd Bank	Schneider	
Crédit Agricole Corporate and Investment Bank	Jack Dorsey	Serdia	
CSG	Latter-day Saint Charities	Shell Energy India Pvt Ltd.	
DesireLine	Levi Strauss Foundation	Shinwon	
	Loreal		

Human Resources and Organisational Development



CARE India is proud of its greatest asset, which is 'people' that comprises regular staff, subject matter experts and consultants, volunteers, and interns working across 21 states in India. We invest in hiring personnel from diverse professional background and expertise, and keeping gender inclusion as the topmost agenda. Our focus has been on continuous learning and professional development for our staff to ensure they are engaged and ready for career progression and personal growth.

Leadership at CARE India

CARE India has invested in leadership development and building 'shared leadership' of the senior management in developing leadership behaviour and organisational values, keeping in line with the Core Values of the organisation. 'Vyaktitva' partners with CARE India in driving this agenda for the organisation including team development, team building and personal development sessions.

Streamlining HR Processes and Policies

The HR and OD team has put their hands together to work across the length and breadth of the organisation to ensure that all personnel engaged with CARE India are hired and onboarded with speed and rigour to keep the implementation and delivery of the projects in a timely and qualitative execution.

Amidst the pandemic we learnt to work in the 'new normal' environment, continuing to work in a hybrid model, ensuring that we provide quality services to people while keeping people safe. Hence, we established new processes and workplace safe policies to help people thrive at work.

We redefined our Standard Operating Procedures that simplify the life cycle process, ensuring smooth onboarding, payments, and exits for personnel working in the programs including short-term project cycle engagements.

HR Policies at large have been drafted and are being rolled out in phases that are meant to keep the staff empowered, safe and engaged at the workplace.

Compliances and Practicing Good Governance

CARE India is a highly compliant organisation and has worked consistently in raising the bar by ensuring all HR statutory compliances and regulations in place. A dedicated team within the HR and OD unit works effortlessly ensuring that periodic monitoring and checks and measures are put in place. **Hinduja Global Solutions (HGS)** has been onboarded in the fiscal year that provides advice and ensures full compliance for the organisation including submission of all annual and periodic returns with the statutory authorities. **Comply Global** continues to partner with CARE India to monitor applicable compliances through the monitoring tool. **Annual Reporting of PoSH** cases are being reported to the designated authorities and the Board.

Staff Health

Good health of staff is of paramount importance to us as an organisation. CARE India ensures that all staff are assured of medical, accident and term life insurance including mental health. We invest a great deal in ensuring that our team and their families enjoy good health and access some of the country's best medical facilities and treatments. We have Group Medical Insurance for our staff and their dependents. We also cover our staff under Group Accident Insurance and Group Term Life Insurance schemes. We are cognizant of mental health, hence, we have partnered with Santulan as part of our employee mental health assistance programme. To ensure staff are aware of health and safety aspects, session like Yoga and Zumba, Health talks, etc. are organised by the HR and OD team. Flyers on health awareness are shared on a monthly basis.

Safeguarding Awareness

SAFEGUARDING POLICY was drafted and rolled out. This is the umbrella policy for Protection from Sexual Harassment, Exploitation and Abuse, and Child Abuse (PSHEA) covering specific policies for keeping workplace safe from all harm and It includes:

- Prevention, Prohibition and Redressal of Sexual Harassment of Women at Workplace (PoSH)
- Prevention of Workplace Harassment – Exploitation and Abuse
- Child Safeguarding Policy - Preventing Child Abuse

Our HR and OD team has partnered with external experts to train all staff, consultants and internal stakeholders that include the Internal Committee (IC) and the senior leadership team on the Prevention of Sexual Harassment (PoSH) at the workplace. CARE India partners with Rainmaker, which helps in creating an ethical and safeguarded workplace. We continue emphasizing the importance of the PoSH Policy, the Internal committee and the external panel with all staff at our Townhalls ensuring that each and every staff member is well aware of the Policy provisions and follows the policy in letter and spirit.

CARE India has a dedicated IC panel and external panel members, as mandated by Law, who are legal experts. CARE India has a stringent policy on whistleblowing and complaint mechanism. We undertake policy reiteration periodically and encourage everyone from board members, the leadership team, nd managers to interns and volunteers to report evidence-based instances of malpractice to the Ombudsman, who is the Chair of the Governing Board.

As an organisation, we are committed to protecting the whistleblower and the survivors under the safeguarding policy.



Staff Engagement

The HR and OD team works effortlessly to keep the staff engaged whether it is amidst the pandemic, lockdown or post lockdown. All staff engagement programs have been hosted by the team like festival celebrations, annual events like year end and the start of the year, dedicated internal events like International Women's Day, World Cancer Day, International Yoga Day, Independence Day events, etc. All staff contests are kept at each event to keep the staff high on participation with reward and recognition.

Team Management and Development

The HR and OD team comprising of diverse group across the organisation manages personnel of around 1900 + subject matter experts, consultants, volunteers and interns. The team onboarded staff and consultant amidst the pandemic and the lockdown ensuring programs continued uninterrupted and the organisation responded to the COVID-19 pandemic programs.

The team is invested in continuous learning and development and works together to take up online courses. The team meets annually on an off-site meet where they learn from each other, knowing and bonding with each other and discussing challenges and opportunities to work together as a larger team. The team also enchases knowledge from the leadership coach of the organisation.



Learning and Development

As part of our staff development endeavor to facilitate active learning and education in the workplace for our staff, we have been providing educational support and assistance to employees to undertake educational courses/workshops in, areas relevant to the work of the organization.


Transparency Disclosure about the Board

- CARE India board members are not related by blood or marriage
- The term of each member is three years
- In the Financial Year 2021 - 22, CARE India held board meetings on 28th May, 27th September, 11th December in 2021 and 2nd April, 25th June, 25th November in 2022
- CARE India's Annual General Body Meeting was held on 29th September 2022
- No remuneration, sitting fees or any other form of compensation is paid to any board member

Know more at www.careindia.org

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Read more on  www.careindia.org/blog

