

# THIRTEENTH ANNUAL REPORT

**2004-2005**

**SAHAYOG**

C-1485, Indira Nagar,  
Lucknow 226 016, India

# *Contents*

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## *Our Approach*

1. Women and Health
  - a. Safe Motherhood
  
  - b. Reproductive rights
  
2. Women's Human Rights
  - a. Working with Men
  
  - b. State accountability
  
3. Resources of SAHAYOG
  - a. Information Documentation Centre
    - i. Material production
    - ii. Information dissemination
    - iii. Advocacy with media
  
  - b. Human Resources
    - i. Staff, volunteers and interns
    - ii. Partner Organizations
    - iii. Human Resource Development
    - iv. Activities with other organizations
  
4. Structure of the Organization
  
  
5. Financial Summary

## ***Our approach...***

*SAHAYOG is a value-based organization, which believes in the rights based approach for development and social justice. Though SAHAYOG is committed towards promoting every individual's human rights, it believes that a democratic welfare state is accountable for fulfilling and protecting the rights of people.*

*SAHAYOG works towards increasing participation of socially marginalized communities. By building capacities of and providing information to women, dalit, illiterate, rural, minority and other marginalized groups, SAHAYOG facilitates their realization of and access to their rights. SAHAYOG believes unless individuals and groups participate in decision-making that affects their lives, sustainable development is not possible. SAHAYOG works to enhance people's participation in important decisions like problem identification, planning, policy formulation, monitoring and evaluation.*

*SAHAYOG's work includes interventions at the community level in partnership with local NGOs, working with rural women, men and adolescents. As a resource center it reaches out to NGOs, educational institutions, state actors and the media. SAHAYOG has been active in networking for various issues at state, national and South Asia level. With SAHAYOG's regular research, documentation and evidence base, it has been active in various campaigns and advocacy efforts in partnership with other organisations and individuals.*

*The next few pages describe SAHAYOG's work in detail from 1 April 2004 to 31 March 2005. We dedicate this report to the women and men who work with us towards ensuring equality, dignity and rights for all.*

Jashodhara Dasgupta  
Coordinator  
SAHAYOG

## SECTION ONE: WOMEN'S HEALTH:

SAHAYOG's women's health programme visualizes health in the human rights framework. It understands that women's health gets severely affected by lack of effective policies, appropriate services and discriminatory cultural practices. State health programmes are unable to ensure basic needs like safe motherhood services, while simultaneously the government's population control policies are negatively affecting women's reproductive rights and health.

In the last one year SAHAYOG has extensively worked on women's health at the community level, as a resource center and as a network partner for advocacy. With the help of partner NGOs SAHAYOG has supported interventions with community women, men and adolescents. Along with this it has also networked and lobbied with the government, funding agencies, media, researchers and academics. It has broadly worked in two areas of women's health –

- a. **Safe motherhood**
- b. **Reproductive rights**

### A. Safe Motherhood

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#### Objectives:

*To increase community women's access and control over maternal health services through advocacy and monitoring using a rights based approach*

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#### Achievements:

- i. **At the community level in seven districts of Uttar Pradesh :**
  - Women and adolescent girls have started taking initiatives to exercise their right to safe motherhood as follows
    - *In Mirzapur 300 women from 18 villages did a demonstration in front of the PHC and submitted a memorandum to the medical officer incharge asking for improved services .*
    - *Women in seven districts have demanded their health services from ANM and the panchayat. As a result of this ANM has started visiting some villages once a month.*
    - *In Azamgarh district women have formed a health monitoring committee which would monitor safe motherhood in the village*

- *In Charwah block of Gorakhpur two marriages of underage girls were stopped by community action.*
- Women have started monitoring anganwadi workers for supplementary nutrition
- A collaborative effort with a partner in Uttaranchal led to a Social Audit of maternal health services with involvement of *panchayats* across 20 villages in two districts of Uttaranchal
  
- ii. At the Policy level:**
- Community women have been able to engage in direct dialogue with policy makers and senior health department officials.
- Collective advocacy and campaigning efforts with other organisations led to the issuing of a government order (dated 12 March 2004) to form review committees for assessing the causes of maternal deaths in Uttar Pradesh
  
- iii. With the Media:**
- Compared to earlier press coverage that did not address the issue, this year 39 reports were published in newspapers on the status of safe motherhood services, which means the neglected issue is gaining more visibility. The coverage highlights women's experiences and critiques the government's quality of maternal health services.
  
- iv. With Partner Organizations:**
- Capacity building of 17 women and men staff of nine partner organizations from seven districts of Uttar Pradesh has led to an understanding of the rights perspective on safe motherhood at the community level.
- At the international level, the effectiveness of SAHAYOG's partners in applying the rights based approach to maternal health led to an exchange visit with visitors from six countries (Denmark, Malaysia, Nepal, Pakistan, Bangladesh and India).
- One of SAHAYOG's partners was chosen to represent the country at the project information and advocacy activities by our partner, the Danish Family Planning Association in Denmark.

## **Activities:**

1. **Marking 28 May with a state level Dialogue:** The International day of Action on Women's Health 28<sup>th</sup> May was marked by an event on 27<sup>th</sup> May 2004 at Lucknow. 22 community women, 5 government officials (including the Director General, Family Welfare Department), 8 representatives from donors and technical agencies (including the Executive Director of the USAID project implementation unit), 14 media persons (including TV), 4 student interns and 25 participants from NGOs participated in it.

2. **Social Audit** with communities of twenty villages across two districts in Uttaranchal in which the district Chief Medical Officer and local department staff participated along with women, *Panchayat* leaders and media persons.
3. **Case documentation** of three cases regarding negligence in maternal health services, and participating in **case advocacy** for one case of Lucknow district with the media.
4. Four participatory **planning and review meetings with partners** were held through the year to assess progress in the programme and take inputs.
5. **Capacity building with staff** of 9 CBO partners included 4 day **Training of Trainers** with 18 staff and 4 day **Training on Rights Based Advocacy** with 19 staff.
6. **Community capacity building** included meetings to present information on safe motherhood, workshops to build capacities on rights approaches and skills on doing community level advocacy among community women, men and adolescents across eight districts.
7. **Action research study** – *Ensuring Male Responsibility in Reproductive Health* (with two partner organizations in Azamgarh and Gorakhpur)
8. Conducted a study titled *Women’s Perception on Quality of Care of RH services* with the local partner *Gramin Punarnirman Sansthan, Gorakhpur* which was part of a four state study on the issue coordinated by two national research institutions – CEHAT and Healthwatch.
9. Organizing the Zonal Preparatory Meeting and the Uttar Pradesh state level meeting towards the North Zone regional consultation for the **10<sup>th</sup> International Women’s Health Conference**.

## **B. Reproductive Rights**

(As partners in the network Healthwatch UP-Bihar)

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### **Objectives:**

*To promote women’s reproductive rights including the right to reproductive health, by engaging in evidence based policy advocacy with state actors, donors and the media, and monitoring the quality of RH programmes.*

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## Achievements

### i. At policy level

- ❑ Collective advocacy efforts with other organisations led the new UPA government's Common Minimum Programme statement regarding '*a strict population control approach*' being changed to '*population stabilization*' with a focus on informed choice.
- ❑ The Public Interest Litigation in the Supreme Court put up by the group Healthwatch UP-Bihar led to court ruling for payment of compensation to women who have suffered or lost their lives due to poor quality of care
- ❑ There was an invitation from the Danish Ministry of Foreign Affairs to make a presentation on Reproductive Rights and Gender Equality with a view to making recommendations for policy development.

### ii. With the media

- ❑ The Public Tribunal on Coercive Population Policies and Two Child Norm led to widespread and in-depth coverage of the issue by print as well as e-media
- ❑ Apart from state level, national and international journalists are using us as a resource for information and materials
- ❑ Two articles were written in two leading Indian journals on the issue of quality of care of Reproductive Health services – Economic and Political Weekly and Indian Journal on Medical Ethics.

## Activities

1. In association with other organizations, there was an advocacy campaign on ***Coercive Population Policies and Two Child Norm***, that included coordinating a national level Public Tribunal, with testimonies from 14 states, several expert opinions, and jurors including MPs, Planning Commission, Women's Commissions, eminent activists and academicians. This gained wide media coverage; additionally, there was an Internet advocacy campaign, setting up an e-group Repro-health India, writing in journals and magazines on this issue and building alliances with the People's Health Movement (JSA) India to take up this issue. A nation wide campaign was launched after the Supreme Court admitted a PIL for making the Two-child Norm universal.

2. Uttar Pradesh state level meeting on ***Quality of Care in RH services*** was organized in association with the Population Foundation of India, attended by medical practitioners, academicians, researchers, donors, networks, field-based organisations and state representatives. A similar sharing meeting was organized in association with CEHAT Mumbai to present the findings of a study **Abortion Assessment in India** (AAP-I).

3. There was participation in the Northern Regional Public Hearing of the National Human Rights Commission in Lucknow, UP on Right to Health with the ***People's Health Campaign (Jan Swasthya Abhiyan)*** in which documentation format was also designed for recording rights violations.

4. A pilot project on *Ensuring QoC in RH services* was implemented in Haryana with UNFPA support. The results of the pilot project have been incorporated into the follow up phase, which is being implemented by the Haryana state government.

## **SECTION TWO: WOMEN'S HUMAN RIGHTS:**

SAHAYOG believes that continuing gender discrimination and violence against women are serious violations of their human rights. Existing state institutions as well as cultural practices perpetuate these violations. In order to promote women's equal enjoyment of human rights, SAHAYOG believes in working with women as rights claimants, women as survivors, the state's accountability and with men as responsible partners.

Men's roles and responsibility in promoting women's human rights, including gender equality and the right to live a violence free life, has been recognized as extremely important. This has led to specific interventions to engage them as change agents, and provide them with a supportive peer environment to explore a different masculinity.

In order to ensure state accountability for women's rights SAHAYOG has been jointly working since 2003 with other groups for the monitoring of the implementation of rights as agreed to by the Government of India in the form of CEDAW. Through advocacy it is making efforts to highlight the gaps and improve the situation on the ground.

In the last one year SAHAYOG has extensively worked on women's human rights at the community level, as a resource center and as a network partner for advocacy. In collaboration with a number of other organisations and individuals, a Support Centre for Women named **Humsafar** has been established at Lucknow that has addressed over one hundred cases of violence. With the help of partner NGOs SAHAYOG has supported interventions with community women, men and adolescents. Along with this it has also engaged in advocacy with the government and the media.

SAHAYOG has broadly worked in two areas of women's human rights –

- a. Work with Men**
- b. State Accountability**

### **A. Work with Men**

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#### **Objectives**

- *To transform gender relations by bringing about a change among men*

- *To facilitate the network of men MASVAW to work against violence against women and challenge gender based values, practices and policies.*
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## **Achievements:**

### **i. At the community level**

- Through MASVAW, men's groups have been formed at the community level for doing social advocacy on violence against women. These groups are monitoring domestic violence against women
- Within universities and colleges, youth have formed monitoring groups to check incidents of violence against women on campus
- Local secretariats of MASVAW network have started taking initiatives at their level and responding to cases of violence against women. Due to this community demand for help on incidents of violence against women has increased.
- In nine cases of violence against women the secretariat promoted coordination between members, fact finding with other organizations and advocacy.
- At Lucknow, a Supporters' Group comprising of youth, lawyers, doctors and other citizens has been set up to work with the **Humsafar** centre on public education regarding violence against women.

### **ii. At the level of partner organisations**

- MASVAW has developed an identity at the local, national and international level as network of men working in violence against women.
- 19 gender trainers have been prepared to work with men on gender and violence against women.

## **Activities**

1. Under the **Common India Campaign (16 days of activism, 25<sup>th</sup> Nov-10<sup>th</sup> Dec 2004) in 27 districts of Uttar Pradesh and Uttaranchal** various partner organizations of MASVAW organized meetings, workshops, seminar, film shows between to increase awareness on violence against women.
2. Through ***Break the Silence, Stop Violence* campaign between 1-20<sup>th</sup> March 2005 in 18 districts of 200 villages** a community-based campaign was launched on men's responsibility on breaking silence and taking action on incidents of violence against women. The campaign included processions, street play, group discussions, competitions and wall writing.

3. **Five film shows and discussion programmes** were organized in two Universities to promote male responsibility towards promoting gender equality and ending gender-based violence.
4. **A five-day Training of trainers** programme was organized to create a resource pool of male trainers who can conduct trainings with males in the Hindi speaking region on gender equality and violence against women. This was followed up with supported opportunities to practice the skills at community level trainings.
5. A Research Fellow from University of Washington conducted a **Qualitative research on Understanding Change** in men who are members of MASVAW.
6. **A number of meetings and workshops** were organized with partner organizations in Uttar Pradesh and Uttaranchal to encourage social organizations and workers should take responsibility and action to stop violence against women. These included regional and central coordination committee meetings. A National Advisory group meeting was also convened to review and give direction to MASVAW.

## **B. State Accountability**

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### **Objectives**

*To increase women's awareness of their equal rights within CEDAW and build capacities to monitor CEDAW and advocate for state accountability to promote, protect and fulfil those rights*

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### **Achievements:**

#### **i. At the Community Level:**

- ❑ Women of four districts of Jharkhand built understanding on state accountability to prevent the incidents of witch hunting
- ❑ In one district in Uttar Pradesh, largely poor, *dalit* women and adolescents of ten villages were mobilized to seek their rights to maternal health services from state providers

#### **ii. At the Policy Level:**

- ❑ Putting women's rights on the citizen's agenda of the General Elections 2004 by lobbying with some candidates and other civil society organisations working with the political process in the state.
- ❑ Collective advocacy and campaigning efforts with other organisations led to the issuing of a government order (dated 12 March 2004) to

form review committees for assessing the causes of maternal deaths in Uttar Pradesh

## Activities

1. In one district of Uttar Pradesh, 42 women and adolescents of 9 villages participated in a **leadership-building training programme** on the issue of the right to safe motherhood. As a follow up, 250 women and adolescents from the ten villages organized a village Sammelan to share their experiences of health services, and prepared a signed petition to be handed over to the officer at the local health center.
2. In Jharkhand, a series of district level workshops were organised in Hazaribagh, Devghar, Bokaro and Ranchi districts of Jharkhand, involving 173 community women and participants from local NGOs to build community opinion on violation of **women's rights with a focus on witch hunting**. This was followed by a state level consultation on 15-16 October 2004 at Ranchi attended by 60 participants, including women survivors of witch hunting, women activists, NGO representatives, lawyers, media persons and faith-based groups from various districts.
3. *Haq aur Haqeeqat*, a collection of case studies of women's stories of struggles in facing rights violation in Uttar Pradesh was formally launched by the Chairperson of the State Commission for Women, Uttar Pradesh
4. In order to enable community women to **advocate with their local electoral candidates** on women's rights and state accountability, a poster and a pamphlet was launched for the General Elections that took place in India in April - May 2004. Several strategizing meetings, press conferences and sharing meetings were organised between April-May with activists and CEDAW monitoring partners.

## SECTION THREE: RESOURCES OF SAHAYOG

### A. Information Documentation Centre

The SAHAYOG IDC (information documentation centre) has been established as an excellent source of authentic information on women's health and reproductive rights in Uttar Pradesh.

The SAHAYOG library contains a specialized collection of over 2500 books and a large collection of non-book materials, including audio-visual material. As a resource centre, SAHAYOG has also brought out a number of printed materials on its major issues. Sustained work with media has led to the IDC being accessed by media persons seeking grassroots stories, data and expert opinion.

## i. Material production

I.	<b>Understanding Reproductive Health – A Resource pack</b> Reproductive Health Policy and Advocacy The Promise of better health: Women’s Health Contraception Going beyond Family Planning HIV, AIDS & STD: Coming to terms with reality Taking a stand- Violence, Women and Health	Booklet-3 Booklet-6 Booklet-7 Booklet-10  Booklet-13	English
2	<b>Haq Aur Haqeeqat</b>	Case stories	Hindi
3	Abortion Assessment Project-India (State Level Dissemination Meeting)	Report	Hindi and English
4	Improving Quality Care of Reproductive Health Services	Report	Hindi and English
5	Safe Motherhood Services-A Social Audit	Report	Hindi
6	Women’s Voices - State accountability for Maternal health in Uttar Pradesh	Report	English
7	Making a Change – Media Monitoring and Avocacy in Uttar Pradesh	Report	English
8	MEN AT WORK!	Wall planner	English
9	The Womb of Death	Booklet	English
10	Partners in Change – A state level Dialogue on the Right to Maternal Health	Report	Hindi and English

## ii. Information dissemination and use of IT

A number of SAHAYOG’s current and older publications were widely disseminated to NGOs, state actors and the media, either through seminars, stalls set up at events or direct mailing. Apart from this, 34 visitors used the library, including international and local NGOs, media persons, students, networks and political groups.

SAHAYOG has set up a website [www.SAHAYOGindia.org](http://www.SAHAYOGindia.org) which gives an overall glimpse of organization’s work and detailed information on issues as well as information resources. The second initiative to use IT is in the form of a quarterly electronic newsletter ‘**Conexions**’ focusing on social justice issues relevant to UP.

## iii. Advocacy with media

Based on the intensive advocacy SAHAYOG has been doing with local, national and international media, a large section of reporters, correspondents and columnists have started reaching out to SAHAYOG for information, story angles and data. They include journalists with –

- International media like the BBC News, The Guardian (UK),
- National media like NDTV, CNBC TV 18, TEHELKA, India Today and Frontline

- State level media such as *Dainik Jagaran*, Hindustan, Hindustan Times, *Rashtriya Sahara*, The Pioneer, Times of India

## B. Human resources

### i. Staff, interns and volunteers and fellows (in Uttaranchal state) –

STAFF LIST	INTERNS/ VOLUNTEERS	LIST OF FELLOWS
1. Jashodhara Dasgupta	1. Lucknow University -	1. Bhagwati Pandey
2. Satish Kumar Singh	□ Netrapal Singh	2. Asha Arya
3. Susheela D Singh	□ Vatsla	3. Mohan Karki
4. Shakuntala Joshi	□ Priyanka Sethi	4. Bimla Karki
5. Dayanidhi Mishra	2. Jamia Millia Islamia -	5. Jagdish Lal
6. Rabindra Singh Jeena	□ Neethi Nair	6. Kiran
7. Amit Awasthi	□ Samreen Ahsan	7. Diwan
8. Mahendra Kumar	□ Shakeb Anwar	8. Heera Janjpangi
9. Chandra Joshi	3. Awadh University -	
10. Jaikaran Dixit	□ Ruchi	
11. Reeta	□ Rachal	
12. Ela Pandey	□ Shagun	
13. Anju Verma	4. University of Washington,	
14. Seema Parveen	USA -	
15. Ganesh Dey	□ Liz Mogford	
<b>Advisor - Dr Abhijit Das</b>	5. Rachna Singh	

### ii. Partner Organizations of SAHAYOG

<b>Uttar Pradesh</b>	Azamgarh	Grameen Punarnirman Sansthan
	Gorakhpur	Budh Seva Sansthan
	Gorakhpur	Chandrakanta Gramodyog Seva Sansthan
	Gorakhpur	Baba Ramkaran Das Grameen Seva Samiti
	Gorakhpur	Purvanchal Grameen Seva Sansthan
	Gorakhpur	Chaupal
	Gorakhpur	Rudra Dheeraj Prashikshan Seva Samiti
	Gorakhpur	Shivaji Shikshan Sansthan
	Gorakhpur	Saraswati Devi Shishu Sadan

	Sidharath Nagar	Sidharth Baharatiya Grameen Vikas Sansthan
	Jhansi	Vikas Dhara
	Jalaun	Samarpan Jan Kalyan Samiti
	Lalitpur	Sadan Seva Sansthan
	Lalitpur	Community Health Development
	Jalaun	Parmarth Seva Samiti
	Hamirpur	Paramlal Shikshan Seva Samiti
	Mahoba	Gramonnati Sansthan
	Banda	Tarun Vikas Sansthan
	Banda	Prabhat Samiti
	Banda	Krishi Evam Paryavaran Vikas Sansthan
	Banda	Adarsh Ambedkar Shiksha Samiti
	Banda	Adivasi Evam Dalit Lok Kalyan Samiti
	Chitrakoot	Vanangana
	Varanasi	SARC
	Varanasi	Friends
	Saharnpur	DISHA
	Sitapur	Sangatin
	Pratapgarh	Tarun Chetna
	Ambedkar Nagar	Jan Shikshan Kendra
	Gajipur	Mahila Evam Bal Kalyan Samiti
	Lucknow	AALI
	Lucknow	NAAZ
	Lucknow	Vigyan Foundtaion
	Lucknow	NAVJAGRITI
	Bhadohi	CERT
	Mirzapur	Shikhar Prashikshan Sansthan
<b>Uttaranchal</b>	Nanital	Prayas
	Nanital	Suchetna Samaj Seva Sansthan
	Pauri	Mahila Samakhya
	Pauri	Sumangala Maha Samiti
<b>Jharkhand</b>	Hazaribagh	Jharkhand Mahila Uthan Samiti
	Ranchi	Prerna Bharti
	Ranchi	Jagaran Samiti
	Ranchi	Gair sarkari Mahila Ayog

### iii. Human Resource Development

<b>Dates</b>	<b>Programme</b>	<b>Organizer</b>	<b>Participant</b>
3-7 <sup>th</sup> Sept	Human Rights and Law Training, Two phases	AALI, Lucknow	Ravi, Shakuntala
15-22 <sup>nd</sup> Sept	Sexuality Workshop	TARSHI, New Delhi	Satish
22 <sup>nd</sup> Sept	IT Workshop	SAHAYOG	Entire staff
28 <sup>th</sup> Sept-2 <sup>nd</sup> Oct	Training of Trainers	SAHAYOG	Ravi, Shakuntala
6-12 <sup>th</sup> Oct	Sexuality and Reproductive Health	TARSHI, New Delhi	Ravi, Susheela and Shakuntala

20-24 <sup>th</sup> Dec	Theatre Workshop	Jagori, New Delhi	Mahendra
21 <sup>st</sup> -24 <sup>th</sup>	Advocacy Training	SAHAYOG	Ravi
15-19 <sup>th</sup> Feb	Basic Workshop on gender	Jagori, New Delhi	Amit, Mahendra, Seema
28 <sup>th</sup> -30 <sup>th</sup> March	Masculinity Workshop	Jagori, MASVAW	Ravi, Mahendra, Amit
31 <sup>st</sup> March	Staff Retreat	SAHAYOG	All staff

#### iv. Activities with other organisations

##### - Important Networking With Other Organizations

Month	Issue/Programme	Organizer/Place
14-17 June	WHRAP Strategy Planning Meeting on ICPD at 10	ARROW (Langkawi)
20 <sup>th</sup> June-4 <sup>th</sup> July	Asia Pacific NGO Forum for Beijing+10	ARROW (Bangkok)
17 <sup>th</sup> July	Consultation Meeting on Child Marriage and Law	Human Rights Law Network (New Delhi)
6 August	New Development Paradigms and Sex Selection	Action India and NMML, New Delhi
31 Aug – 2 Sept	Global Roundtable on ICPD at 10	IPPF, London
25-26 Sept	National Consultation on Laws, Policies and Rights for Reproductive Health	Population Foundation India, New Delhi
26 <sup>th</sup> Sept	Public Hearing on Health Rights and Services in Northern India	NHRC & People's Health Campaign (JSA), Lucknow
Nov and Dec	“We Can” campaign at national and state level	Oxfam
16-18 December	South Asia Conference on Gender and Governance	Rozan and SANGAT, Islamabad
3-5 February	Regional Conference on Maternal Health in South Asia	Shirkat Gah and SID-SAN, Lahore

##### - Providing Resource Support On Request

Month	Issue/Programme	Organizer/Place
7-9 <sup>th</sup> May	Training on developing rights perspective on safe motherhood	Purvanchal Grameen Vikas Sansthan, Gorakhpur
30-31 <sup>st</sup> July	Gender Training	Nari Vikas Seva Samiti, Gorakhpur
9-10 <sup>th</sup> Sept	Gender training of Prison officers and Jailors	IWID, Bhopal
13-15 <sup>th</sup> Sept	Training on situational analysis and documentation on safe motherhood	Purvanchal Grameen Vikas Sansthan, Gorakhpur
28 Sept	Training on Health Rights and Women's	IIM Bangalore

	Empowerment – Session on Population Policy Advocacy	
27-29 <sup>th</sup> Oct	Male participation in stopping violence against women	SAVE the CHILDREN FUND at Sawai Madhopur
9 <sup>th</sup> Oct	Dai Training	Tata Chemical Society for Rural Development
3-4 <sup>th</sup> Nov	Training on advocacy	CHETNA Gujarat
6-8 <sup>th</sup> Nov	Training on adolescent boys on gender and health	SAHAJ, Vadodara
29 <sup>th</sup> Nov-2 <sup>nd</sup> Dec	Male participation in stopping violence against women	Bread for the World, Bangladesh
9-13 <sup>th</sup> Dec	Gender Training	Mahila Samkhya, Jaunpur
8-12 <sup>th</sup> Jan	Film Show and discussion	Mahila Samakhya, Jaunpur
6-10 <sup>th</sup> Feb	Male participation in stopping violence against women	Mahila Samakhya, Jaunpur
22-26 <sup>th</sup> Feb	Gender Training	SAVE the CHILDREN FUND, Jaipur
13-19 <sup>th</sup> March	Gender Training	IWID, Bhopal

## SECTION FOUR: STRUCTURE OF THE ORGANIZATION

### A. List of General Body Members

Name	Address
Dr. Ancilla	Nazreth Hospital, Mokama, Bihar
Ram Singh Bist	Vill. Buribana, Po. Kasialekh, Dist. Nainital, Uttaranchal
Rama Kant Rai	Khargapur, Gomti Nagar, Lucknow, U.P.
Satish Kumar Singh	F1-Goel Apts, 21/490, Indira Nagar, Lucknow, U.P.
Alka Agarwal	87, Panchawati, Gaziabad, U.P.
Usha Varkey	392, Vikas Nagar, Lakhanpur, Kanpur, U.P.
Jashodhara Das Gupta	19 / 783, Indira Nagar, Lucknow, UP
Dr. Abhijit Das	19 / 783, Indira Nagar, Lucknow, UP
Dinesh Pandey	Ganga Niwas, Ranidhara Road, Almora, Uttaranchal
Anand Sahi	PRAYAS, Ramgarh Road, Bhawali, Nainital, Uttaranchal
Darab Nagarwala	Oakville, Landour, Mussoorie, Uttaranchal
Utkarsh Sinha	2/204, Vivek Khand, Gomtinagar, Lucknow, U.P.
Dr. Dinesh Singh	939 F, Mia saheb ka Hata, Mohaddipur, Gorakhpur, U.P.
Sister Rosalyn	C/o Nazareth Hospital, Mokama, Bihar
Shahira Naim	Green Villa, Picnic Spot Road, Khurramnagar (Near Markaz Press) Lucknow U.P.

### B. List of Governing Body members

Name	Post	Address
Dr. Ancilla	Chairperson	Nazreth Hospital, Mokama, Bihar
Ram Singh Bisht	Vice Chairperson	Vill. Buribana, Po. Kasialekh, Dist. Nainital, UA

Dr. Abhijit Das	Secretary	19/783, Sector 19, Indira Nagar Lucknow ( U. P.)
Satish Kumar Singh	Treasurer	F1-Goel Apts, 21/490, Indira Nagar, Lucknow
Rama Kant Rai	Member	Khargapur, Gomti Nagar, Lucknow
Usha Varkey	Member	392, Vikas Nagar, Lakhanpur, Kanpur, U.P.
Mr. Utkarsh Kumar Sinha	Member	2/204, Vivek Khand, Gomtinagar, Lucknow
Ms. Shahira Naim	Member	Green Villa, Picnic Spot Road , Khurramnagar (Near Markaz Press) Lucknow
Jashodhara Dasgupta	Coordinator	19 / 783, Indira Nagar, Lucknow

## SECTION FIVE: Financial Summary

### 2004-2005

Current Liabilities		Asset	
Income & Expenditure	246,672.22	Fixed Asset	25,816.00
Unutilized Grant	1,639,496.24	Cash	8,876.00
Other Liabilities	330,802.55	Bank Deposit	1,973,884.01
		Grant Receivable	73,021.00
		Security & advances	135,374.00
<b>Total</b>	<b>2,216,971.01</b>	<b>Total</b>	<b>2,216,971.01</b>

### INCOME & EXPENDITURE

EXPENSES	RS	INCOME	RS
ARROW WHRAP PROJECT	826,559.50	Unutilized grant brought forward	3,554,232.72
Women's Empowerment & VAW	1,469,561.50	Project grant received	3,385,206.75
Women's Health Resource Centre	1,612,213.77	Non FCRA	482,974.50
CEDAW Project	475,351.08	Consultancy	208,971.00
Abortion Assessment Study Sharing	127,536.00	Bank Interest & other Income	25,917.00
Fellowship & consultancy	637,703.00	Excess of Expenditure over Income	334,711.02
Quality of Care Advocacy	345,500.00	Excess of Expenditure over Grant	73,021.00
Non FCRA	278,227.38		
Society expenses	652,885.52		
Unutilized Grant	1,639,496.24		
<b>Total</b>	<b>8,065,033.99</b>	<b>Total</b>	<b>8,065,033.99</b>