



**ANNUAL REPORT**  
**2009/2010**





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## MISSION STATEMENT

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**The mission of Asha is to work with the urban poor to bring about long term and sustainable transformation to their quality of life. Through a practical expression of the Christian values of faith, hope and love, we aim to provide holistic community-based healthcare, empowerment, financial inclusion, education and environmental improvements by training, resourcing and encouraging the community to receive and enjoy their basic human rights.**

**Asha also aims to influence the lives of its international audience by sharing local practice, experience and vision and facilitating partnerships where awareness and association between different cultures can impact and change individuals globally.**

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# ASHA'S VALUES

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**Asha is a health, development and advocacy organisation based on Christian values.**

## **WE BELIEVE THAT:**

- All human beings are created in the image of God, and are of equal worth. Therefore the poor have the same inherent dignity, and rights that deserve our protection.
- Every person has a right to affordable healthcare that will allow them the best possible chance of living a productive and fulfilling life.
- Every child has a right to an education that will give them the opportunity to reach their potential, earn a living and grow in self-esteem.
- Shelter, safe water and sanitation should be available to all, regardless of their background or status within society.
- Women have equal rights to those of men, and those rights should be protected by both men and other women.
- Communities working together are capable of achieving great change, and can influence others to also strive for change.
- The poor deserve the chance to improve their financial status and their quality of life, and to break free from the cycle of poverty.

## **WE ARE COMMITTED TO:**

- Working among the poor without discrimination of any kind such as those based on sex, caste, religion, language, race, colour or other status.
  - Being at the forefront of the pursuit of justice and peace for the poor, and dealing with the systems that make and keep poor people in poverty.
  - Challenging oppressive social structures and responding to injustice through non-violence and active peacemaking.
  - Empowering the poor to lead full and meaningful lives, and building vibrant communities through the advance of love, neighbourliness, forgiveness and reconciliation.
  - Practising a liberating generosity towards the poor and giving them the opportunities they deserve.
  - Demonstrating earnestness in prayer for the needs of the poor and for all our partners.
  - Valuing diversity, and the skills and gifts of each team member.
  - Maintaining excellence in the quality of our programmes.
  - Exhibiting good stewardship of limited resources.
  - Fostering effective partnerships with the government, funding agencies and other NGOs.
  - Becoming a force for liberation and transformation of poor communities.
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## DIRECTOR'S REPORT

Dear Friends,

This year was financially difficult for many, and Asha too faced some economic hardships. Another concern was Commonwealth Games construction work that threatened demolition of slums and part of Asha's headquarters. However, we overcame these challenges, and I am glad to share our successes with you in this report.

The phenomenal achievements of 135 students being admitted to Delhi University exceeded all our expectations. Our accomplishments in financial inclusion were another highlight. Better healthcare, increased awareness and improved nutrition have seen Asha's health statistics soar above those of other Delhi slums, and even surpass those of India as a whole. The child mortality rate in Asha slums is just 28.2, compared with 69 in India and around 112 in Delhi's slums. That statistic speaks volumes, but you'll find many more encouraging figures in this report.

All these advances have been applauded by visitors from India and overseas. The Hon Mr P. Chidambaram, India's Home Minister, inspired students and their families at Asha's Celebration of Learning, and the Hon Kapil Sibal, Cabinet Minister for Human Resources and Development, also showed a keen interest in Asha's work. The Prime Minister of Australia, Hon Ms Julia Gillard, visited an Asha project and her enthusiasm has spread to others within Australia.

I hope our report will bring to life some of the stories of the people who are behind the statistics and achievements. Every individual in the slums is important, and there are thousands more people who have overcome severe hardships, or gained life-changing knowledge, and even more who are striving to turn their lives around.

Every day, Asha employees meet hundreds of people, helping those who have nowhere else to turn, and showing people that it is possible to find a way out of poverty. I'm deeply grateful to them for their diversity, dedication and broad range of skills.

It's heartening to know that our values are shared by every staff member and also Asha's partners. Our common belief in equality and commitment to protecting human rights has resulted in another remarkable year. The government, other NGOs, trusts, foundations and every single individual donor has made a difference to our programmes, and I am profoundly grateful to you all. I have no doubt that we will have more tremendous achievements to report next year, and look forward to you joining us in our endeavours.

Dr. Kiran Martin  
Founder and Director

## ASSOCIATE DIRECTOR'S REPORT



Dear Friends,

Asha, like so many organisations and individuals, felt the impact of the global economic situation this year. However, even though our income fell to a certain extent, we were still able to meet our needs thanks to careful management and loyal supporters. So many of you still donated to Asha - even when you were facing financial difficulties of your own - and for that I am truly thankful. We are continuing to use our funds wisely, spending no more than 7% on administration so that as much money as possible directly benefits the slum communities.

As a former teacher, I'm thrilled to see how many young people have overcome their circumstances to enter higher education. To me, this is one of the greatest examples of equality that we have seen. However, going to university is a daunting experience for anyone from a deprived background, and we're ensuring that the students get the support they need to prepare for the experience and make the most of their opportunities.

I was also particularly excited to see how the community of Savda Ghevra is progressing. That area was little more than a refugee camp when people first settled there in 2006 after their homes had been demolished. Now, there are schools, electricity supplies, public transport and well-spaced homes that have been built in brick rather than bamboo. I was so pleased when Asha was able to construct a house for a particularly needy family in the community, with the help of willing volunteers.

Finally, this year I've been impressed once again by our volunteers and all the time they have been willing to spend working in challenging, and often very hot, conditions. Individuals and groups from churches, schools and universities have come and offered their time, talents and compassion – it makes a huge difference, and we and people in the slum communities are extremely grateful.

Freddy Martin  
Associate Director

### ASHA'S RECOGNITION

Asha was founded in 1988 by Dr Kiran Martin, an Indian paediatrician, when a south Delhi slum area was experiencing a cholera epidemic. Today, Asha is an international organisation that has influenced worldwide audiences and development practices. It is the largest organisation working in the field of urban healthcare and development in India, and the UN Habitat declared Asha's work as one of the Best Practices every year Asha applied for recognition (2002, 2004 and 2008). These best practices are chosen from organisations across 140 countries that have provided proven solutions to the social, economic and environmental problems of an urbanising world.

In 2002, Dr Martin was awarded the Padma Shri, one of India's highest civilian awards by the then-President of India for her achievements.

# THANK YOU TO OUR PARTNERS

It is with great pleasure that we share with you our progress made over the past year. With record numbers of students entering first-rate universities and more slum inhabitants than ever working alongside us to develop their communities, we have much to be thankful for.



(L to R): Mr. Gordon Wright, Coordinator of Friends of Asha (Ireland); Mr. Phil Leighton, Coordinator of Friends of Asha (Great Britain); and Mr. Barney Graham of the Ballymena Builders, Northern Ireland



Shri Arun Ramanathan, Banking Secretary, Ministry of Finance, Government of India, at the Asha loan event



The Rotary Club of Delhi donating medical equipment



Mr. Gert Boven of Tear Netherlands



Yuba City Asha Committee



Team from the CanAssist organisation



Dr. David Finch, Chairman of Friends of Asha (Great Britain), leading a workshop on depression

Without the ongoing support of our partners, our achievements this year could never have been possible. We thank you for your deep commitment to enhancing the quality of life of Delhi's slum communities, and for enabling us to build on the successes of last year.

Thank you all for your most generous support.



Members of Tearfund New Zealand



Mr. Jack van Ham, General Director of ICCO and Mr. Bram van Leeuwen, Advisor to the General Director (on the left)



Shri P. Chidambaram, Home Minister of India and Dr. David Hempton, Harvard Professor



Members from four teams at the British High Commission: Rainey Endowed School, New Generation Church, St. Stephen's Church, and the Ballymena Builders



Mrs. Louanne Hempton, Coordinator of ASHA (USA)

# WHO HAS VISITED



Professor Deepak Pental  
Vice Chancellor, Delhi University



Students from the Massachusetts Institute  
of Technology, United States



Mr. K S Mehra, Commissioner of the  
Municipal Corporation of Delhi



HE Peter Varghese  
Australian High Commissioner to India



Hon. Shri P. Chidambaram, Home Minister of India



Hon. Ms. Julia Gillard  
Prime Minister of Australia



American Embassy School



Hon. Mr. Sakihito Ozawa  
Environment Minister of Japan



HE Kenneth Thompsom  
Ambassador of Ireland to India



Dr. Lachlan Strahan, Deputy High  
Commissioner of Australia



First Lady of Japan, Mrs. Miyuki Hatoyama



British Army Band



Shri Anshu Prakash  
Slum Commissioner of Delhi



Hon. Philip Burdon, Chairman Asia: NZ;  
HE Rupert Holborow, NZ High Commissioner  
to India



HE Bob Hiensch  
Ambassador of The Netherlands  
to India



Shri LK Advani  
Leader of the Opposition, India



Mr. Mickey and  
Mrs. Eleanor Robertson  
Asha Support Group, Scotland



Students from Auckland Grammar School,  
New Zealand



Hon. Shri Kapil Sibal  
Cabinet Minister for Human Resources and Development, Government of India

# WHERE WE WORK

Savda Ghevra, where those from the demolished Thokar No. 8 slum were re-located, is on the city outskirts, far from work.



These young children in Zakhira are making flip-flops instead of attending school.



Families without access to family planning often live in overcrowded homes like this one in Anna Nagar.



This drain in Peera Garhi is a breeding ground for insects causing diseases like malaria.



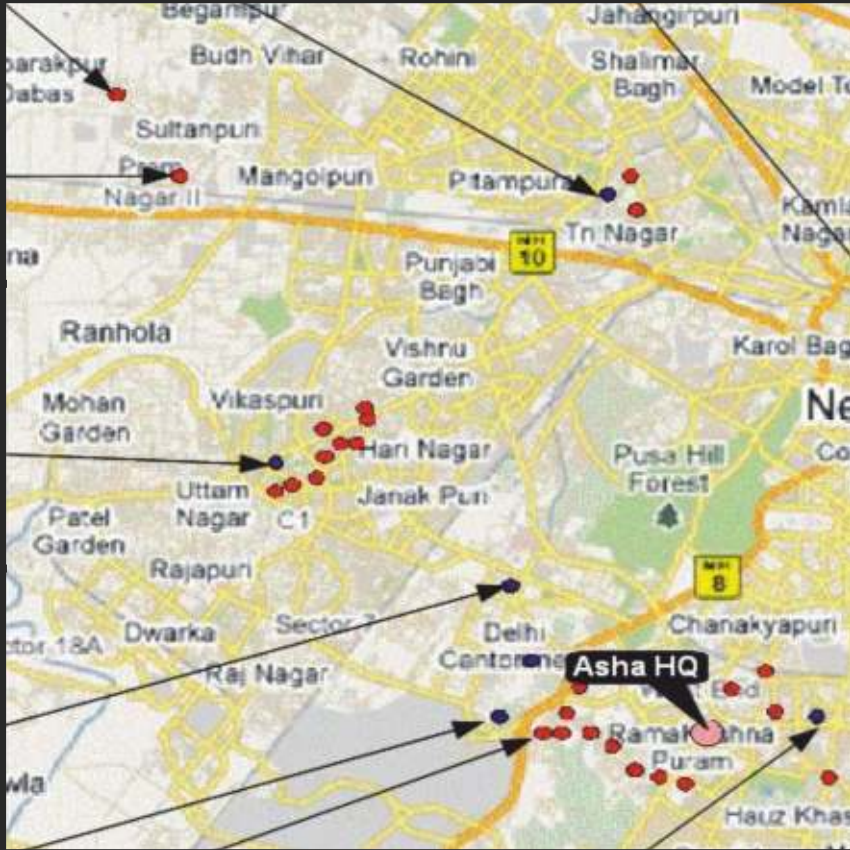
A few residents of Mayapuri die every year trying to access the latrines on the other side of these train tracks.



Overflowing latrines like these at Kanak Durga are often the only sanitation facilities available in slums.



Residents filling water cans in Kusumpur Pahadi. Water scarcity is a major problem in Delhi slums, with long lines which often cause conflict.



An ASHA mobile clinic treating patients at Coolie Camp, which has sprouted up behind a 5 star hotel.



Flash floods often cause the dirty drains like this one near the Dr. Ambedkar Basti slum to overflow, claiming lives.

The untreated rubbish in this dump at Chanderpuri comes from locations across the city.

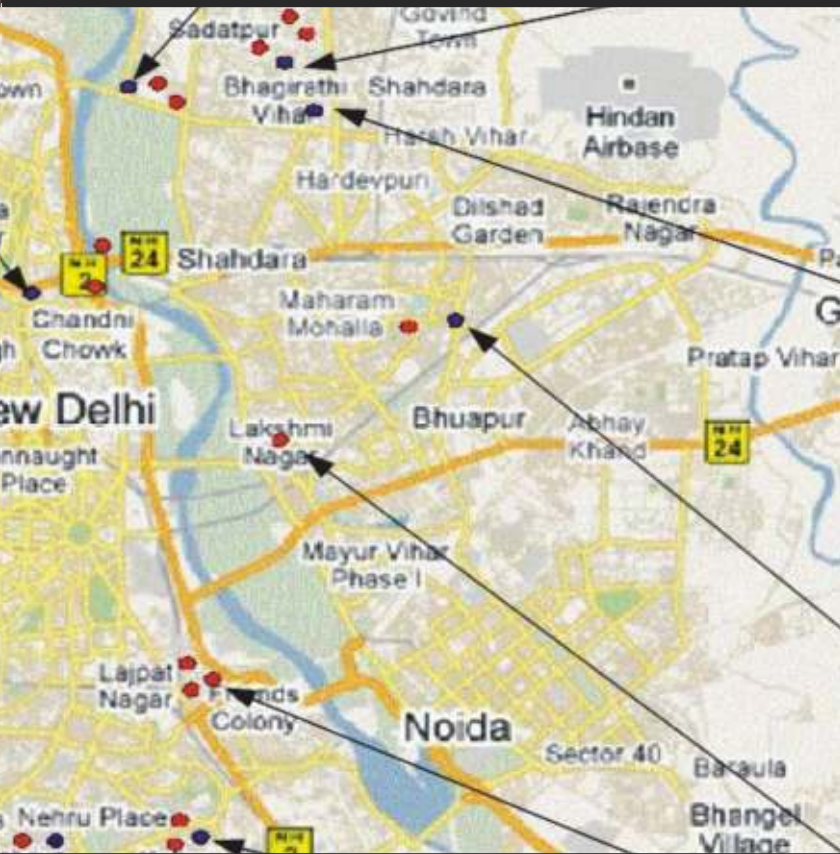


Rag-pickers in Seelampur strip wire for raw materials, earning around Rs. 50 per day per family.



**Asha serves over 400,000 people in 50 slum communities. A few of our major slums are: Seelampur, Jeevan Nagar, Kalkaji, Tigri, Savda Ghevra, Chanderpuri/Ajit Nagar, Mayapuri, Anna Nagar, Trilokpuri, Dr. Ambedkar Basti, Ekta Vihar, Kanak Durga, Kusumpur Pahadi, Zakhira, and Vivekanand.**

- Slum Community
- Children's Resource Centre



These plastic-roofed houses in Buland Masjid provide little protection from the annual monsoons and are prone to fire.



This baby in Trilokpuri has a distended stomach, a classic sign of malnutrition.



This utility pole in Tigri has numerous unauthorised taps, which are dangerous and often lead to electrocutions.



These ramshackle huts in Jeevan Nagar provide little protection from the elements.



Smoke rises from Thokar No. 8 as it burns to make way for construction for the Commonwealth Games. There is constant fear of eviction in the slums.

## ASHA'S ACTIVITIES: HEALTHCARE

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Slum conditions endanger their inhabitants' health. It has been estimated that, on average, a slum area that contains 20% of a city's population will have 50% of its diseases<sup>1</sup>. Cramped conditions, scarce clean water and poor sanitation all contribute to the serious health risks. People are unaware of how to protect themselves from disease, and the cost of healthcare and associated time off work prevents people from dealing with ill-health until the problem becomes serious.

In India, the 3 main causes of deaths among children under 5 are pneumonia, diarrhoea and prematurity, all of which are extremely common in slums. The maternal mortality ratio (number of maternal deaths per 100,000 live births) in India is estimated to be 450, the second highest in the world<sup>2</sup>, and the Delhi slum figure is far higher. Tuberculosis is now rare in other countries but still a killer in India, the country with world's highest proportion of TB cases.

Asha's approach to healthcare is community-based and has 3 levels. Women from slum areas are trained as Community Health Volunteers (CHVs), and some become Trained Birth Attendants (TBAs) after comprehensive tuition in midwifery. Women and child community volunteers are also able to teach fellow slum residents how to prevent disease, to provide Oral Rehydration Solution (ORS) for people suffering from diarrhoea, and to monitor the nutritional status of children. They urge pregnant women to have antenatal checks, and ensure people are aware that healthcare is available.



A family planning class in session

A second level of healthcare is provided at 16 slum-based health clinics staffed by Asha nurses, paramedical staff and part-time doctors. There, patients can be treated for general medical problems, receive vaccinations, obtain family planning advice and contraceptives, and be screened and tested for TB and other conditions. The centres run specialised health programmes including maternal and child health, tuberculosis control, and reproductive health and family welfare. Slum areas that do not have on-site health centres are visited by Asha mobile clinics providing the same services.

When further care is required, patients are referred to either a local hospital - Asha has taken care to develop links with them - or to the Asha polyclinic. The polyclinic is equipped to perform ECGs, ultrasound and X-rays, and also has the facilities to perform HIV testing, antenatal testing and other diagnostics. Visiting specialists allow Asha to provide slum residents with excellent healthcare at highly subsidised costs.

The health programme is continually supplemented and enhanced. This past year, Dr Dick Hogben from the UK conducted a training workshop on Diabetes for the staff, and an evaluation of the Maternal and Child Health programme was carried out by Dr David Finch, also a GP from the UK. March saw a special month to target suspected TB cases, screen for symptoms and refer people for further testing if necessary. In addition, RTI (Reproductive Tract Infection) and STI (Sexually Transmitted Infection) screening was carried out at the various health centres, allowing individuals and their partners to be treated who would have been likely to suffer in silence otherwise.

The results of Asha's work in the field of healthcare are remarkable. Maternal deaths are extremely rare, and 95% of babies born are at a normal birthweight. All but 2% of women had skilled attendance at delivery, as opposed to just 47% in India as a whole<sup>3</sup>. 291 people were cured of TB this year, with 95% of remaining patients on regular treatment. Other vaccine-preventable diseases are hardly ever seen in Asha slums. Contraceptive use in Asha's slums is 65% (compared with only 56% for the whole of India<sup>4</sup>) and family sizes are reducing.

Continually updated training combined with the work of community volunteers mean that entire generations are gradually becoming more aware of health issues, and misconceptions and superstitions relating to health are losing their grip. The majority of people are healthy, and know that affordable healthcare is on their doorstep whenever they may need it. This means far fewer working hours are lost, significant money is saved, and people's quality of life is greatly improved.

1: Clinard MB. Slums and community development. London: The Macmillan Company; 1970

2: World Health Organisation, 2005

3: World Health Organisation, 2000-2008

4: World Health Organisation, 2000-2008

## COMPASSION IN HEALTH

Sachin's condition was deteriorating, but even though he appeared to have a life-threatening illness there was no-one to take him to a hospital. His father was always ill, and his mother spent nearly all her waking hours at work to support him and his four siblings. Giving Sachin self-prescribed homeopathic pills was the extent of her involvement in his care and treatment.

Pooja, one of Asha's Community Health Volunteers, was on her usual rounds when she was confronted with Sachin's pitiful state. She immediately took him to a local hospital where he was diagnosed with tuberculosis. From then on, Pooja immersed herself in caring for Sachin. She made sure he took his medication daily, bandaged sores he had developed and provided him with wholesome meals. In addition to this, she gave him the love and support that his biological mother could not give him.

Today, after six months of intensive treatment, Sachin is free of tuberculosis. He visits the Asha clinic in his slum regularly, as it has become a second home to him. While some children in similar poverty live their lives without a family, Sachin has been blessed with two. He was lucky to have someone like Pooja, someone who has dedicated months of her life to him – not out of obligation but out of sheer goodwill.



## ASHA'S ACTIVITIES: COMMUNITY EMPOWERMENT

The vast majority of slum residents are unaware of their rights as Indian citizens, and often fearful of seeking change. Their lack of formal housing combined with scarce education allows them to be exploited by slumlords and ignored by the authorities. Women and children are particularly vulnerable, and at a high risk of physical, emotional or sexual abuse. Their rights to basic healthcare, sanitation and education are usually unmet, making them likely to remain in poverty.

Asha motivates community members to improve their lives, helping them form into groups and training them to work together to gain access to their basic rights. Many activities are carried out by women's and children's groups, as they are more easily available and willing to spend time on voluntary work. Women are given training in first aid and primary healthcare. Asha also coaches women in lobbying skills and shows them how to apply to government departments for improved water supplies, sanitation and other environmental necessities. A further important aspect of training deals with social problems and ways in which they can be addressed.

### A TRUE LEADER

Rekha is one of Asha's most valued and respected community leaders, but she experienced countless years of hardship before becoming the woman she is today.

Her family married her off before she was even in her teens, and immediately her childhood was lost. Just like too many other women in India, Rekha had been taught that oppression was the price she had to pay for being born female.

The constant domestic abuse in Rekha's married life was perpetrated by her in-laws. Her day began with an unprovoked and vicious taunt from her mother-in-law, who followed that with a beating when Rekha did not provide the ideal family meal. The day nearly always ended with sexual harassment from her father-in-law.

When she could tolerate no more, Rekha moved back home. Her husband eventually followed her, and they decided to try and rebuild their life together in Delhi. Their first home didn't even have a roof, and rain flooded the slum hut as Rekha gave birth to her first child. Lying there, she despaired as she imagined the dismal future that lay ahead for her family.

However, Rekha never imagined that an Asha staff member would come to her doorstep and change her life forever. Today, nineteen years after beginning her training, Rekha is at the forefront of an influential women's empowerment movement in her slum.

Rekha returned Asha's favour by giving countless other downtrodden and abused women the opportunity to have a better life. Now they too help vulnerable people become independent and empowered, in an ongoing echo of her journey.



Each woman takes responsibility for a lane within her slum, and during weekly meetings the groups discuss local issues and devise ways to tackle them. They address environmental and infrastructure problems, visit police departments to deal with crime, get involved in any cases of abuse and also promote Asha's healthcare services. TB patients, malnourished children, pregnant women and the elderly are all identified and the women monitor their condition regularly.



A newly formed women's group meets for the first time

Children's groups are run in a similar way, with members taking on extra community responsibilities in the form of caring for local elderly people, many of whom have been abandoned by their families. Many men also carry out voluntary work for their communities after being trained by Asha – joining in with lobbying work, speaking with their peers about the need for equality for women, and encouraging them to become involved in family planning decisions.

These dedicated community group members help to spread awareness within their communities, holding rallies, organising public meetings and speaking to individuals on diverse subjects including gender equality, the dangers of drug and alcohol abuse, any new health risks and the value of education.

Over the past year, the children's groups have been placing particular emphasis on getting their peers admitted to school, and have raised money to buy Diwali sweets for the elderly by making and selling decorative pots during the festival. Often assisted by the children, the women worked hard to make community members aware that loans were available to them, and held a number of public meetings on gender issues. Elderly people also benefited from the women's work in helping to secure pensions and other government welfare schemes for them.

Trained and empowered community volunteers become the eyes and ears of their neighbourhoods, taking responsibility for people's welfare and protecting their rights. What may initially be seen as interfering is soon received gratefully, and their efforts are respected by the community at large. Thanks to them, vast numbers of people gain the benefits of affordable healthcare, financial inclusion, better education and a safer environment, and there is not a single volunteer who does not get great satisfaction from seeing their communities transformed.

## ASHA'S ACTIVITIES: EDUCATION

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For many of the inhabitants of Delhi's slums, educating their children is the last thing on their minds. As families struggle to survive, many children are forced to work to supplement the family income, or older children take care of their younger siblings so both parents can go out to work. Only 54% of Delhi's slum children are currently attending school, and 31.5% have never attended.<sup>1</sup> With high dropout rates, these percentages plunge for secondary school attendance, particularly for girls. According to Unesco, 34% of the entire population of India is illiterate<sup>2</sup>, and the educational experiences of slum children will have little impact on this statistic.

Even those slum children who do attend school remain at a great disadvantage. Every child up to the age of 14 is entitled to free schooling, but the government schools they attend can be poorly resourced and have low teaching standards. English and computing skills are barely taught, and the option of higher education is hardly ever mentioned.

Asha reduces educational obstacles by involving committed community groups in gaining school enrollment for slum children. Members of women's and children's groups take note of children who are not in school, or who have dropped out, and visit their parents to explain the importance of education. Links with schools and headteachers allow community volunteers or Asha staff to discuss attendance problems directly, and ease the admission process. The staff and volunteers also assist families in gaining access to government schemes that help with the cost of school uniforms and textbooks.



Children learning how to use computers at one of Asha's resource centres

In addition, Asha enriches slum children's education by providing English lessons and basic computer courses, and access to computers, the internet and libraries with books, newspapers and magazines in English and Hindi. Resource centres are based within slums, giving children a safe place to play and to learn.

In the past two years, Asha's groundbreaking work has helped numerous young people gain access to higher education – both to the colleges of Delhi University and vocational courses, depending on their interests and aptitudes. Career counselling sessions, encouragement and practical help in the form of books and scholarships have made it possible for young people to overcome the many obstacles to gaining a better education.

### USHA'S STORY

Usha has three siblings, a mother who works as a maid and a father who is unemployed. With such a low family income, even completing high school seemed far-fetched at one time. Like so many other struggling slum residents living in deprived circumstances, her family members were not in favour of higher education originally, and particularly not when it came to girls.

At the age of ten, Usha joined Asha's children's association and was soon elected as its President. That event prompted Usha's mother to recognise her potential and consider what she might achieve if she were able to study further. With the support of her mother, and of course Asha, Usha was able to complete school and apply to various colleges.

Today, Usha is a proud student of a Bachelor's degree at Maitreyi College, Delhi University. Looking back at her life, Usha feels a great sense of pride at achieving what many considered impossible.

As we speak, she stares at her clothes and goes on to say something particularly poignant; the clothes she is wearing belonged to the daughter of her mother's employer. Today, that girl is studying in the same university as Usha. After spending years longing for equality, Usha is finally experiencing it, and as she begins a new chapter in her life, Asha will remain standing by her side.



Last year, the dazzling success of this new intervention drew attention from media in India and beyond – 135 students were admitted to college, supported by Asha. The year before, 29 students were the first to gain places, and we hope to see the upward trend continue, until every capable child receives the education he or she deserves. Hundreds of well-wishers filled an auditorium to congratulate the students on their success on 8th August 2009, including the Hon Mr P Chidambaram, India's Home Minister.

Younger children have also been inspired by the success of these students, who are finding time to encourage keen prospective students by acting as mentors. Members of Asha's children's groups have been seeking out children who don't attend school, or who have dropped out, and have helped to get them into school after convincing their parents of its importance. Asha also distributed textbooks to children in Classes 11 & 12 (the final 2 years of high school) and younger children held rallies within their communities to highlight the importance of education.

The results of Asha's interventions are incredibly encouraging. The opportunities for enhanced learning have been seized with enthusiasm: 604 girls and 700 boys completed computer courses last year, and 330 girls and 264 boys took English classes as the older ones dedicated themselves to gaining college places. Children who would have once followed their parents into jobs earning daily wages such as vegetable sellers, tea stall holders or rickshaw drivers now have the confidence to attend university with much more privileged youngsters. They can explain the importance of education to their families, and a gradual acceptance of higher education as an option can be seen growing in the communities.

<sup>1</sup> Survey conducted from November 2007 to March 2008. Source: Deprivation of Education: A Study of Slum Children in Delhi, India (p. 5) <http://unesdoc.unesco.org/images/0018/001865/186592e.pdf>

<sup>2</sup> Unesco Institute for Statistics, 2007. <http://stats.uis.unesco.org>

## ASHA'S ACTIVITIES: FINANCIAL INCLUSION

Millions of Delhi's slum dwellers have struggled financially for years with no access to financial services. Those who tried to approach banks were turned away, and others just felt that banks were only for the well-off members of society. With no other options, they rely on the services of moneylenders who charge crippling interest rates of around 5% per month, and always end up worse off. Insecure employment and physically insecure housing means that saving is extremely difficult, so people end up living from day to day with any illness or unemployment having devastating effects.

Asha is determined to remove the obstacles that keep slum dwellers enslaved in the cycle of poverty. We worked with the Government of India's Ministry of Finance to develop a scheme that would enable slum dwellers to open zero-balance bank accounts and obtain low interest loans. Staff and community volunteers publicise the scheme, explain the benefits to people who could make use of it and assist subsequent applicants with the custom-designed forms.

Over the past year, 10,617 bank accounts have been opened and over Rs. 73,85,461 (approximately 156,000 USD) granted in loans. Asha staff members have shown many account holders how to use ATMs and assisted them in setting up recurring deposits to help them to save a set amount on a monthly basis.

It's extremely rewarding to see people who may be illiterate having the confidence to use an ATM, and the financial security that comes with a bank account and access to credit. Some people have tripled their incomes, and several have repaid their first loans and have been able to take a second, larger loan. The support of Asha staff and community volunteers and the excellent relationships developed with a number of banks mean that people are now making use of an entire range of financial services.

### BUILDING FOR THE FUTURE

Rainu's hands are coarse and wrinkled. For years, she has earned a living by washing dishes, and her one-room dwelling challenges our perceptions of what a house looks like. Her family income barely allows her to support her four children.

When Asha's loan scheme for slum dwellers was launched, Rainu's financial circumstances were pitiful. She had never dealt with a bank before and needed Asha staff to explain the scheme in detail. However, Rainu is a member of Asha's women's group and has had the courage to learn all kinds of new skills and tackle problems as part of her voluntary commitments.

After some consideration, Rainu took a loan of Rs. 100,000 (about \$ 2,100). She and her husband used the money to build 2 more storeys above the first level of their home. Renting out those rooms will double the family's annual income.

Rainu's future plans focus on her children. Her first aim is to pay off the loan, her second aim is to set up a savings account and her third is to invest that money in her children's education. To Rainu, luxuries are of no importance compared with the respect and dignity of her children. As she said before leaving, "I am overjoyed as, today, I can give my children some pocket money and they are now equal to their friends, none of whom will ever look down upon them again".



New bank accounts being opened for slum dwellers



One of the most pleasing aspects of the scheme's success is the astonishing repayment rate of 99% - one that is rarely matched by middle class loanees who usually have a repayment rate of around 95%. Many slum dwellers have seen drastic improvements to their financial status and quality of life as a result of the scheme. Some have tripled their incomes, others have been able to send their children to a private school, opened or expanded businesses, purchased vehicles that improved their employment options, entered higher education or improved their homes.

On a larger scale, the scheme has also facilitated the inclusion of India's poor in the mainstream economy and given them the tools needed to improve their situation and find a way out of poverty.



## ASHA'S ACTIVITIES: THE ENVIRONMENT

Of Delhi's 14 million inhabitants, approximately 4 million live in slum communities which often lack even the most basic amenities. Chronic overcrowding and lack of sanitation create countless environmental problems, such as absent or extremely limited water supplies and toilets: one water pump may be shared between 1000 people, and one toilet between 30 households. Lack of community involvement means that nobody takes responsibility for these facilities, and they are often in disrepair. People may have to travel long distances for water, and lack of useable toilets causes many to defecate in the overflowing drains or out in the open. Electricity tapping is common, and roads are often dirt tracks that flood in the monsoon, damaging shelters that are already inadequate.

Two of the major agents of change in Asha's work to develop these communities have been the children's and women's groups. They have been trained by Asha staff on a variety of issues such as community cleanliness, prevention of air and water pollution, waste disposal, and household safety measures. The community volunteers urge residents to care for their surroundings and discourage defecation in the drains or out in the open. They also petition municipal authorities for infrastructural improvements including safe drinking water, adequate toilet facilities, and proper drainage systems.



Women's group members after lobbying successfully for a tubewell

This year, the children's association members have led several environmental improvement initiatives. They planted seedlings in order to beautify their communities and distributed garbage bins that enable households to dispose of waste properly. The children also regularly performed sanitation drives, during which they raised awareness of environmental concerns and encouraged slum residents to keep their communities clean.

Asha has also helped slum residents gain access to low-interest loans, enabling many families to afford home improvements that make their dwellings safer and more comfortable. As a result of these and other efforts, living conditions in the slums have greatly improved as community members have begun to take increased responsibility for their surroundings. After liaising with the relevant government departments, around 10% more taps, tubewells and handpumps have been installed in Asha project areas in the past year, as well as 6 toilet complexes and 15 bathrooms.

These latest activities and successes have increased access to safe water, given people homes that are more than just shelters, provided pleasant surroundings and reduced the risk of disease – all adding to the sustainable development of communities.

## FACTS AND FIGURES

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**292** patients have been cured of TB in the past year- an illness which kills 1,000 people in India every day.

**99.99%** of pregnant women in Asha slums had skilled attendance during delivery, compared with 47% country-wide.<sup>1</sup>

Only **7%** of babies born in Asha slums this year were of low birth weight, a proportion significantly lower than the 31% average in South Asia.<sup>2</sup>

**All** pregnant women had 3 antenatal checks – in India, only 77% of women have at least 1 check.<sup>1</sup>

**100%** of newborns were breastfed within 6 hours of birth. In India, only 25% of infants are breastfed early on.<sup>4</sup>

The Under-5 Mortality Rate (number of deaths of children under 5 per 1,000 live births) is significantly high at 112.2 among India's urban poor. The average for Delhi as a whole is 46.<sup>3</sup> In Asha slums, the Under-5 Mortality Rate is **28.2**.

**95%** of children have received WHO-recommended vaccinations against 10 preventable diseases.

Asha treated over **50,000** patients this year.

Asha currently cares for **122** elderly people who have nobody else to help them.

Last year **604** girls and **700** boys completed computer courses.

Last year, **330** girls and **264** boys learned English in classes held at Asha resource centres.

1: WHO World Health Statistics 2010

2: Low Birthweight: Country, regional and global estimates (UNICEF and WHO)

3: "THE STATE OF URBAN HEALTH IN DELHI" - Dr. Siddharth Agarwal, Mr. Anuj Srivastava,

Dr. Biplove Choudhary and Dr. S. Kaushik for the Ministry of Health and Family Welfare, 2007

4: Unicef, 2003-2008. [http://www.unicef.org/infobycountry/india\\_statistics.html](http://www.unicef.org/infobycountry/india_statistics.html)

## VOLUNTEERS



Mrs Polly Holborow, wife of the New Zealand High Commissioner to India, conducts a weekly workshop on English conversation. She has been working with children from Asha slums for over a year now.

Katharina Mathias visits Asha from Germany. She spent two months teaching English in one of Asha's first slums, Ekta Vihar.



Dr Richard Hogben, a GP from Yeovil, UK, hosts a medical seminar on diabetes for the Asha doctors and nurses.

Students from Harvard University conduct a college preparation workshop for high school graduates. Many of these children have now been admitted into university and will soon have a Bachelor's degree to their name.



**Using fully established resource centres as a means for education and recreation**

Students from Rainey Endowed School, Northern Ireland, spend time in close interaction with the slum children visiting these centres.



**Refurbishment**

Members of Restore Church, UK, paint beautiful murals inside the resource centres. This is one amongst many craft workshops conducted by them.

**Establishing a clean and hospitable environment**

Members of the City Life Church, UK, lead a sanitation drive



**Building a future**

The Ballymena Builders constructing a house for a particularly needy family in Savda Ghevra



## FAQs

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### **What does “Asha” mean?**

Asha means “hope” in Hindi. Our many interventions give slum inhabitants hope by showing them that, with our help, they can transform their lives.

### **How do people end up living in Delhi's slums?**

In a city of over 14 million people, there are now around 4 million slum dwellers. The majority of these people have migrated from villages in rural India to look for work and better opportunities. However, when they arrive they find that life in Delhi is very expensive and even if they find work they can't afford a place to live. They end up living in primitive shacks with little shelter and no sanitation, cooking facilities or other basic necessities.

### **What makes Asha's approach different?**

Asha's approach is based very largely on training and empowerment. We enable slum dwellers to take responsibility for improving their living conditions and their health. Their poverty, lack of education and other factors make it difficult for them to do this without support. Asha provides training, encouragement and practical help that allows people to develop the skills and confidence needed to make positive changes to their lives.

### **Can I come and volunteer?**

We welcome contact from people who are willing to offer their time and skills to help our work. Volunteers can teach English to groups of children in the slums, renovate medical clinics and resource centres or assist with research projects, among other things. Further details can be found on Asha's website.

### **How is Asha funded?**

Asha is funded entirely by the assistance of our friends and partners in India and overseas: these include international governments and NGOs, trusts and foundations, the Indian government, and individual supporters.

### **What proportion of the funds are used for administration?**

Only 7% of funds are spent on administration, and the remaining money goes towards running our projects. Asha's financial audit for the past year is included in this report.

### **How does Asha choose which slum to work in?**

Slums are chosen depending on the level of need observed. Asha has selected project areas in the past by visiting slum areas, speaking with community members and identifying their needs. To avoid duplication of effort, we avoid areas where NGOs are already involved in similar work. As slum transformation takes time, the size of each area is also a factor when targeting new communities as we need to have sufficient funds available for the work.

### **How are projects evaluated?**

Asha sets clear objectives and targets for each project, and both quantitative (measurable, number-based) and qualitative (interview and observation-based) results are used to measure their success. Regular evaluations seek the opinions of community members involved in the project, Asha staff, and sometimes external assessors from funding organisations. In addition, exchange visits allow staff and community volunteers in one slum to learn from the successes and difficulties experienced by those working in other areas.

### **How can I learn more?**

Please visit us online at [www.asha-india.org](http://www.asha-india.org). You can contact us with any specific queries by emailing [info@asha-india.org](mailto:info@asha-india.org).

# INDEPENDENT AUDIT REPORT



**R. MEDIRATTA & ASSOCIATES**  
CHARTERED ACCOUNTANTS

## AUDITOR'S REPORT

ASHA COMMUNITY HEALTH &  
DEVELOPMENT SOCIETY  
EKTA VIHAR, SECTOR-6  
R.K. PURAM  
NEW DELHI- 110022

Dear Sir,

We have audited the attached Balance Sheet of Asha Community Health and Development Society as at **31<sup>st</sup> March 2010** and the Income and Expenditure Account for the year ended on that date annexed thereto, and report that:

- a) We have obtained all the information and explanation which to the best of our knowledge and belief were necessary for the purpose of our audit.
- b) In our opinion proper books of accounts as required by law have been kept by the Society so far as appears from our examination of the books.
- c) In our opinion and to the best of our information and according to the explanations given to us the said accounts give a true and fair view.
  - (i) In the case of the Balance Sheet of the State of Affairs of the above named Society as at 31<sup>st</sup> March 2010.
  - (ii) In the case of Income and Expenditure account of the excess of Income over Expenditure for the period ended on that date.

Thanking you,

Yours faithfully  
FOR R. MEDIRATTA & ASSOCIATES  
CHARTERED ACCOUNTANT



(RAKESH MEDIRATTA)  
FCA  
PROPRIETOR

PLACE: NEW DELHI  
DATE: 19.7.10

## ASHA COMMUNITY HEALTH &amp; DEVELOPMENT SOCIETY

## CONSOLIDATED BALANCE SHEET AS AT 31.3.2010

LIABILITIES	AMOUNT		ASSETS	AMOUNT	
<b>GENERAL FUND</b>			<b>FIXED ASSETS</b>		
Balance as per last year	101230039.20		(As per Schedule 'A')		94704477.37
Add: Donations Received towards Corpus	534770.56		<b>CURRENT ASSETS</b>		
Add: Capital Donation(For Assets)	826282.87		<b>LOANS &amp; ADVANCES</b>		
Add: Excess of Income over Expenditure for the year	2652101.48	105243194.11	<b>CURRENT ASSETS</b>		
			Closing Stock of Medicines & Lab Supplies	141778.36	
<b>RESTRICTED FUND</b>			Cash in Hand	273822.00	
(As Per Schedule 'E')		26578857.28	<b>Cash at Bank</b>		
<b>STAFF GRATUITY FUND</b>			In Saving Banks Accounts	5887194.54	
Balance as per last year	3760219.32		(As Per Schedule 'B')		
Add: Contribution during the year	800000.00		In Fixed Deposit Accounts	35420853.16	
Add: Interest From Bank	305798.00		(As Per Schedule 'C')		
	4866017.32		<b>LOANS &amp; ADVANCES</b>		
Less: Amount Paid during the year	243814.00	4622203.32	(As per Schedule 'D' )	465372.28	42189020.34
<b>CURRENT LIABILITIES</b>					
Security Deposit (Salary)	436350.00				
Provident Fund	12893.00	449243.00			
		<b>136893497.71</b>			<b>136893497.71</b>

ACCOUNTING POLICIES & PRACTICES AND NOTES ON ACCOUNTS.  
(AS PER SCHEDULE 'F')

Signed in terms of our report of even date

R. MEDIRATTA & ASSOCIATES  
CHARTERED ACCOUNTANTS(RAKESH MEDIRATTA)  
FCA  
PROPRIETOR

For ASHA COMMUNITY HEALTH &amp; DEVELOPMENT SOCIETY

Kalanter  
(DIRECTOR)

(TREASURER)

PLACE : NEW DELHI  
DATE : 19/7/10

NB: Schedules can be provided on request.



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**THANK YOU** TO ALL OUR SUPPORTERS, CAMPAIGNERS, STAFF, AND VOLUNTEERS FOR YOUR SUPPORT DURING THE YEAR AND FOR SHARING OUR AMBITIONS FOR A WORLD OF EQUALITY.

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Asha Community Health & Development Society is registered under the Societies of Registration Act of 1860. The Registration Number is S/20849 of 1990.

Asha is authorised to receive funds under the Foreign Contribution Regulation Act, FCRA Registration Number: 231650841. Contributions to Asha are exempt under Section 80G of the Income Tax Act. Asha is granted Income Tax exemption under Section 10 (23c) (6a).



**Asha Community Health  
and Development Society**  
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