TAKES ONE
OUR GUIDING PHILOSOPHY

We take our inspiration from the Founder of DHFL, Late Shri Rajesh Kumar Wadhawan. He believed that 'Inclusive growth is the only way to transform India. Education is not just a fundamental need but a fundamental right of all children.'
**CONTENTS**

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>It Takes One</td>
<td>6</td>
</tr>
<tr>
<td>A Glance At DHFL Changing Lives Foundation</td>
<td>7</td>
</tr>
<tr>
<td>Board Of Directors</td>
<td>9</td>
</tr>
<tr>
<td>Director’s Message</td>
<td>10</td>
</tr>
<tr>
<td>Director’s Message</td>
<td>12</td>
</tr>
<tr>
<td>Q&amp;A With COO</td>
<td>14</td>
</tr>
<tr>
<td>Introduction To Project Sneh</td>
<td>16</td>
</tr>
<tr>
<td>Our Journey So Far</td>
<td>22</td>
</tr>
<tr>
<td>Project Sneh In Maharashtra</td>
<td>24</td>
</tr>
<tr>
<td>Project Sneh In Jharkhand</td>
<td>42</td>
</tr>
<tr>
<td>Project Sneh In Madhya Pradesh</td>
<td>58</td>
</tr>
<tr>
<td>ECCE United</td>
<td>70</td>
</tr>
<tr>
<td>Event Associations</td>
<td>74</td>
</tr>
<tr>
<td>Financial Overview</td>
<td>76</td>
</tr>
<tr>
<td>Media Coverage</td>
<td>80</td>
</tr>
<tr>
<td>Poems In Marathi By Anganwadi Workers From Palghar</td>
<td>81</td>
</tr>
</tbody>
</table>

**Forward-Looking Statement**

In this annual report, we have disclosed forward-looking information to enable readers to comprehend our prospects. This report and other statements – written and oral - that we periodically make, contain forward-looking statements that set out anticipated achievements based on project plans and assumptions. We have tried, wherever possible, to identify such statements by using words, such as ‘anticipate’, ‘envisage’, ‘estimate’, ‘expect’, ‘project’, ‘intend’, ‘plan’, ‘believe’, and words of similar substance in connection with any discussion of future performance. We cannot guarantee that these forward-looking statements will be realised, although we believe we have been prudent in our assumptions. The achievement of results are subject to risks, uncertainties and even inaccurate assumptions. Readers should keep this in mind. We undertake no obligation to publicly update any forward-looking statement, whether as a result of new information, future events or otherwise.
IT TAKES ONE STEP TO BEGIN A JOURNEY
It takes one thought, one action, one anchor to trigger change, seed a movement and transform lives.

This change is vital, especially when introduced in the early years of children, from communities with marginal access to health, nutrition and early education. In the long run, it helps to improve economic productivity and social well-being, reduce crime and social dependencies, and boosts the sustainability of a nation’s development.

DHFL Changing Lives Foundation invests in programmes, research and partnerships, to strengthen the ecosystem for a child’s holistic development and growth. Our efforts are focussed on facilitating responsive relationships between children and their caregivers and educators, nurturing core life-skills, and building resilient communities. We strive to strengthen ‘Anganwadis’ or courtyard centres as transformation hubs for the community.

We see an unparallel connect to address global issues of equality and human development, through effective Early Childhood Care and Education (ECCE) or Early Childhood Development (ECD) programmes.

DHFL Changing Lives Foundation has anchored a non-competing coalition of Early Childhood Care and Education practitioners, foundations, social purpose organisations and enthusiasts, to steer a movement for quality Early Childhood Care and Education.

This report is an attempt to present the immense opportunities available for ideation, discussions and collaborations, that could further the ripple effect towards the sustainable development of children and communities.

Happy reading!
With a strong inclination and commitment to make a difference, DHFL established the **DHFL Changing Lives Foundation** in December 2017. Inspired by DHFL’s ethos of ‘Changing Lives’, the Foundation invests in sustainable initiatives, aimed at encouraging equality, leveraging the aspirations of youth, children and women, and maximising human development. The DHFL Changing Lives Foundation has been supporting, conceptualising, designing and implementing programmes that are aimed at the sustainable transformation of communities, and has adopted Early Childhood Care & Education (ECCE) as its thematic area of operations to drive its mission.

The Foundation believes in catalytic long term social investments that bring in a lasting impact and change. The Foundation strives to foster partnerships, facilitate research and innovation and transfer of knowledge, for quality Early Childhood Care and Education (ECCE) across rural and tribal parts of India.

The DHFL Changing Lives Foundation endeavours to foster interests and investments in ECCE as a fundamental developmental programme through partnerships with its stakeholders, including government, corporate sector, not-for-profit organisation (NGOs), academia and the community.

**VISION**
All children in their formative years should have equal access to opportunities for holistic development.

**MISSION**
The Foundation’s mission is to strengthen the Early Childhood Care and Education (ECCE) ecosystem in India.
THE FUTURE IS IN THE HANDS OF TODAY’S CHILDREN

DHFL Changing Lives Foundation has taken a trilateral approach through impact labs, research and technical support to fulfill its commitment to strengthen the delivery of Early Childhood Care and Education (ECCE) in India.

**Project Sneh**

The Foundation implements holistic Early Childhood Care and Education (ECCE) interventions in select geographies under its flagship Project Sneh.

’Sneh’ means affection and love. The project is delivered to facilitate responsive relationships between children and their caregivers and strengthen the government delivery mechanism of Integrated Child Development Services (ICDS) scheme through its care centres, popularly known as Anganwadis. These geographies provide the right impetus to prototype successful innovations for child development, reproductive health, livelihoods and empowerment.

**Technical Partnership**

The Foundation offers technical assistance to organisations who wish to invest in Early Childhood Care and Education (ECCE).

The assistance involves sharing our learnings, designing interventions and defining success parameters for the programme. The DHFL Changing Lives Foundation envisages providing technical assistance to the government, other foundations, NGOs, and new-age social entrepreneurs to maximise coverage of quality ECCE programmes. The Foundation continually seeks to engage positively with new geographies to serve the underprivileged sections.

**Research**

The Foundation is inclined to partner with like-minded organisations to channelise research and innovative work in ECCE.

The Foundation invests in bespoke/programmatic research and creation of knowledge bank to address gaps in ECCE. The DHFL Changing Lives Foundation envisions working with academia closely to also support transference of knowledge through its ECCE platform.

Access to quality early education and healthcare is bound to shape citizens; who are more aware and committed towards growth and sustenance of nation building. We seek to expand our network, share our effective practices and advocate for quality early year programmes and healthcare reforms for children and women across India.
Mr. Kapil Wadhawan  
Director, DHFL Changing Lives Foundation

Mr. Kapil Wadhawan is the Promoter Director of DHFL Changing Lives Foundation. He is also the Chairman and Managing Director of DHFL and Chairman of Wadhawan Group. He has been instrumental in establishing India’s first low income segment specific housing finance company, Aadhar Housing Finance Limited, with the International Finance Corporation in 2010 (Member of the World Bank Group), Avanse Financial Services Limited in 2013, DHFL Pramerica Life Insurance Company in 2014, DHFL General Insurance Company in 2016 and DHFL Asset Management Company in 2016.

With his focus on business excellence and industry development, Mr. Kapil Wadhawan has played a significant role in shaping policy guidelines on matters relating to the mortgage finance industry. Mr. Kapil Wadhawan is an MBA in Finance from Edith Cowan University, Australia.

Mr. S. Govindan  
Director, DHFL Changing Lives Foundation

Mr. Govindan is a veteran banker with over three and a half decades of experience in corporate and rural banking. He also serves as the Executive Assistant to Chairman and SVP & Head - Corporate Social Responsibility at DHFL.

Mr. Govindan believes in the power of corporates contributing towards transforming societies and has been instrumental in the setting up of DHFL Changing Lives Foundation. He believes that with quality Early Childhood Care and Education (ECCE), children become happier and school-ready, and as a result grow into successful lifelong learners. He is an advocate of collaborative concerted efforts, women empowerment, financial inclusion, and has addressed senior leadership across political and social forums.
“ALL CHILDREN DESERVE EQUAL ACCESS TO OPPORTUNITIES”
DIRECTOR’S MESSAGE

Friends,

Corporate India brings its commercial acumen in supporting the development sector in spirit and action to address the many challenges of poverty, housing, education, under-nutrition and climate change. DHFL has been leveraging on its business insight of helping people to own affordable homes; which in turn helps enhance quality of life and living conditions, ensuring better health and education. The inter-generational impact of one’s owned home is unparalleled, and is now recognised under the ‘Sustainable Development Goals (SDGs) 2030’ and ‘Housing for All by 2022’ agendas.

Philanthropic investments are aligned to strategic thinking; also enabling the social sector for collaborative efforts and innovation. This is integral and crucial for realising common goals and building a robust framework for the sustainable development of any nation.

Philanthropic Capital

India has been witnessing greater philanthropic momentum, with 11% increase in social funding, over the past five years. The approach to corporate social responsibility has also improved significantly, replacing traditional giving with strategic long term investments in programmes that deliver sustainable impact. Young leadership present in Corporate India has a lot of ability to seek and enlist partners in social transformation. A large framework is now readily available for social investors to ensure continuum of capital across the various developmental stages of a community, project or entity.

An estimated budget of INR. 26 lakh crore ($370 billion) per year is required for India to realise five out of the seventeen SDGs by 2030. This certainly calls for innovative impact-oriented funding options including collective funding and impact bonds to support proven solutions, innovation funds for promising solutions and structured grants for long term programmes. Philanthropic capital needs to pave the way for larger stakeholder appeal, and can rightly be termed as ‘catalytic capital for social innovations’.

The Driving Force

The increasing realisation is that business can thrive in an environment of sustainable demand through reduction of inequality in income and opportunities. More and more award-winning economic theories have earned their glory on the strength of this understanding. Corporate India is known for its grasp of business opportunity in a developing environment. However, it is investment in research in areas like rural employment, sustainable livelihoods and appropriate skills, that needs a greater thrust. Allied to this is the need for corporate responsibility to align its business objectives to larger issues like climate change, afforestation, water conservation and such lasting initiatives for preservation of the planet.

Gearing Up for Scale

The Government, civil society and Corporate India have formed a formidable force to reduce economic inequalities across India. However, the canvas is huge and offers tremendous scope for scaling concerted efforts. Leveraging corporate skill sets, blockchain technology, academic insights and demonstrated models of excellence will further facilitate large-scale development. The ever-evolving social landscape in India is inviting well-intended entities and individuals to further the ripple effect.

DHFL Changing Lives Foundation, the CSR arm of the Company, has paved the way for investing, collaborating and scaling programmes aimed at the holistic development and growth of young children. All children deserve equal access to opportunities; from nutrition to education to safe and secure living. This alone will ensure that deprivation and poverty does not spill over to the next generation.

Kapil Wadhawan
“IN ACHIEVING A COMPREHENSIVE MODEL OF ECCE, A MULTI-SECTORAL APPROACH IS IMPORTANT”
Dear Member,

Early Childhood Care and Education (ECCE) is well recognised as a fundamental programme for the development and growth of children. Despite proven research, ECCE programmes are discussed, deliberated and delivered for their individual components, of either healthcare, nutrition or early education. With a global child population of around 1.9 Billion\(^1\), quality comprehensive care and early education programmes need to be taken up as a continuum in the value chain.

Global Status of Children

Globally, children are facing the triple nutrition burden; either through malnutrition, micro-nutrient deficiency and/or obesity. Due to the prevailing burden of malnutrition, early stimulation and early education take backstage. However, given the right propulsion, comprehensive programmes for children covering early education, health and nutrition can help the holistic development of children in the underprivileged segment.

Early Childhood Education (ECE) for 2-5 year olds lays the foundation for a child’s development. However, in many countries ECE falls outside the mandatory education framework with school attendance becoming compulsory only at 5 or 6 years old. As a result, ECE is often not covered by public funding, making it unavailable or unaffordable to children from low income families. The challenge for philanthropic funders is to identify and support models which can save these children from falling behind, whilst being replicable at an affordable price point.

An Opportunity Canvas

India ranks 113\(^{rd}\) in the End of Childhood Index Rankings 2019, based on the average level of performance across a set of eight indicators related to child health, education, labour, marriage, childbirth and violence.

With a child population of 163 million\(^2\), addressing issues around child development needs a multidimensional approach taking into account the cultural and social aspects, which have a strong connect to bring in participation from the people.

Collaboration is the Way Forward

In achieving a comprehensive model of ECCE, a multi-sectoral approach is important. Funders / investors, experts and practitioners need to join forces to build an ecosystem where every stakeholder should bring their expertise to plug the gaps and strengthen the structure. Much can be achieved if such a collaboration recognises and integrates the government and its initiatives within the overall scheme.

DHFL Changing Lives Foundation has anchored a coalition ‘ECCE United’ to facilitate exchange of ideas, knowledge, and learnings. ECCE United aims to provide a platform for collaborative and concerted efforts, encourage bespoke / programmatic research and create a movement for the continuity of effective ECCE.

Today, as we look back with a sense of satisfaction on the distance travelled under our ECCE programme, the journey ahead looks daunting but promising, shaping up with coordinated efforts of all stakeholders. Our flagship programme, popularly known as Project Sneh, will continue to strengthen the ECCE ecosystem, leveraging on the Integrated Child Development Services (ICDS) infrastructure through Anganwadis.

I am confident that the Foundation will continue its inspiring work of changing lives and transforming rural India and certain that our efforts will contribute to the nation’s promising growth story.

Sincerely,

S. Govindan
Director

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\(^1\) www.data.worldbank.org/indicator/SP.POP.0014.TO?end=2018&start=1960&view=chart

\(^2\) www.censusindia.gov.in/Tables_Published/A-Series/A-Series_links/t_00_004.aspx
“DHFL CHANGING LIVES FOUNDATION’S PROJECT SNEH TRULY IS A COLLABORATIVE EFFORT”
How do you differentiate DHFL Changing Lives Foundation’s approach to ECCE?

DHFL Changing Lives Foundation has maintained a comprehensive life-cycle approach towards Early Childhood Care and Education (ECCE), also known as Early Childhood Development (ECD); covering early learning and education, nutrition, health and WaSH (water, sanitation and hygiene). In implementing our flagship project named ‘Sneh’ over the past three years, we also observed that these objectives were better achieved by promoting the financial independence and sustainability of the vulnerable populations. You will find a few narrations in this report carried as features and success stories.

Our work in 13 blocks across Maharashtra, Jharkhand and Madhya Pradesh, also helped us identify and nurture core contributors and influencers in the child development ecosystem. We arrived at an acronym - ISA\(^4\)C\(^2\) - to define our approach; which is closely aligned to strengthening the service delivery ecosystem through capacity-building and supportive mentoring of ICDS Supervisors, Anganwadi Workers, Anganwadi Helpers, Auxiliary Nurses and Midwives (ANMs), Accredited Social Health Activists (ASHAs), Child Development Project Officers (CDPOs) and engaging with the Community for their involvement, enabling quality and sustenance.

How do you plan to scale Project Sneh?

Project Sneh is currently implemented across 3400+ Anganwadis or courtyard centres of the Department of Women and Child Development (DWCD), Government of Maharashtra, Madhya Pradesh and Jharkhand. Each geography is at a different stage of development as per the project plan and needs a larger thrust from the government and non-government sector for scaling.

By creating Anganwadi Resource Centres with the DWCD and distinctly focusing on Early Childhood Education, scaling of Project Sneh or best practices under ECCE could be achieved. Further funding partnerships could be explored through innovative collective funding models where foundations, CSRs or multi-lateral agencies bring in risk capital and the government comes in as the impact investor.Successful projects can be listed for such dynamic investment and scale.

How much emphasis do you lay on M&E?

Since the beginning, we have focused on developing a robust and transparent information-gathering and data-monitoring system to assess the impact of programmes. Efforts have also been made to bring in monitoring tools to evaluate stakeholder performance. We have invested in an online tracking tool for real-time information. Through community dashboards and involvement of governance committees, we are able to triangulate data, ensure continuous development and / or modify the project.

Such programmes, however, have returns which are of long gestation in nature; at times even spreading over generations. Hence, it is important that we share decisions and data for input in national and other macro-level studies, where data can be interpolated into the transformation and impact on a long term basis.

What is DHFL Changing Lives Foundation’s take on innovation and partnerships?

DHFL Changing Lives Foundation has pioneered various innovations at the programme and process level and has supported prototypes like music-based learning, hypothermia bands with Jawahar Cottage Hospital (Palghar, Maharashtra) and health and nutrition communication through folk dance in Bokaro, Jharkhand. In collaboration with the National Association of Students of Architecture (NASA, India) we have developed innovative child-friendly models of Anganwadis, through a nationwide grand challenge under ‘Design for Change’.

We have received tremendous support from the DWCD in all three States, District Authorities, Chief Minister of Maharashtra’s Office - Sahabhag Cell and NGO partners, making Project Sneh a truly collaborative effort. Last but not least, we have seen a tremendous uptake of Project Sneh in the community, creating a significant social value for all associated with it.
IT TAKES ONE ENTIRE VILLAGE TO RAISE A CHILD
PROJECT SNEH

Project Sneh is a system strengthening initiative to facilitate the provision and delivery of quality ECCE to children for their holistic development and growth. Project Sneh is designed on the ethics of supportive and constructive engagement of integral stakeholders, while encouraging collaborative planning and action for enhanced and equitable last mile delivery of early education and health.

Importance of Early Years

Several studies have illustrated the importance of early/foundation years. These years have a lasting impact on a child’s health and contribute to building better access to opportunities, enhancing social relations and advancing cognitive abilities.

Research further shows that the learning gap between privileged and underprivileged children can show up as early as nine months of age. A study found that by age three, children from low-income families have half the vocabulary when compared to those from privileged families and underprivileged children begin primary school 18 months later than their privileged classmates.

India ECCE Landscape

According to the 2011 Census conducted by the Government of India, there are 164.48 million children in the age group of 0 to 6 years. This is a large group preparing for a young nation in the near future. It becomes imperative to work closely on developing the surroundings of these children through providing quality early education and health services. Considering the large rural population and diverse socio-economic opportunities in India, the need for quality early care and education is critical.

One of the most historic policies passed by the Government of India was the Right of Children to Free and Compulsory Education (RTE) Act, 2010, which guaranteed children quality primary education from class I to class VIII. However, the policy failed to recognise early education as a compulsory provision. In 2013, the National Early Childhood Care and Education Policy was sanctioned by the Government of India. The Policy framework includes a definite National Curriculum Framework and Quality Standards for ECCE. It was in 2018-19, that the Government announced the Samagra Shiksha Abhiyan as an overarching programme for the school education sector extending from pre-school to class 12.

The Ministry of Women and Child Development (MWCD) is responsible for implementing the ECCE policy and is in charge of the ICDS scheme. ICDS covers six basic services to citizens, including supplementary nutrition, nutrition and health education, pre-school non-formal education, health check-ups, immunisation, and referral services.

Given the robust policy framework and immense need on account of diversity, population, social and economic inequalities, DHFL Changing Lives Foundation finds this an area for constructive engagement which intends to support the State to have improved outputs and bridge the gap at the last mile, resulting in observable growth instead of duplication of existing work.

A child reciting a poem at an Anganwadi in Burhanpur, Madhya Pradesh
Lifecycle Approach

Ecosystem approach adopted by Project Sneh

The collaborative efforts and contentious engagement of a community as a whole are key for the implementation of a successful programme. Hence our intervention has been designed in a manner to provide holistic support for the delivery of quality ECCE.

With an ecosystem approach, Project Sneh focuses on improving the supply side and building the demand side for effective early education and care of children, mothers and adolescents. Our efforts are towards building the capacity of service providers including ICDS Supervisors, Anganwadi Workers, Anganwadi Helpers, Accredited Social Health Workers (ASHAs), Auxiliary Nurses and Midwives (ANMs), Child Development Project Officers (CDPOs) and the Community, through an ISA-C² approach evolved under Project Sneh.

The programme further supports a need-based infrastructure upgrade of service institutions including Anganwadis, Primary Health Centers and Sub-centers using innovative and locally-available materials. The DHFL Changing Lives Foundation advocates policy measures for the effective delivery of ECCE services through Anganwadi centers.
Theory of Change

Instead of working with children directly, the programme attempts to strengthen systems and improve the health and education-seeking behaviour of the community for a sustainable transformation of ECCE services, and thus the community.

With empowerment as a fundamental principle of work, Project Sneh identifies, nurtures and strengthens grassroots leaders from the community as technical experts on early education, reproductive, maternal, neonatal, child health and adolescent health. These grassroots leaders engage with parents (mothers and fathers both), caregivers and educators, local self-governments (Gram Panchayats) and facilitate creation, knowledge and action of Village Level Monitoring & Support Committees like the Village Health, Nutrition and Sanitation Committee, Anganwadi Level Monitoring Committee, so on and so forth.
Early Childhood Education

The first three years of a child’s life are uniquely important as this is the most critical period for brain development. The experiences that the child goes through during this time and even during pregnancy (right from the third week when brain development begins) play a vital role in her/his development. Motor development is experienced around the sixth month, whereas by the eighth month the auditory cortex, visual cortex, and Broca’s area begin to function, lending the baby a primitive ability to interpret sights, sounds and to distinguish language. Early stimulation becomes fundamental.

Our efforts in early education are made to encourage, contextual and age-appropriate education through capacity-building and mentoring.

Capacity-building of the Anganwadi Workers, Anganwadi Helpers, ICDS Supervisors, and CDPOs on topics ranging from developmental milestones to class planning, providing a conducive learning environment, constructive supervision and preparing relevant teaching learning material from locally-available resources. These workshops are conducted through a combination of residential and onsite activities.

Mentoring Visits - We believe that each Anganwadi and community has its own set of exclusive benefits and challenges. Hence to provide customised action, Early Childhood Education (ECE) professionals are nurtured from within the community.

They act as independent supervisors or grassroots leaders, visiting the Anganwadis periodically to observe and provide support and mentorship to Anganwadi Workers, Anganwadi Helpers and ICDS Supervisors.

Field Supervisor guiding the Anganwadi Worker, Anganwadi Helper and ASHAs in Palghar, Maharashtra

Learning Aids - A set of customised Teaching Learning Materials (TLM) is provided, which is designed taking into account the geography, language, cultural and social practices. This enhances the confidence of the teachers in class delivery and cognition of children as they are able to relate to all the materials used in the Anganwadi. Furthermore, the Anganwadi Workers and Helpers are taught to develop TLMs from locally-sourced materials.

To ensure the continuity of early education outside of the Anganwadi, our grassroots leaders engage with mothers, fathers, grandparents and the community at large to build a safe, secure and child-friendly learning environment within the hamlet/village.

Early Childhood Care

As health has multiple determinants and roots to historical and hereditary causes, combined with a lack of awareness and access to health services, the early childhood care component of Project Sneh is designed to cater to all stakeholders contributing to the health of a child. The Early Childhood Care component of Project Sneh is a combination of the life cycle and Community-based Management of Acute Malnutrition (CMAM) approach reaching out to pregnant women, lactating...
mothers, malnourished children, families, community members, local governance bodies and so on. The stakeholders are engaged on different platforms resulting in informed households and a responsible community supported by a robust health delivery system.

**Individual work** - Individual counselling is provided on Antenatal Care (ANC), Postnatal Care (PNC) and malnourishment to encourage positive health-seeking behaviour. Sessions on issues of healthcare, developmental milestones, superstitious beliefs, Home-Based Newborn Care (HBNC), government benefits, referral to Primary Health Care (PHC) centres and more are conducted by community health workers.

**Group Interventions** - Group interventions are conducted to bring about awareness of Early Childhood Care and community measures that can be undertaken for developing the status of Mother and Child Health (MCH) at the village level. Different activities like Mata Baithaks and Village Health and Nutrition Day are celebrated at the Anganwadi level. This also motivates the Anganwadi Workers, ASHAs, ANMs to work hand-in-hand to provide better services.

**Activating Local Governing Bodies** - We ensure the strengthening of service delivery institutions by activating local governing bodies and training them to provide timely and constructive feedback to service providers. This includes, forming and strengthening Mata Samitis, Village Health Sanitation and Nutrition Committee (VHSNC), working with the Panchayati Raj Institutions (PRI) members and participating in Gram Sabhas.

Continuous capacity building in these committees reinforces the fact that support and supervision has to be provided in a balanced manner for observing the development of health indicators at the village level. Their responsibilities are as important as those of the healthcare-providing institutions.

We believe in women empowerment and an early start. Therefore we have designed a unique feature to engage women and adolescent girls and boys through the programme. The adolescents, whom we call ‘Snehonis’*, are nurtured as grassroot leaders.

**Child-friendly Infrastructure**

Project Sneh envisages creating child-centric Anganwadis or ‘Snehangans’, through innovative designs, local implements and building on existing infrastructure.

We also partner with local self-governments and help them contribute towards the Anganwadi infrastructure, maintenance and support by leveraging available resources and manpower.

Additionally, DHFL Changing Lives Foundation also supports the installation of medical equipment to ensure provision and services through rural hospitals, primary health centres, sub-centres and supportive infrastructure.

**Stakeholder Empowerment**

Our experience prompted the need for a unique component for stakeholder empowerment wherein Anganwadi Workers, Helpers and mothers of children are primary caregivers and educators for a child and play a vital role in monitoring and evaluation of the programme at the Anganwadi and community level.

The programme aims to create a safety net for frontline workers and mothers through formation of Self-Help Groups (SHG) and providing forward and backward linkages to encourage financial independence.

*Snehoni is derived from our partner CINI’s adolescent programme.
**OUR JOURNEY SO FAR**

**FY2016**
Launched Project Sneh in 996+ Anganwadis in Palghar and Vasai blocks of Palghar District, Maharashtra.

1 State | 2 Blocks

**FY2017**
Deepened impact at 996+ Anganwadis in Palghar and Vasai blocks of Palghar District, Maharashtra.

1 State | 2 Blocks
FY2018
Scaled to 1886+ Anganwadis in Palghar District and launched Project Sneh in Bokaro, Jharkhand with 465+ Anganwadis.

2 States | 7 Blocks

FY2019
Launched Project Sneh in Khargone and Burhanpur, Madhya Pradesh with 1187+ Anganwadis. Strengthened and deepened impact at existing locations in Palghar and Bokaro Districts.

3 States | 13 Blocks
IT TAKES ONE MOMENT TO START A RIPPLE OF CHANGE
Our journey in Maharashtra began in FY2016, in the newly formed district of Palghar in two blocks (talukas as referred to in India), namely Vasai and Palghar. Project Sneh was designed keeping in mind the challenges, opportunities and needs of children in Palghar District. The programme started with a capacity-building focus, to strengthen the delivery of early education through 996+ Anganwadis in FY2016. By FY2019, Project Sneh evolved as a holistic programme for child development addressing the fundamental needs of early education, health & nutrition for children, mothers and adolescents, with a life cycle approach, covering 1886+ Anganwadis and the communities serviced through them. The programme also attempts to strengthen the government health facilities including Palghar Rural Hospital, 10 Primary Health Centres and 62 Sub-Centres in partnership with like-minded entities, government foundations and social purpose organisations.
About Palghar District

Palghar District, formed in August 2014, was earlier a part of the old Thane district. Primarily a tribal area, people face adversities and multiple challenges. This district falls in the Konkan Division of Maharashtra and has a hilly and difficult terrain. It is a rain-fed area, with rice as the main food crop. The terrain does not allow for the required ground-water seepage. Furthermore, certain villages and/or hamlets (locally referred to as ‘Padas’) are disconnected during the heavy monsoons. Health and education services to these areas are invariably challenging to the 29 lakh population\(^4\) residing here; covering 1.3 lakh children under six years of age and 21,876 pregnant and lactating women\(^5\).

The District Administration of Palghar is, however, extremely committed and forthcoming to change this scenario. DHFL Changing Lives Foundation has partnered with them since the inception of the programme. The Palghar Zilla Parishad portal www.zppalghar.gov.in provides the landscape and investment opportunity to readers who would like to partner for the socio-economic development of Palghar.

The Chief Minister of Maharashtra’s Office Sahabagh Cell has played a pivotal role in driving collaborations across ECCE, integrated rural development and other programmes that have proved impactful and effective. DHFL Changing Lives Foundation has joined this mission to strengthen Anganwadis not only as centres of child development, but also as transformation hubs for the community. The Foundation envisions developing an Anganwadi Resource Centre, aptly referred to as a Child Development Resource Centre, to foster continuous learning, research and innovation in the Early Childhood Education space (for Anganwadis/ courtyard centres/ pre-schools). This will also further the Government of India’s Samagra Shikshan Abhiyan in Maharashtra.

\(^4\)palghar.gov.in/about-district

\(^5\)womenchild.maharashtra.gov.in/content/innerpage/mpr.php
Project Sneh: Implementation Model for Palghar, Maharashtra

Scientific studies have proven that brain development is significant in early years and better outcomes are achieved through the combined intervention of cognitive and nutritional development. Thus, it is vital that a stimulating, interactive learning environment is provided to the child through quality ECCE, to thoroughly prepare the child for primary school. To achieve this it is important for the service providers to have the right skill sets and competencies to deliver effective ECCE services. At the same time, it is important for parents and the community to be informed of child development pedagogy, government welfare schemes and their roles and responsibilities towards their child’s learning environment at home and in the community.

FY2016
- Partnership with DWCD, Govt. of Maharashtra
- NGO Partner Identification
- Focus on creating framework within the system for sustainable impact

FY2017
- Programme was launched with ECE component in Vasai and Palghar
- Training & TLM Support for 996+ Anganwadis
- Community engagement with mothers

FY2018
- Programme scaled to Dahanu and Talasari
- Health and Nutrition component added in Palghar
- Tuberculosis awareness detection and treatment in Vasai block
- Design for Change: Infrastructure Grand Challenge initiated

FY2019
- Cohort of 200 ECE resource persons developed
- Music-Based Learning initiated
- Initiated Geriatric Care programme encouraging livelihoods amongst youth

Veteran educationist Sindhu Tai launching Project Sneh in Alhe, Dahanu
First step with Early Education in FY2016 and FY2017

DHFL Changing Lives Foundation collaborated with the Department of Women and Child Development, Government of Maharashtra in FY2016. Our work started in Vasai and Palghar blocks of the districts in all 996+ Anganwadis. As part of the strategy, the desired skills and competencies that were required for personnel at each level were mapped out and trainings/workshops were designed and delivered in phases with a combination of residential and onsite/beat level training during the course of FY2017.

Supportive Mentorship

To create a cadre of technical experts and a support system in the community, young energetic women and men were identified and mapped to the Anganwadis. They were trained to provide mentoring support to the Anganwadi Workers and Helpers, gather feedback and facilitate a responsive relationship between the children, their caregivers and educators.

Teaching and Learning Materials

A kit comprising of Teaching and Learning Materials (TLMs) was provided to each Anganwadi. The materials helped Anganwadi Workers conduct effective age-appropriate early education activities. By the end of FY2017, Anganwadis became promising centres for children.

Addressing a Burgeoning Burden of Malnutrition FY2018

Our experience during FY2016 and FY2017 prompted us to extend the Project Sneh coverage to address issues of health and nutrition. It was in September 2016, that the Chief Minister of Maharashtra’s Office called for immediate participative action. The urgency of the situation demanded a curative approach with focus on Severely Acute Malnourished (SAM) and Moderately Acute Malnourished (MAM) children.

To further address the root-cause of malnutrition, Project Sneh designed a community-based approach covering reproductive, maternal, neonatal, child health, adolescent health, WaSH (water, sanitation and hygiene), food production and habits. The programme was rolled out in September 2017 to address the root causes of malnutrition.
**Community Health Activists**

Project Sneh identified and trained a new cadre of young women and men to engage with the community and activate their health and nutrition seeking behaviour. Our community health workers engaged with pregnant women, lactating mothers and their families to address myths and encourage their well-being, timely prenatal care, ante-natal care, vaccinations and immunisations.

Our grassroots leaders engaged with mothers and caregivers to provide timely and correct health and nutrition interventions. With a Community-based Management of Acute Malnutrition (CMAM) approach, they encouraged the identifying and reporting of SAM and MAM children, registering them with Nutrition Rehabilitation Centres (NRCs) and conducting follow-ups until they completely recovered.

**Accredited Social Health Activists (ASHAs) and Auxiliary Nurses and Midwives (ANMs)**

With capacity-building as the underlying principle, Project Sneh designed a training and workshop calendar for ASHAs and ANMs. Guest speakers, including doctors, were invited to conduct workshops and trainings while Community Health Activists worked towards spreading awareness on schemes and reimbursements for the delivery of service.

**Public Health System**

Project Sneh supported the installation of an ultrasound machine at the Palghar Rural Hospital along with incubators in the Neonatal Intensive Care Unit at the Jawahar Cottage Hospital. This ensured competent service delivery through the respective centres.

**Food Production and Food Habits**

Project Sneh supported a massive tree plantation drive in Palghar district through volunteers from the community, academic institutions and corporate organisations. Using a ‘wadi’ approach, over 75000 saplings were planted. A combination of local fruit and flowering trees like Kesari mango, Chickoo / Sapota, Karanj, Jambun and small medical herbs were planted in forest-allocated land to farmers and tribal households. Additionally, five saplings of Moringa / Drumsticks were given to and planted in each Anganwadi to encourage consumption of Moringa leaves in Anganwadi-served food.
Scaling Early Childhood Education (ECE) to two more blocks in FY2018

The promising results of Palghar and Vasai encouraged us to accept the request of the District Administration and start work in all 880+ Anganwadis in Dahanu and Talasari blocks in FY2017. Our focus remained on strengthening the delivery of early education through Anganwadis and reinforcing the right service-seeking and participatory behaviour within the community.

A cadre of Independent Supervisors or grassroots leaders was nurtured over the past years. This strong workforce remains the cornerstone of the project.

Independence is the key

Simultaneously in Palghar and Vasai blocks, the Project Sneh Supervisors’ focussed on creating a robust ecosystem for the delivery of Early Childhood Education through Anganwadis. A Do-It-Yourself kit helped Anganwadi Workers and Helpers develop TLMs on their own. It also encouraged out-of-box thinking and Anganwadi Workers began creating TLMs from locally available recyclable materials. Palghar and Vasai also saw an increase in the time allocated for ECE activities at Anganwadis. With these handmade TLMs, our efforts, post the intervention, are to ensure continuity and sustainability of the teaching and learning process through the medium of play.

Sustainability of ECE practices is the Goal: FY2019

During FY2019, Project Sneh mainly focussed on strengthening and deepening impact by adopting an incremental learning approach towards building the capacity of the ICDS workforce through training, mentoring and support.

Strengthening Early Childhood Education in FY2019

These workshops focussed on enabling Anganwadi Workers, Helpers and Independent Supervisors to recognise need for a scientific approach to quality early education and sustain child-centric teaching and learning processes.

The other aim was to create a group of local ECE resource persons / master-trainers comprising of Anganwadi Workers, Anganwadi Helpers, and ICDS Supervisors at the beat level to share knowledge among the Anganwadi Workers group and help sustain core implementation activities post the intervention. This group is also being trained in music-based learning.

A pool of 200 ECE resource persons across Palghar, Vasai, Dahanu and Talasari have been identified and trained as mentors to provide supportive supervision on a long term basis. This cohort acts as trainers for new Anganwadi Staff. It is also well-equipped to support prototypes as and when innovation and continuous improvement in ECCE occurs.
MUSIC-BASED LEARNING TAPS INTO THE INNATE POWER FOR GROWTH

“If I were not a physicist, I would probably be a musician. I often think in music. I live my daydreams in music. I see my life in terms of music.” Albert Einstein

Music in itself is healing, a great equaliser and something we are all touched by. This formed the basis for Project Sneh’s intervention with “Music-Based Learning in Anganwadis”.

This component of Project Sneh is a music-based teaching-learning early intervention training programme wherein 200 master trainers comprising of Integrated Child Development Services (ICDS) Supervisors, Anganwadi Workers and Helpers are being trained (in batches of 30) in teaching basic music concepts to children between 3-6 years. These master trainers will further train their fellow Anganwadi workers to implement music-based teaching-learning exercises in their respective Anganwadis.

The first 30 master trainers learn to use musical instruments like Djembe drums, tambourines, shakers and so on, while infusing beats and rhythm into poems and songs taught at the Anganwadi. They also teach the children to play these instruments.

The music kits provided by Project Sneh are a combination of instruments created locally using recycled materials.

The benefits of Music-based teaching-learning:

- Higher Level of Engagement: Musical teaching keeps children engaged and interested
- Motor Skills Development: Movement of muscles while playing the instruments leads to motor skills development
- Emotional and Social Development: Playing together in rhythm leads to a sense of teamwork
- Fine-tuned Auditory Skills: Students who play or practice music have better auditory attention
- Music can be Relaxing: Music is known to soothe stress
- Helps in Coordination: Children learn to coordinate by matching beats and rhythm
Parents and Community

For overall development it is imperative that the child is exposed to an enabling and learning environment both in school and at home. Through regular parent-teacher-Anganwadi Worker meetings, it was ensured that parents understand the importance of education and encourage learning behaviour in children at home.

For any child development project to sustain independently, community and parental engagement play a very crucial role. The aim was to create awareness about Early Childhood Education (ECE) and the child learning processes and activities being conducted in the Anganwadi. In November, the Project Sneh team invited parents to a Children’s Day celebration to promote child-centric approach at the community level.

Parent meetings were conducted at 181 Anganwadis in 37 beats and were attended by a total of 2331 parents.

Intervention at Individual level

Pregnant women were reached out to and home visits were conducted along with ASHAs/Anganwadi Workers. These meetings educated pregnant women and their family members about the importance of Antenatal Care (ANC) and institutional delivery. Additionally, it was ensured that pregnant women register within the first trimester and are aware of their entitlements under social welfare schemes. 92% of pregnant women have availed ANC services.

Anganwadis, with help of Mata Samitis, have been celebrating Baby Showers, Amrut Ahar, 6-month birthdays and exhibiting appropriate behaviour change. These efforts have resulted in the year witnessing a positive impact in the form of behavioural change replication across target groups. At the end of year two, home delivery rate stands as low as 3%. This is due to inaccessibility to centres owing to terrain constraints. The Foundation and the government are working closely to address this gap.

Nutrition and care requirements of the pregnant women were also communicated to the family especially husbands and mothers-in-law.
Since a majority of the population belongs to the tribal community, discouragement of superstitious practices was also emphasised in communications.

Prenatal health management counselling in Wadacha Pada, Palghar

A large section of the community was unaware of the importance of sonography/ultrasound tests. Even though a few of them had basic information, accessibility and affordability were the major barriers. With Project Sneh’s intervention, the gap was bridged by facilitating relevant, scientific and accurate information to the rural and tribal population. For the benefit of this population, an ultrasound machine was installed last year by DHFL Changing Lives Foundation at the Rural Hospital, Palghar. About 78.3% women have benefitted from this ultrasound machine.

Community and parental involvement at the Anganwadi-level in Bhendwad, Palghar.

Pregnant women and lactating mothers were counselled on effective breastfeeding practices and their advantages. Information was provided on the importance of sufficient nutrition intake by the mother and child during the lactating phase. **5260 babies were fed first milk.**

The programme promotes the monthly weighing of children at the Anganwadi. If any child is identified as SAM or MAM, the child receives supplementary nutrition and parents are counselled on how to prepare nutritious meals from local produce. This year, 224 underweight children (in the category of SAM and MAM) were identified by local Anganwadi Workers and Project Sneh Community Workers. Through regular home visits, parents were counselled about feeding practices, hygiene and growth monitoring for the recovery of these children. Of 224 identified cases, 13 were recorded in the SAM category and 211 were recorded in the MAM category. Of these **224 undernourished children, 209 children have recovered.**

Intervention at the Community Level

Awareness at the community level is a vital element for any successful programme. During the year, our aim was to deepen community intervention, strengthen existing governance committees and form new ones. Apart from the 50 VHSNCs activated last year, 192 VHSNCs have been activated across the block in this year. As a result
of regular meetings with the Project Sneh team, VHSNCs have acknowledged the importance of health and nutrition and have begun organising health check-up camps and Village Health & Nutrition Days (VHNDs) in their villages.

Out of 616 Anganwadis, a total of 612 Mata Samiti’s have successfully been re-energised. The intervention has shown a positive impact in terms of awareness among pregnant and lactating mothers and also brought women leadership into the spotlight while evolving as a responsible community-led monitoring system.

During the year, 2072 Mata Baithaks have been conducted across Anganwadis in Palghar Taluka, the mothers are taken through their children’s development in the Anganwadi and are guided about child care, malnutrition and so on.

Project Sneh follows the life cycle approach to curb the prevalence of malnutrition; therefore, the intervention followed various stages of human development. Considering the direct linkage between the health of adolescents and malnutrition, we worked with adolescent girls and boys to educate and encourage behavioural change. During the year, 170 groups with 10-15 adolescent girls each were sensitised. Each group has undergone four sessions related to Puberty and Menstrual Hygiene, Nutrition, Abuse, Education and Aspirations.

Over 1700 girls in the age group of 10 to 19 years actively took part in 700+ sessions.

**Fighting Tuberculosis**

Project Sneh launched a new component in the Vasai block of Palghar to address the issue of tuberculosis in FY2018. The component covers ‘detection to treatment’ and is delivered with specialists trained through the project and government missionary to help people overcome this disease.

An awareness, detection and treatment programme to combat Tuberculosis is continued in Vasai Taluka in FY 2019. 3624 people have been screened and 22 have been detected with TB and are under treatment.
Sneh Mela is a forum for the community and caregivers to experience health and preschool developmental milestones for children through demonstration and engagement activities. It broadly includes the following:

- Experiential Learning – To facilitate learning through various models such as stalls and Free Play activities on Math, Science, and so on
- Demonstration – Healthy, nutritious and tasty food prepared from locally available produce

‘Sneh Mela’ creates awareness about scientifically developed Early Childhood Education programme among parents. Through this forum, the efforts are directed towards providing a joyful learning experience to children between 3 to 6 years of age.

Early Childhood Education covers seven basic subjects of Language, Mathematics, Environment, Science, Art, Physical Play and Free Play. This event facilitates exposure to learning through engaging activities pertaining to these subjects. Through this event, the parents and community are able to understand the process of childrens’ learning through detailed ECE activities and its impact on their development.

Objectives of Sneh Mela:

- To create awareness about ECE among Parents through “Palak Prabodhan”
- To promote ECE and its importance in community members
- To disseminate a constructivist method of learning to society
- To emphasise the importance of nutrients and vitamins in daily intake to keep malnutrition in control

Anganwadi Workers exhibited healthy, nutritious and tasty food made with local produce and shared recipes with the visiting parents and community members.

The origin of Sneh Mela dates back to Anutai Wagh’s days. Anutai Wagh, one of the pioneers of early education in India, realised that the Anganwadi or Balwadi concept was out of reach for tribal community owing to ignorance and the lack of resources. She observed that the “Jatra” (Village fair) is the only place where people from all villages gather. This encouraged her to organise Balnagari, or a forum, at village fairs to attract villagers and spread awareness about Anganwadis/Balwadis.
**Child-centric Anganwadi Infrastructure**

A child-friendly Anganwadi infrastructure provides an enabling environment for children to realise their full potential. It remains pivotal to support educational, nutritional and healthcare services for children and mothers. What’s equally important, is the community’s involvement and it’s ownership for maintenance and development.

As per the programmatic reforms under a restructured and re-strengthened ICDS, the Anganwadi should:
- Be child-friendly and have adequate infrastructure and space (should be at least 600 sq. ft.) for indoor and outdoor activities of children
- Have a separate kitchen
- Have safe drinking water facilities
- Have child-friendly toilets
- Have child-friendly buildings

**Design for Change**

Against this backdrop, DHFL Changing Lives Foundation invited architecture students and professionals in partnership with the ‘National Association of Students of Architecture (NASA), India’, to contribute to the social need of ‘Early Childhood Development and Growth’ through ‘Design for Change’ – an infra grand challenge to create replicable and scalable model Anganwadis and aid development and growth of children across rural, tribal, semi-urban and urban environments.

An exercise like this becomes particularly relevant in the social/development sector today, given the irony that Anganwadi centres cater to the first thousand days of an individual’s life (0-6 age group), which are critical for overall growth and development. This development helps an individual during their adulthood and consequently contributes towards the economy of a nation.

The engagement also aims to sensitise youth on the nation’s needs, foster partnerships, channelise energy and embark on a journey of creating change together through DHFL Changing Lives Foundation’s Trophy ‘Design for Change’.

As part of the DHFL Changing Lives Foundation ‘Design for Change’ trophy, the winning model/models are implemented by the Foundation in Project Sneh geographies. These models will be further scaled through partnerships. The Anganwadi/s chosen have demonstrated particular quality ECCE delivery, but are lacking the right infrastructure. With a child-friendly set-up, Anganwadi Workers and Helpers are expected to get the right impetus to build their Anganwadis as ‘centres of love and care for children’ or ‘Snehangans’.

Winning model design for Damkhind in Manor, Palghar

**Snehangan**

As a part of the DHFL Changing Lives Foundation ‘Design for Change’ trophy, the winning model/models are implemented by the Foundation in Project Sneh geographies. These models will be further scaled through partnerships. The Anganwadi/s chosen have demonstrated particular quality ECCE delivery, but are lacking the right infrastructure. With a child-friendly set-up, Anganwadi Workers and Helpers are expected to get the right impetus to build their Anganwadis as ‘centres of love and care for children’ or ‘Snehangans’.
NURTURING COMMUNITY CHANGE AGENTS THROUGH SELF-HELP GROUPS

Five capacity building workshops were held in the Palghar block for Self-Help Groups. They were trained on:

- MNCH (Maternal, Neonatal and Child Health) and mitigation of the risk of malnutrition
- Improving positive health-seeking behaviour of the community
- Referring high-risk cases
- Improving care practices at the family level
- Community-level assessment and supportive supervision of health and nutrition-sensitive services

After the training, it was observed that Self-Help Groups members started cascading to fellow members during their meetings. Participation of women have increased in Mata Samitis. Mothers have started visiting the Anganwadis to monitor cleanliness, hygiene and food quality. They also share appropriate feedback with the Anganwadi Worker.
Solving problems together in FY2019

This year, DHFL Changing Lives Foundation in collaboration with the Chief Minister of Maharashtra’s office, Sahabhag team, District Administration & Health Department, other Foundations, CSRs, NGOs and Federation of Obstetric & Gynaecological Societies of India (FOGSI) conducted a series of medical camps across Palghar. This was the first big step taken together to ensure last mile delivery of health services.

220 youth have been trained and placed.

The project envisions the opening of a training centre in Palghar, facilitating opportunities of livelihoods for the youth in Palghar district.

Enabling Prototypes in FY2019

Hypothermia is the underlying cause of ill-health for many low birth-weight and premature newborns. Bempu Health has developed a bracelet that monitors the baby’s temperature. DHFL Changing Lives Foundation supported a pilot test with 50 such hypothermia bands; given to Jawahar Cottage Hospital in Palghar. The hospital has tested the bands; enabling mothers to monitor hypothermia at home, and provide adequate thermal care popularly known as ‘kangaroo care’ to them.

Stakeholder Empowerment Continues

To empower women in the community, UNDP, Anita Dongre CSR, Power Grid Corporation, ITDP, District Administration and DHFL Changing Lives Foundation came together for a livelihoods project in FY2018. The support provided by the Foundation through a generator for the facility at Jawahar, Palghar continues to yield results and promote financial independence amongst rural and tribal women who are engaged in the tailoring and garment manufacturing at the facility.

Geriatric Care Programme Initiated

The Foundation collaborated with Aaji Care Home Health Services for an elder care programme encouraging livelihoods for youth from under-served communities under the stakeholder component of Project Sneh. With a vision ‘To improve the quality of lives for families in the need of care’, the project Seva Saksham aims towards skilling women and girls from marginalised/tribal community in non-medical home care/assistance for elderly citizens and simultaneously creates employment opportunities for the trainees.

Ms. Amruta Fadnavis and Ms. Siddhi Lad at the Palghar Sahabhag Dialogue

Bracelet Monitoring a Baby’s Temperature

Pic: Bempu Health
Nurturing ‘Balsakhis’

Anyone from the Anganwadi, whether an Anganwadi Worker or Helper, can be a Balsakhi. A Balsakhi is essentially engaged to implement and promote child-centric education at the Anganwadi and community levels. She also helps children learn independently by creating a child-centric learning setup and atmosphere. ‘Bal’ means child, ‘Sakhi’ means friend.

It is commonplace to see an Angawadi Helper fulfilling the role of mobilising children from the community, preparing supplementary food for children, pregnant and lactating mothers and assisting in other odd jobs. However, an Anganwadi Helper is never seen as a Balsakhi (friend of children) in taking on the role of counselling parents regarding the importance of quality Early Child Education for the development of the child.

Rajani Tai from Khodave Pada Anganwadi in the Saphale 1 beat of Palghar ICDS project proved to be one such Balsakhi. However, during initial visits of Project Sneh facilitators, it was observed that Rajani Tai only engaged herself in the routine Anganwadi Helper’s tasks. Gradually, with the mentoring support of Project Sneh and the Anganwadi Worker, she began to develop a deeper interest in Early Childhood Education activities. Her involvement and enthusiasm, coupled with the opportunity to attend capacity-building training on ECE in Anganwadis, helped her understand the science behind ECE activities and a child’s learning process.

With time, Rajani Tai began assisting the Anganwadi Worker in educational activities, arranging Teaching Learning Materials (TLMs) according to the subjects and creating innovative TLMs with local implements. Her will to learn and absorb more information pertaining to ECE activities was impressive.

The field supervisor was pleasantly satisfied to hear about Rajani Tai’s transformation and the fact that she had begun responding to parents’ feedback pertaining to writing activities at the Anganwadi. Rajani Tai patiently explained to the parents that ECE practices follow a scientific approach and that fine muscles of a young child are in the developmental stage and need systematic training. Project Sneh focuses on activities like creating Rangoli designs, connecting the dots and more. These activities facilitate fine motor skills in younger age groups and help develop a proper grip on writing instruments. For the parents’ further understanding, she provided them with an analogy - “Just as in infancy, you chose to feed your child milk rather than a full-fledged meal like Dal and Rice, we at the Anganwadi first teach your children pre-writing tasks to develop fine muscles in their fingers for a better grip. If we skip this stage, children may not be able to write well in the future.” Rajani Tai further demonstrated and explained all ECE activities related to pre-writing skills to the parents, who are now convinced about their children’s development and satisfied with the outcome.

One of Project Sneh’s objectives is to facilitate the capacity-building skills of the Anganwadi Helper to see her in the role of co-teacher. Rajani Tai’s journey from Anganwadi Helper to ‘Balsakhi’ has not only instilled in us a sense of pride but also reaffirmed our practices.

Madatanis to Balsakhi - Rajani Tai’s Extraordinary Journey
Creating Value

Participation in ‘Sampurna Sewa Abhiyan’ Exhibition

In December 2018, ‘Sampurna Sewa Abhiyan’, a one-day exhibition of various government schemes, was organised by the Vasai Block Government Administration. Project Sneh’s Early Childhood Education implementation partner, Grammangal, along with an Anganwadi Worker participated in this exhibition to display TLMs and create awareness about ECE activities being carried out at Anganwadis.

Participation at ‘Palghar SARAS’ Exhibition

‘Palghar SARAS’ is a platform to promote women’s Self-Help Groups through the promotion of their products and channelise livelihood options. Along with these, several government departments’ stalls also exhibit awareness schemes and services.

The ICDS Palghar department suggested that Project Sneh team be a part of the stall and promote ECE activities through TLMs to create awareness about Anganwadi functions.

Special Mention

Dr. Anil Kakodkar

Project Sneh was graced by well-known atomic scientist, Padma-Vibhushan Dr. Anil Kakodkar.

During his visit to the Juchandra and Jansai Anganwadis in Vasai, Dr. Kakodkar was briefed about Early Childhood Care and Education, the Project Sneh model and its strategies, operational components and future plans along with performances and process experiences.

Dr. Kakodkar engaged in an informal interactive session with Anganwadi Workers and Helpers, where they shared their personal and professional experiences relating to the impact of Early Childhood Education activities promoted at the Anganwadi level. A few Project Sneh field supervisors passionately spoke about their involvement in their work and also narrated their experiences.

By the end of the visit, Dr. Kakodkar expressed and reiterated, “Due to educational deficiency, there is a negative impact on the development of a country, thus the need to emphasise on Early Childhood Education” and that, “listening to experiences of emotional Anganwadi Workers and Anganwadi Helpers was a thrilling experience for me”.

Handmade TLMs for Prenumeracy and Sensory Concept Development

Dr. Anil Kakodkar visiting the Juchandra and Jansai Anganwadis with Dr. Ramesh Panse

Dr. Anil Kakodkar visiting the Juchandra and Jansai Anganwadis with Dr. Ramesh Panse
OUR PARTNERS IN MAHARASHTRA

Founded by Anutai Wagh and veteran educationist Ramesh Panse, Grammangal is an organisation dedicated to propagating science-based teaching-learning methodologies and techniques to improve the quality of education at the pre and elementary school levels. Through various programmes, projects and publications, they engage with school systems, individual schools, the government as well as the wider community to bring about deep, sustainable changes in the way children learn in school, making education a stress-free and joyful experience.
Website: www.grammangal.org

Established as an initiative to curb malnutrition, AROEHAN is a grassroots organisation that aims to bring about sustainable changes in the tribal communities of Palghar through integrated approaches of development in the areas of Right to Health, Education, Livelihood and good Governance.
Website: www.aroehan.org

Operation ASHA (OpASHA) is a non-profit organisation founded in 2006 to provide tuberculosis (TB) treatment at economically feasible rates to disadvantaged communities. The organisation’s primary work is detecting and curing TB and preventing and treating Multi-Drug-Resistant Tuberculosis (MDR-TB).
Website: www.opasha.org

Since 2001, WCCL Foundation has been working in the field of Arts Based Therapy (ABT) for special populations. The scope has expanded and more populations have benefited from ABT. WCCL has trained more than 300 ABT Practitioners offering Arts Based Therapy in India.
Website: www.wcclf.org

BEMPU Health aims to provide children the chance to live full and healthy lives. To achieve this, BEMPU Health offers innovative life-saving health products for children in low-resource areas.
Website: www.bempu.com

Samhita Social Ventures is a social sector consultancy that provides solutions for companies and foundations to implement impactful initiatives, leveraging the strengths of diverse stakeholders. Since its inception, Samhita has been involved in a wide range of initiatives in healthcare and sanitation, education, community empowerment, vocational training, rural livelihoods, and financial literacy amongst others.
Website: www.samhita.org
IT TAKES ONE PERSON TO LEAD CHANGE
PROJECT SNEH IN JHARKHAND

Project Sneh was launched in Bokaro, Jharkhand in FY2018, to strengthen the delivery of Early Childhood Education through Anganwadis with strategic overlays of nutrition and health interventions for the holistic development and growth of children. To improve the service delivery of the Integrated Child Development Services scheme, a multi-pronged approach has been designed in partnership with the district administration to boost the service system and enhance the health and education-seeking behaviour of the community. This three-year programme attempts to demonstrate change in the 465+ Anganwadis and communities they service and support sustainable development of this aspiring district.
About Bokaro

Jharkhand is one of the newest states in the Indian union, carved out of the southern part of Bihar in the year 2000. It is located in eastern India and is primarily rural with dense forests and semi-forest areas. Only 24 percent of its population of 32,988,134 resides in cities, towns and villages. The literacy rate is abysmal at 66.4 percent and 39 percent of its population is said to be living below the poverty line. Furthermore, inaccessibility and lack of communication facilities have resulted in the deprivation of basic development infrastructure, ignorance of rights among the population, lack of welfare programmes, poor healthcare and medical facilities and lack of clean drinking water and sanitation.

Over a quarter of the population belongs to tribal communities who engage in traditional occupations and are unaware of new approaches to increase incomes and improve livelihoods. This is due to the absence of digitally driven, skill enhancement initiatives, leading to widespread socio-economic stagnation across the region.

The district of Bokaro was created on 1st April, 1991 by merging the Chas and Chandankiyari Blocks of Dhanbad district and the Bermo Subdivision of Giridih district to form a new district with the administrative headquarters at Bokaro Steel City. There are a total of 635 villages, 249 gram panchayats and 27 towns in the district.

With a population of 20,62,330, about 6.25 percent of the state’s population, Bokaro has a male population of 52 percent compared to a female population of 48 percent. As per the Census 2011, it is the second most densely populated district in the country with a population density of 715 per sq.km compared to the national population density of 328 per sq.km. About 14.24 percent of Bokaro’s population is in the age group of 0-6 years of which 39.8% of children under 5 are stunted, 36.9% are wasted, 17.6% are severely wasted and 50.8% are underweight. Additionally, the lack of care and education for young children has adversely affected school readiness, learning and health (physical, emotional and intellectual). Thus Early Childhood Care and Education (ECCE) intervention is a must and is the only vehicle that can deliver appropriate care and education to young children to help in their overall development.

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6 www.census2011.co.in/census/state/jharkhand.html
8 www.census2011.co.in/census/district/93-bokaro.html
9 www.jharkhandsfc.in/docs/pdf/jh_factsheet_355_bokaro.pdf
Project Sneh: Implementation in Bokaro

In November 2017, DHFL Changing Lives Foundation signed a Memorandum of Understanding (MoU) with the District Administration of Bokaro and launched Project Sneh in three of its nine blocks - Petarwar, Kasmar and Jaridih. Of a total of 2262 Anganwadis in the districts, 1856 were assessed over a period of two months and 465 Anganwadis were further assessed closely on the aspects of pre-school education and health & nutrition before finally being selected to initiate the programme.

Programme Activities

In the financial year of 2018-19, Project Sneh conducted a series of focused interventions to strengthen the delivery of services in Anganwadis and improve the healthcare system. With the support of the District Administration office and Village Level Entrepreneurs (VLEs), who manage Common Service Centres (CSCs) in the communities, a district level assessment of Anganwadis was conducted. A questionnaire was designed to understand the gaps in Anganwadi services. The questionnaire was then digitised for the VLEs to administer the survey on their mobile phones.

- Partnership with the District Administration of Bokaro
- Pre-work for baseline study of all Anganwadis
- NGO identification for early education and health components of Project Sneh
- Programme planning, field recruitment and training

In FY2018,

- Baseline study covering all Anganwadis in Bokaro District
- Programme was launched with ECCE activities for 465 Anganwadis
- Training and TLM Support for Anganwadis

In FY2019,

- Project Sneh Launch Ceremony in Bokaro with DC, Bokaro Mrityunjay Kumar Barnwal
Laying the Foundation for Change

Capacity-building has been the cornerstone of Project Sneh. At the onset, it was observed via the baseline data that frontline workers had limited knowledge and competencies to ensure the delivery of quality pre-school education. This was due to limited trainings and mentoring support. It was imperative that customised trainings and workshops were conducted for them along with the provision of supportive supervision through ICDS Supervisors.

Anganwadi Workers went through three rounds of centralised training on pre-school education for six rigorous days. This training covered the importance of ECCE, roles and responsibilities for responsive care giving, significance of community participation and coomunity on-boarding, pedagogy, weekly calendar-creation and effective delivery of the curriculum. Additionally, Anganwadi Workers and Helpers were taught to create TLMs and also use naturally available material to arouse the interest of children. Attendance in these trainings and workshops was upwards of 95 percent.

283 Anganwadi Workers out of 465 were observed to be actively engaged in ECE activities post their training.

Additionally, Anganwadi Workers, who were previously unable to effectively use growth charts and digital weighing scales, were made to undergo two days of growth monitoring using WHO-approved growth charts and digital weighing scales.

50 percent of Anganwadi Workers are now able to use growth monitoring tools effectively and without supervision.

Anganwadi Helpers also underwent two rounds of centralised training over four days to develop a perspective on pre-school education. These capacity-building workshops laid emphasis on their roles in the Anganwadis along with child development domains, stages of development, principles of learning and concepts of early education. The average attendance across all trainings stood at 95 percent.

283 Anganwadi Workers out of 465 were observed to be actively engaged in ECE activities post their training.

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36 percent of Anganwadi Helpers have now demonstrated proficiency in the ability to perform ECE activities independently.

In addition to these intensive and result-oriented trainings, monthly meetings were conducted at the panchayat level. Angwanwadi Workers of the panchayat would convene at one Anganwadi to review concepts, prepare weekly timetables, create TLMs and share best practices.

132 panchayat level meetings were conducted.
TEACHING AND LEARNING MATERIALS AND INFORMATION, EDUCATION AND COMMUNICATION (IEC)

As a part of Project Sneh’s strategy, all 465 Anganwadi centres were provided with play materials, activity books for children and stationery to create handmade TLMs. In addition, every Anganwadi was provided with IEC materials on care during pregnancy as a way to promote health and nutrition.

• 100 percent of Anganwadis were made learning-friendly by utilising already available TLMs
• 100 percent of Anganwadis were now equipped with TLMs
• 14 Anganwadis are now making their own contextual and low-cost TLMs
Individual and Group Engagement to Create Caring and Robust Connections in Members

In its efforts to implement a holistic approach to child development, Project Sneh has recognised the need to work simultaneously with adolescent girls, pregnant women and lactating mothers.

Adolescent Girls

Adolescent girls in the community were organised into peer groups and sensitised on sexual and reproductive health-related issues. Furthermore, peer-educators were identified from within the group to act as resource persons delivering sessions on menstrual health, understanding one’s body and other gender-related areas. These adolescents are popular as ‘Snehonis’ in the community. 242 adolescent groups have been trained on health and nutrition issues and 53 peer educators have already been identified.

Project Sneh is also designing a special programme for adolescent boys to and educate them on sexual health and empowerment.

Pregnant Women

High-risk pregnant women were identified and home visits were conducted by frontline workers. They were sensitised on the importance of Antenatal Care (ANC), institutional delivery and provided with information on welfare schemes. 717 high risk pregnant women were tracked and counselled. 74 percent of Anganwadi registrations were observed in the 1st trimester.

Lactating Mothers

587 lactating mothers were identified, trained and educated on effective breastfeeding practices and sufficient nutrition intake. They were counselled and provided with information on welfare schemes and made part of discussions relating to best practices on infant-care to avoid malnutrition and micro-nutrient deficiency.
**Children with Severe Acute Malnutrition (SAM) and Moderate Acute Malnutrition (MAM)**

Home visits were conducted for SAM and MAM children to sensitize families on the importance of a nutritious diet, Water, Sanitation and Hygiene (WaSH), correct feeding practices and to assist families in getting support from the Anganwadis. Support was also provided during Malnutrition Treatment Centre (MTC) referrals. **90 SAM children and their families were referred, counselled and supported. 40 percent of children have made full recovery.**

![MUAC Measurement for Nutritional Assessment](image1)

**Village Health Sanitation and Nutrition Day (VHSND)**

Project Sneh has leveraged the Village Health Sanitation and Nutrition Day (VHSND) platform, where all community members are accessible on a single day. It has been noticed that improving the quality of VHSND service delivery directly improves short-term health indicators. Therefore, it is imperative that a checklist, where the indicators are observable, be prepared and the field facilitator be present at the location where the VHSND is taking place.

Prior to Project Sneh’s intervention, the VHSND sites served primarily as sites for Routine Immunisation (RI) where vaccination and partial ANC services were delivered. However, after this intervention, our team has successfully involved Community-Based Organisations (CBOs), community counterparts, stakeholders as well as government counterparts to strengthen service delivery through supportive supervision. **The efforts have resulted in effective delivery of health services like improved Immunisation services and ANC services. Counselling sessions with target-based home visits are ensured. Records are registered more efficiently.**

**Godh bharai (Baby Shower)**

In order to educate pregnant women and their families on nutrition requirements and the support needed during childbirth, Project Sneh conducted Godh Bharaiis or baby showers, a traditional and effective programme for behaviour change.

![Godh Bharai being conducted to provide knowledge on Nutritional Requirements in Kasmar](image2)
Community Engagement to Drive Ownership and Accountability for Results

In addition to its emphasis on strengthening the delivery of services by building the capacity of service providers, Project Sneh strives to build community participation and ownership towards child development. Our programme identifies statutory committees and village organisations in the community and mobilises their participation.

Anganwadi Level Monitoring and Support Committee (ALMSC)

To ensure collective ownership in the Anganwadi and its obligations, Project Sneh focussed on the formation and activation of an Anganwadi Level Monitoring and Support Committee (ALMSC). The ALMSC conducts periodic meetings which serve as equal and open platforms for parents, Anganwadi teachers, zilla parishad school primary teachers, local organisations, gram panchayat representatives and the community as a whole to come together to discuss the importance of ECCE and other aspects relating to the Anganwadi. This platform enables participants to understand the vision and common goal of the Anganwadi and to reflect on their role in the development of the children by understanding their responsibilities vis-à-vis that of the state.

49 ALMSCs are now activated plus 464 ALMSCs and Parent meetings were organised at the Anganwadis to create ownership.

20 Anganwadis have shifted from small rented rooms to community spaces with support from the Panchayat Raj Institutions (PRI) and the community. 261+ Anganwadis have been cleaned/repaired through Shramdaans (voluntary contributions). Community members helped 70 Anganwadis with the required materials, infrastructure repairs and play material for children.

477 out-of-Anganwadi students have re-enrolled in their respective Anganwadis.

Mata Samiti (Mothers Association)

In an effort to discuss the importance of antenatal and postnatal care, exclusive breastfeeding, immunisation, hygiene and importance of MTC in case of SAM children, Project Sneh has encouraged Anganwadi Workers to reconstitute the defunct Mata Samitis and conduct meetings with mothers’ groups on a monthly basis. 291 Mata Samiti meetings were successfully conducted.

An Anganwadi being cleaned through Shramdaan

A Mata Samiti meeting in progress
Since its inception, Project Sneh has aimed to find solutions for issues prevailing in the Anganwadis at the Gram Panchayat level. To achieve this, the field facilitators mobilised members to conduct regular Gram Sabha meetings. The meetings are designed to effectively engage the representatives of Panchayat Raj Institutions (PRI), ALMSC and Mata Samitis, while building relationships and sensitising them to their roles and responsibilities in the context of Anganwadis and the holistic development of the children through the participation and collaboration of all of the stakeholders.

17 Gram Panchayat level meetings were organised in the Petarwar, Jaridih and Kasmar blocks in Bokaro district where participants comprised of Anganwadi teachers, assistant teachers, parents, members of the ALMSC, Panchayat Raj Institutions, Mata Samiti and Self-Help Groups.

24 Gram Panchayat development plans were facilitated with a focus on potable water, sanitation and cleanliness.

Village Health Sanitation and Nutrition Committee (VHSNCs)

Village Health Sanitation and Nutrition Committee is a key committee that ensures active monitoring and supervision of service delivery in community. It was observed that these committees were defunct and that members would stay away from meetings. Project Sneh facilitators mobilised members to activate Village Health Sanitation and Nutrition Committees. **113 VHSNC meetings were conducted.**
Mentorship to Pass on the Baton

In order to ensure effective on-ground implementation, Project Sneh identified facilitators from within the community who were then trained to mentor between 20 and 25 Anganwadis. Today there are 16 facilitators who focus on education-related issues in the community while there are an additional 31 facilitators who focus on health and nutrition-related issues in the community.

We refer to these facilitators as Project Sneh’s ‘levers of change’ because it is they who drive transformation in the Anganwadis. These facilitators are well-trained and demonstrate high levels of competencies in mentoring and community engagement.

Since these facilitators belong to the local community, they possess a deeper understanding of the local dynamics and are therefore able to design engagement strategies with and for the community. In the long run, their knowledge and expertise help them continue their role as influencers beyond the duration of the programme.
ENGAGING THE COMMUNITY THROUGH CHHAU DANCE

From the very beginning, Project Sneh has tried to reach out to communities by identifying Maternal and Child Health and Nutrition (MCHN) indicators and their interlinks with socio-economic and cultural aspects. However, these efforts require the support of the entire community, both directly and indirectly.

In order to further improve community engagement and create awareness of roles and shared responsibilities at the Anganwadis on MCHN services, folk performances were organised at the village level. The idea was to use a medium of mass communication and entertainment to help the villagers learn the relevance of Health, Nutrition, Anganwadis and services provided during Village Health Sanitation and Nutrition Days vis-à-vis their role in all of these.

The folk performance, in the form of a 'Chhau Dance', used imagery and expressions from the villagers’ daily lives to touch them on an emotional level.

This relatable Chota Nagpuri story proved unique in its appeal to the masses, while simultaneously imparting health and nutritional education on a level that was identifiable to the communities.

After Folk Artisans performed Chhau and Jhumar dances in villages across the block, audiences were encouraged to share their learnings via questionnaires and demonstrations.

A total of 76 folk performance events were carried out, which helped retain relevant information with regard to the health and nutrition components. Community members were now aware of the frontline workers’ roles in providing services and support.

There has also been a noticeable increase in the attendance of children at the Anganwadis, with parents accompanying them to interact with the Anganwadi Workers and Helpers and offer support in various activities. In addition, the head of the Hisim Panchayat has recognised the importance of the role played by folk performances in enhancing the understanding of maternal and child health & nutrition.
Adolescent Girls Programme: An Environment for Self Development

Adolescence is a critical period in a woman’s life. During this period, girls from low-income communities face several issues ranging from physical and mental health to educational and social constraints. DHFL Changing Lives Foundation, through a variety of trainings, activities and check-ups, aims to ensure that girls going through adolescence are empowered at the household, school and community level.

In November 2018, our field facilitator in Bokaro, Jharkhand, was invited to a meeting with a group of adolescent girls from a village. While the Anganwadi Helper lead the discussion, the Project Sneh field facilitator discreetly monitored the sessions to gauge the interest-level and participation of the girls in various programmes and training sessions. These sessions with the girls were not only informative, but also highly interactive and were attended by the majority. The competency-based orientation was especially successful with activities like recipe demonstrations and games, and the girls were thoroughly interested in sessions relating to VHSND and Child Marriage. The positive results of these training sessions were evident from the fact that within a week the girls demonstrated genuine interest in working towards the betterment of their community by taking the initiative to go from door-to-door collecting donations to improve VHSND. This has also helped trigger a larger interest from the community in the activities taking place at the Anganwadis.

The effectiveness of these trainings and group activities seek to improve outcomes by empowering adolescent girls to address various social constraints that surround them. One such example is the case of Chanda Kumari, whose family decided to get her married off before the age of 18. Being a part of the village adolescent group, she was able to share details about her situation with her friends, who were also part of the group. Peer support always helps build confidence, and after having mustered up the courage to address this issue, she approached her parents. At this stage it must be understood that in these areas girls rarely resist marriages for several reasons. Using the information she acquired from the training she was able to have a mature and prudent discussion with her parents who were eventually convinced to delay her marriage till an appropriate age.

This goes to show that integrated adolescent programmes shape the future of girls and improve their overall health and well-being while making them self-reliant and aware.
Reformation of the Anganwadi Level Monitoring and Support Committee (ALMSC)

Madaighoghra village, in Khetko Gram Panchayat of the Petarwar block in Bokaro district, has a population of 810 people comprising of 404 males and 406 females. The two primary occupations in this region are business and farming. The Anganwadi in this village has its own building at the entrance to the village and is run by a teacher and an assistant teacher. A total of 20 children - 12 boys and 8 girls, are enrolled at the Anganwadi.

Primary Issues

Although the Anganwadi functions in its own premises, it still lacks basic facilities like toilets, electricity, and a playground. To add to this, the wild bushes surrounding the Anganwadi make it unsafe and unhygienic for the children. It was also noticed that the ALMSC has been inactive since its inception, leading to a lack of structure that ensures the proper functioning of the Anganwadi.

Intervention

An Anganwadi Level Community Meeting (ALCM) was organised in August 2018, to discuss the various problems faced by the Anganwadi like low attendance, childrens’ safety and the need to reform the ALMSC.

The meeting was attended by a total of 27 participants comprising of parents and guardians, teachers, representatives of the PRI, Mata Samitis, a women’s group and members of the youth. During the course of the meeting, it was discovered that parents weren’t equipped with accurate knowledge and information regarding the role played by the Anganwadi in the development of their children. To add to this, parents were not inclined to send their children to the Anganwadi for reasons relating to hygiene and safety.

In a bid to change their perception, parents were provided with detailed explanations about the roles and responsibilities of the ALMSC, the activities conducted here that would inadvertently benefit their children and the importance of teaching and learning resources used at the Anganwadi.

The ALMSC was reformed after a consensus with the participants. The newly selected members assured their support in the effective functioning of the centre, including motivating parents to enrol and increase the attendance of the children. The premises of the Anganwadi was cleaned by community members and this attracted another 6 children to enrol.
Facilitating survival, growth and development from Jaridih Block

Laxmi Devi from Jaridih block was regularly counselled by Angawadi Worker (Kamla Devi) and Sahiya (Rita Devi) during home visits and also at the Anganwadi for ANC Registration.

With the collective efforts of the Anganwadi Worker, Helper, Project Sneh filed Facilitator and ASHA, Laxmi was convince to give birth in a government hospital. Laxmi was blessed with a Baby Girl. As it is the tradition in this area, the relatives brought some jaggery mixture to feed the baby with the notion that the baby’s voice will be sweet. However, due to the counselling received from the Anganwadi Worker and Project Feld Facilitator, Laxmi’s Mother-in-law refused to feed the jaggery to the newborn as it may lead to an infection. Instead - as she was taught - she held the baby and properly positioned the child to her mother’s breast for feeding.

Laxmi also remembered that the Anganwadi Worker had advised her to feed the thick yellow milk (colostrum) that is secreted in the first 2-3 days to her child. Laxmi therefore did not discard the colostrum and fed it to her child for nutritional values.

Even after the discharge from the hospital, it was observed during the regular follow ups by the Anganwadi Worker that the baby was exclusively breastfed for a period of six months. This has also inspired other pregnant women and their families.
Prajayatna has been working for more than 15 years to bring about a systemic change in the functioning of the education system and thereby to ensure quality education for all children. They work intensively with communities. In this context, they have worked towards building institutional capabilities of structures such as school management committees, Anganwadi level Monitoring Committees, and more. They work closely with the Department of Education, Panchayat Raj Institutions and the Departments of Women and Child Development of Karnataka, Telangana, Uttar Pradesh and Rajasthan. Website: www.prajayatna.org

CINI, or The Child in Need Institute, internationally known as Child in Need India, is an international humanitarian organisation aimed at promoting sustainable development in health, nutrition and education of children, adolescents and women in need in India. The Institute is headquartered in Kolkata and operates in some of the poorest areas in the country. Website: www.cini-india.org

Samhita Social Ventures is our project monitoring partner. Website: www.samhita.org
IT TAKES ONE INSPIRATION TO BE THE CHANGE
PROJECT SNEH IN MADHYA PRADESH

Project Sneh was launched in the Khargone and Burhanpur Districts of Madhya Pradesh in FY2019, to support and strengthen the health & nutrition and early education initiatives of the state government. With important contributing factors such as an advanced theme-based Early Childhood Education curriculum, well-compensated frontline workers and an existing Anganwadi framework in place, our efforts are concentrated on evaluating and filling in the gaps for successful implementation of the Integrated Child Development Services (ICDS) scheme especially for effective last mile delivery. Our focus remains on system-strengthening and the improvement of health and education seeking-behaviour in the community through an ecosystem approach.
About Khargone and Burhanpur

Madhya Pradesh, the fifth-most populated state in the country, is also called the tribal state of India; with a 14.7% tribal population of India. According to the Global Hunger Index, NFHS and DISE data, 60% children in this state are malnourished. Khargone and Burhanpur districts have reported a total literacy rate of 62.7% and 64.36% respectively (less than the average literacy rate of the state which stands at 69.32%). 58% children in Khargone and 46% children in Burhanpur are underweight; making them districts that record the highest number of malnutrition cases in Madhya Pradesh. Furthermore, the reading and mathematical abilities of children (at the STD III to STD V learning level) stand at only 42.9% and 27.9% respectively for Khargone, and 17.7% for both competencies in Burhanpur district.

Issues such as a lack of awareness, livelihood opportunities, resources, prevalence of myths and superstitions, high micronutrient deficiency, malnutrition and low literacy rates need to be addressed. Migration and relocation to other states or cities for employment are other contributing factors that affect the continuity of services to target groups.

Against this backdrop, Project Sneh was designed with the guidance and support of the Department of Women and Child Development (DWCD) and the Government of Madhya Pradesh in 2018. The programme, over a period of three to five years, aims to reduce malnutrition and promote holistic development of a child’s social, emotional, cognitive and physical needs. A solid and broad foundation for lifelong learning and wellbeing is being built across 1187 Anganwadis and communities in six blocks of Burhanpur and Khargone districts; namely Burhanpur Rural, Neganpur and Shahpur (in Burhanpur) and Bhagwanpura, Bikangaon and Zirniya (in Khargone).

10https://www.census2011.co.in/census/district/307-west-nimar.html
11https://www.census2011.co.in/census/district/334-burhanpur.html
Project Sneh began its implementation to bring sustainable impact in the Anganwadi ecosystem through its capacity-building approach ISA\textsuperscript{C}\textsuperscript{2}, primarily involving all stakeowners and contributors in the children’s development. The project received full support and cooperation from all custodians of the ICDS schemes.

Our first step

We strongly believe, that for the sustainability of any programme, a lasting and strong relationship with the community is important. Project Sneh identified field facilitators from within the community and trained them to function as Independent Field Supervisors or community workers. Their trainings focused extensively on constructive education, child-centric teaching and pedagogy, community connects and exercises on the issues of health, malnutrition, livelihood, counselling skills, feedback collection and reporting. This cadre of grassroots leaders has been instrumental in improving the state of Anganwadis in these six blocks.

Facilitating a Responsive Relationship

During the initial period, our community workers visited the 1187 Anganwadis and observed the level of functioning of ECCE. Periodic visits further helped them gain trust and build a rapport with the Anganwadi Workers and Anganwadi Helpers.

With the support of Anganwadi Workers, door-to-door visits were conducted to spread awareness about the importance of preschool activities at Anganwadis and their positive impact on the development of children.

These customised handholding and mentoring visits by the Project Sneh supervisors were vital in encouraging the Anganwadi Workers and Helpers to understand and undertake activities relating to Early Childhood Education in a contextual manner. It also provided a boost for an efficient system of managing malnutrition at the community level with early detection and treatment.
With help and encouragement, the Anganwadi Workers and Helpers found new enthusiasm and began conducting educational activities based on the guidelines provided by the ICDS scheme’s curriculum, which focussed on different domains of development like Free Play, small and large group activities, creative and constructive activities, outdoor activities and language development. 20% of Anganwadis have initiated ECE activities according to the State Curriculum.

Tools for Learning and Play at Anganwadis

In our efforts to enhance ECCE, we lay emphasis on the development of effective TLMs using locally available components like mud, corn and pebbles. Project Sneh TLMs cover a spectrum of educational materials to support the learning objectives set forth in the session plan. They mainly consist of games, flashcards, toys and charts to name a few. TLMs enhance the learning process by helping students familiarise themselves with the subject and interact not only with the object, but also with each other. 24% of Anganwadis are able to make TLMs from locally available material for basic educational activities.

20% of Anganwadis have initiated ECE activities according to the State Curriculum.
According to the Madhya Pradesh government guidelines, every Anganwadi must celebrate Baal Choupal on the 25th of each month. The word Choupal means a village gathering. Baal Choupal denotes a celebration that involves children, parents and stakeholders coming together on a platform that encourages children to articulate their feelings and exhibit the skills they have learned. This approach helps promote early education at community level and spread awareness about the importance of education.

It was, however, observed that the ground-level execution of this activity was almost negligible and not yielding favourable results on any level. Due to Project Sneh’s interventions, efforts were made to ensure that the importance of these endeavours are fully understood by both, the community as a whole and other important stakeholders.

The efforts generated positive results and a total of 2493 children and 1103 community members have participated in 176 Baal Choupals.

While we aimed to motivate the children, Anganwadi Workers and Helpers by providing timely support and mentoring, other efforts were simultaneously made to include and encourage parents to continually send their children to Anganwadis. It is pertinent that Baal Choupals be regular and of a certain value if momentum is to be maintained. That is, to ensure a quality platform for children to perform pre-education activities that they learn at the Anganwadi, and to expose communities to these activities in order to gain an understanding of the importance of pre-education and competencies of child development.
In addition to the larger Baal Choupal, Anganwadi Workers were mentored and encouraged to organise weekly ‘Baal Sabhas’ or meetings that provide children with opportunities to perform activities learned by them in the previous week. This helps children gain confidence and the ability to articulate well through repetition.

Over the first year of implementation, 491 Baal Sabhas have been organised in different Anganwadis, and a total 8692 children, 4077 community members and 1010 different stakeholders participated in Baal Sabhas across both districts.

Impact of Baal Choupal and Baal Sabha

- Every child gets an opportunity to engage with their peers in a healthy environment and express their learning by displaying their skills
- A dramatic and proven improvement in the child’s confidence and articulating abilities
- Increase in numeracy as children interact with each other through these activities
- Happiness and pride among parents who observe increase in skill and child development
- Introduction of complex ideas through interactive mediums such as skits and Q&A sessions

A total of 154 Anganwadi’s Baal Sabhas have been organised by Anganwadi Workers without the need for intervention.
Traditional gender roles dictate that playing in a doll house is for girls. However, in most situations, it can provide the right impetus for all children, regardless of gender. When children are involved in role-play, they can freely explore and learn about the world surrounding them. During their play, children use a wide variety of representations for the objects and actions they are experimenting with.

A Gudiya Ghar (Doll House) engages children in role-play and dialogue-exchange which helps them relate to and develop social, emotional, and intellectual skills. According to child development experts, role-play enables children to gain confidence and a sense of self-worth, while also serving as an essential component for learning. A Gudiya Ghar in the Anganwadi includes a swing for a doll to sleep on and is made with local recyclable items like old sarees and toys. These doll houses have clay kitchen toys made by Anganwadi Workers, Helpers and children and are also decorated with drawings made by the children. Gudiya Ghars contribute to enhancing the retention of irregular children and holding their attention.

304 doll houses are made in different Anganwadis by Anganwadi Workers and Helpers with the help of Field Facilitators.
**Nutrition is the Cornerstone of Good Health**

As observed during community visits, low attendance in Anganwadis is also attributed to ill-health and malnourishment. The health and nutrition component of Project Sneh emphasises on controlling the issue of under-nutrition and improving access to better healthcare and nutrition services through Anganwadis and Nutrition Rehabilitation Centres (NRCs).

To achieve and strengthen the delivery of the same, trainings have been provided to CDPOs, ASHAs and ANMs. The focus of these trainings is on CMAM, Infant and Young Child Feeding (IYCF) practices, growth-monitoring and nutrition. 59+ ICDS members in Khargone and Burhanpur districts were trained on CMAM during the year.

**WaSH at Anganwadis**

Project Sneh has encouraged Anganwadi Workers to inculcate best practices around safety, cleanliness and hygiene, display of colourful educational charts at eye level and mark subject-wise designated corners for easy access in their Anganwadis. This positive change in the Anganwadi ambiance has paved way for stimulating thought-evoking behaviour in children. Anganwadis which have demonstrated this child-centric approach have also registered an increase in child attendance.

**Community Connect for Overcoming Challenges around Under-nutrition and Micronutrient Deficiency**

Frequent home visits are conducted by the Anganwadi Workers and ASHAs to counsel and sensitisise expectant and lactating mothers on the importance and safety of ANC and institutional delivery, effective breastfeeding practices, sufficient nutrition intake and significance of a small family.

Project Sneh tracked and counselled 10118 pregnant women. 10548 lactating mothers were sensitised with the importance of breast feeding. With collective efforts, 825 women registered for ANC Checkups and 792 institution deliveries were achieved during the year.

It was a challenge, in this region, to make parents understand what malnutrition is and why their children do not survive. Majority believed that malnutrition is inherent, a kind of punishment by God for their ill karmas from a previous birth, and that nothing can be done about it.

Further challenges lay around the parents’ apprehensions to admit their children in the NRC for 14 days and take them for regular follow ups. This was due to considerable losses in daily wages and savings needed to feed their families and other children. Project Sneh Community Workers counselled and vigilantly followed up with parents and families of SAM and MAM children while facilitating the support of Anganwadis. In addition, referrals were provided for NRC admissions and follow ups. 237 SAM and 267 MAM children were cured through regular health counselling and the intervention of field facilitators. 190 children have been cured through NRCs.

These relentless efforts have slowly resulted in a positive shift in the mind-sets of some community members who have opted to take that one step towards healthy holistic development.
A nutrition garden plays a vital role in addressing malnourishment, micro-nutrient deficiency while promoting good health. Fruits and vegetables rich in nutrients, especially in phytochemicals, antioxidants, Vitamin C, Vitamin A and folate like leafy vegetables, brinjals, potatoes and more are grown in these gardens. Drumsticks and trees which bear fruits and vegetables are planted as fences in these gardens.

The unique advantages of a nutrition garden are:

- Supply of fresh fruits and vegetables high in nutritive value
- Supply of fruits and vegetables free from toxic chemicals
- Help in cutting down expenditure on the purchase of vegetables
- Awareness in children of the dignity of labour

The Project Sneh team has begun to establish nutrition gardens at the Anganwadi and community levels by growing a variety of vegetables on available land for improved dietary intake. Anganwadi Workers and Helpers have carried out a significant amount of work in terms of scrutinising the area of garden, layout and selection of crops depending on availability and nature of land.

45 such nutrition gardens have been recognised at the village level in Khargone and Burhanpur to enhance the nutritional intake and form a continuous supply of fresh vegetables for use in Anganwadis and for the children who fall in the category of SAM.

8 such gardens have been established at:

- Bhandlen AWC-2, Kishan faliya
- Surva AWC-2, Bhikhangoan Navin, Bhikhangoan
- Methya khedi, Bhagavanpura
- Khariya Pani, Bardewala
- Ardana- Zirniya Navin
- Gaybeda – Mitawal
- Mundiya- Chiriya
- Chapoli- Helapadava
INSPIRING STORY FROM MAJHGAON

A Culture of Challenge and Change

By Manish Rathore, Independent Supervisor, Majhgaon Village, Neapanagar

Majhgaon, the village I work in, consists of around 900 Korku Tribe members. The Korkus are an Adivasi group predominantly found in the Khandwa, Burhanpur, Betul and Chhindwara districts of Madhya Pradesh and adjoining areas in Maharashtra. Poverty and restricted use of ancestral land have led to a serious problem of malnutrition and starvation among the Korkus. Originally, practitioners of agriculture, animal husbandry and allied means of sustenance, 40% are now landless and dependent on manual labour work, while 20% have migrated to other states to seek employment. Education levels are dismal due to a lack of understanding of its importance.

The Anganwadi at Majhgaon had minimal attendance and despite access to TLMs, no educational or developmental activities were being conducted for the children. As a result the Anganwadi was not being opened on time.

After fully understanding the nature of the drawbacks and disorganisation at the Anganwadi, all the relevant information was gathered. While there were a number of families in the village whose children weren’t encouraged to attend the Anganwadi, there also seemed to be families that had migrated from other places and could be encouraged to enrol their children.

We began working with a two-pronged strategy to address these issues. The Anganwadi Worker and Helper were sensitised regarding the importance of education and were mentored in conducting the activities and usage of TLMs. The other part focused on sensitising the parents and community, persuading them to enrol their children, while explaining to them the importance of pre-school education.

With perseverance and regular counselling, the children began coming to the Anganwadi. Innovative and interactive pedagogy were used to keep the children engaged. The activities were based on an exciting monthly theme, which included acting and singing catchy tunes. As the weeks passed, we noticed that the children began enjoying their time spent at the Anganwadi and were always looking forward to it. Even the Anganwadi Worker and Helper began imbibing these habits and were able to replicate these teaching methods identically. Once they got into a rhythm of doing things, I noticed that they began adhering to the daily timetable, a far cry from the situation I had first encountered when I arrived here.

Today the children are more confident when speaking to people and wear clean clothes to the Anganwadi. The schedule set in place is being followed and the Anganwadi Worker and Helper have gained a lot more confidence to conduct these activities without the need for supervision.
Jansahas, since past 20 years, is committed to promoting the development and protecting the rights of socially excluded communities with a special focus on girls and women through the eradication of all forms of bondage, including manual scavenging and caste based prostitution. The organisation has been instrumental in the empowerment of adolescent girls and women to end violence and gender injustice, skill development for dignified livelihoods and social entrepreneurship, legal aid for access to justice and reform in criminal justice system. They have supported education, food and nutrition security, land and agriculture development, and the empowerment of communities through capacity and organisation building. Website: [www.jansahasindia.org](http://www.jansahasindia.org)

Samhita Social Ventures is our project monitoring partner. Website: [www.samhita.org](http://www.samhita.org)
IT TAKES ONE COMBINED ACTION TO CREATE A PROFOUND IMPACT
ECCE United is a non-competing coalition of like-minded entities, foundations, trusts, CSRs, academia and social purpose organisations committed to Early Childhood Care and Education or Early Childhood Development.

DHFL Changing Lives Foundation anchored ECCE United in June 2018 to provide a platform for knowledge-sharing, collaborations, research and innovation. ECCE United is essentially a collaborative ‘think-tank’, wherein national, state, regional and local organisations such as service delivery organisations, professionals, donors, thought leaders and researchers form a voluntary alliance to share a goal of improved comprehensive Early Childhood Care and Education and well-being for all.
Our Charter

Create a Coalition of ECCE Champions

ECCE United intends for experts from the investment sector, philanthropy, corporations and policy makers to convene around key issues that need collaboration for impact. By creating and fostering ECCE Champions across the region and bringing in leading global speakers to convenings, ECCE United envisions amplifying voices and driving a call for action amongst social investors.

Increase Philanthropic, CSR & Impact Investment Capital

ECCE United strives to create a range of opportunities for grant-making organisations to fund impact-ready Social Purpose Organisations (SPOs) working in the area of ECCE. By advocating measurable impact, outcomes and/or game changing solutions on ECCE for Foundations, CSRs and Family offices, ECCE United aims to promote effective practices and programmes.

Impact Investors represent an opportunity to bring in a new pool of private sector investors seeking both financial and social returns. ECCE United hopes to build the supply side of the impact investment pipeline, by fostering collaborations and partnerships with a range of investors to leverage their strength and expertise to unlock the current roadblocks and bring in this new pool of capital through the ECCE Platform.

ECCE United aims to link donors and investors with incubators, accelerators and intermediaries in order to promote collective funding opportunities and facilitate more co-investments.

Knowledge Exchange and Technical Partnerships

ECCE United acts as a platform for knowledge exchange and technical partnerships between multi-lateral agencies, implementing organisations, foundations and academia. This allows sharing of best practices, learnings and experiences in various formats including fire-side chats, round tables, webinars and so on. ECCE United envisions developing a repository of best practices, tools and resources for maximising impact.

Policy Advocacy

ECCE United aims to bring ECCE programmes to the centre stage of social investment. Furthermore, with ECCE Champions, social investors, practitioners and academia, ECCE United envisages working with the government to support their policies, strategies and planning in the field.
Members

Ideally all organisations or individuals who care for children, women and communities should join ECCE United. Foundations that give grants for ECCE interventions, impact and social investors in the ECCE sector, social enterprises related to ECCE interventions, NGOs working in ECCE sector, corporate/s using their CSR funds for this sector, research institutes, think-tanks, and academic institutes focusing on ECCE should join ECCE United.

Apart from these, any organisation working in the sector of nutrition, early childhood care, education, health, WaSH, livelihoods, overall poverty alleviation and allied fields are welcome to join.

As of March 31, 2019, ECCE United has 54 members from India, Thailand and The Netherlands

ECCEUnited@dhfl.com
EVENT ASSOCIATIONS

Bringing ECCE to the Centre-Stage through presence across various Social Forums

DHFL Changing Lives Foundation partnered with the Ambedkar University Centre for Early Childhood Education and Development (CECED), New Delhi for a 3-day National Conference titled “Every Child’s right to Early Childhood Development: Evolving Inclusive Practices”. The event was attended by over 200 practitioners, students, educators, NGOs and also had representation from the government. It encouraged the exchange of ideas, practices and learnings and also provided a platform to young minds to demonstrate innovative solutions for effective Early Childhood Care and Education. DHFL Changing Lives Foundation also shared its views on how inclusion is a critical component in ECCE programme strategies through panel and poster presentations.

DHFL Changing Lives Foundation partnered with Asia Venture Philanthropy Network (AVPN) to leverage their network and build ECCE as a fundamental social programme for foundations, civil society and the government. In December 2018, The Foundation along with the District Collector of Ranchi, Jharkhand presented Project Sneh and its strategy to Niti Ayog at the AVPN India Policy Forum in New Delhi. Furthermore, the Foundation showcased its three child-friendly Anganwadi models called ‘Snehangans’ at the Forum and AVPN India Summit. These infrastructure models of Anganwadis have been developed through a grand challenge conducted with the National Association of Students of Architecture (NASA), India. The Foundation also leveraged the AVPN Network to promote ‘ECCE United’, a coalition of foundations, social enterprises, academia, to generate and enlist a wider interest in effective child development programmes.

DHFL Changing Lives Foundation partnered with United Way India, Samarth Vyayam Mandir and Wilson College Nature Club in FY2019. Two young athletes from Light of Life Trust, India ran the Tata Mumbai Marathon 2019 on behalf of the Foundation.

DHFL Changing Lives Foundation partnered with United Way India, Samarth Vyayam Mandir and Wilson College Nature Club in FY2019. Two young athletes from Light of Life Trust, India ran the Tata Mumbai Marathon 2019 on behalf of the Foundation.
World Mallakhamb Championship in February 2019 in Mumbai, Maharashtra. The event saw participation of young children and youth from over 14 countries.

The Wilson College Nature Club, a forty year old forum with over 500 members, organised various activities to promote and generate awareness on nature conservation amongst young children.

The Wilson College Nature Club, a forty year old forum with over 500 members, organised various activities to promote and generate awareness on nature conservation amongst young children.

The activities included a nature concert put by students of Wilson College, trails to nature-park and DHFL BNHS Butterfly Garden for children from shelter homes, activities and workshops with young children and collaterals on nature conservation for children.

DHFL Changing Lives Foundation also participated in NGOBOX’s India CSR Summit 2018 in New Delhi and outlined the usage of Life Cycle approach highlighting the problems related to undernutrition, micronutrient deficiency and obesity, aligned to national interest.

We were also on the jury panel for YES Foundation’s flagship programme YES! I am the CHANGE. It is a nationwide mindset-transformation programme to inculcate the spirit of responsible youth citizenship to drive positive social action and depict stories of change of Non-Profits, Social Enterprises and Everyday Heroes through the impactful medium of films.
Audit Report

To the Members,

DHFL Changing Lives Foundation

I have audited the accompanying Standalone Ind AS financial statements of DHFL Changing Lives Foundation ("the company"), which comprise the Balance Sheet as at 31st March 2019, the Income and Expenditure Account, the Cash Flow Statement and the Statement of Change in Equity for the year then ended, including a summary of significant accounting policies and other explanatory information (hereinafter referred to as “the Standalone Ind AS financial statements”).

Management’s Responsibility for the Standalone Ind AS Financial Statements

The Company’s Board of Directors is responsible for the matters in section 134(5) of the Companies Act, 2013 ("the Act") with respect to the preparation of these Standalone Ind AS financial statements that give a true and fair view of the financial position, financial performance, cash flow and changes in equity of the Company in accordance with the accounting principles generally accepted in India, including the Accounting Standards (Ind AS) prescribed under Section 133 of the Act, read with relevant rules issued there under.

This responsibility also includes maintenance of adequate accounting records in accordance with the provisions of the Act for safeguarding of the assets of the company and for preventing & detecting frauds and other irregularities; selection and application of appropriate accounting policies; making judgments and estimates that are reasonable and prudent; and design, implementation and maintenance of adequate internal financial controls, that were operating effectively for ensuring the accuracy and completeness of the accounting records, relevant to the preparation and presentation of the Standalone Ind AS financial statements that give a true and fair view and are free from material misstatement, whether due to fraud or error.

Auditor’s Responsibility

My responsibility is to express an opinion on these Standalone Ind AS financial statements based on my audit. In conducting my audit, I have taken into account the provisions of the act, the accounting and auditing standards and matters which are required to be included in the audit report under the provisions of the Act and the rules made there under and the order issued under section 143(11) of the Act.

I conducted my audit in accordance with the Standards on Auditing specified under section 143(10) of the Act. Those Standards require that I comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the Standalone Ind AS financial statements. The procedures selected depend on the auditor’s judgment, including the assessment of the risks of material misstatement of the Standalone Ind AS financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal financial control relevant to the Company’s preparation of the Standalone Ind AS financial statements that give true and fair view in order to design audit procedures that are appropriate in the circumstances. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of the accounting estimates made by Company’s Directors, as well as evaluating the overall presentation of the Standalone Ind AS financial statements.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion on the Standalone Ind AS financial statements.
Opinion

In my opinion and to the best of my information and according to the explanations given to me, the aforesaid Standalone Ind AS financial statements give the information required by the Act in the manner so required and give a true and fair view in conformity with the accounting principles generally accepted in India of the state of affairs of the company as at 31st March, 2019 and its deficit, changes in equity and cash flows of the company for the year ended on that date.

Report on Other Legal and Regulatory Requirements

1. As required by section 143(3) of the Act, based on my audit I report that:

a. I have sought and obtained all the information and explanations, which to the best of my knowledge and belief were necessary for the purposes of my audit.

b. In my opinion, proper books of account as required by law have been kept by the company so far as appear from my examination of those books.

c. The Balance Sheet, Income and Expenditure Account, the Cash Flow Statement and the Statement of Changes in Equity dealt with by this report are in agreement with the books of account.

d. In my opinion, the aforesaid Standalone Ind AS financials statement dealt with by this report comply with the accounting standards referred to under Section 133 of the Act, read with Rule 7 of the Companies (Accounts) Rules, 2014.

e. On the basis of written representations received from the directors of the company as on 31st March 2019 and taken on record by the Board, none of the directors is disqualified as at 31st March 2019 from being appointed as a director under Section 164(2) of the Act.

f. Reporting on the adequacy of Internal Financial Control over Financial Reporting of the company and the operating effectiveness of such controls, under Section 143(3) (i) of the Act is not applicable in view of the exemption available to the company in terms of the Notification no. G.S.R 583(E) dt. 13th June 2017 issued by the Ministry of Corporate Affairs, Government of India, read with general circular no. 08/2017 dt. 25th July 2017.

g. With respect to the other matters to be included in the Auditor’s Report in accordance with Rule 11 of the Company (Audit and Auditors) Rules, 2014, as amended, in my opinion and to the best of my information and according to the explanation given to me;

I. The Company does not have any pending litigations as at year end which would impact its financial position;

II. The Company did not have any long term contracts as at year end including derivative contracts for which there were any material foreseeable losses;

III. There were no amounts which were required to be transferred to the Investor Education and Protection Fund by the Company.

2. The Companies (Auditor’s Report) Order, 2016 (“the Order”) issued by the Central Government of India in terms of Section 143(11) of the Companies Act, 2013, is not applicable to the Company in terms of Clause 1(2)(ii) of the Order.

NILESH B. SHAH
Chartered Accountant
ICAI MN. 107752

Annual Report 2018-2019
# BALANCE SHEET

## Balance Sheet as on 31st March, 2019

<table>
<thead>
<tr>
<th>PARTICULARS</th>
<th>AS ON 31-03-19</th>
<th>AS ON 31-03-18</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current Assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Financial Assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loans and Advances</td>
<td>73,287,646</td>
<td>49,714,122</td>
</tr>
<tr>
<td>Cash &amp; Cash Equivalent</td>
<td>165,200</td>
<td>49,879,322</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td>73,287,646</td>
<td>49,879,322</td>
</tr>
<tr>
<td><strong>Equity and Liabilities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Equity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Equity Share Capital</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Other Equity</td>
<td>(385,202)</td>
<td>163,574</td>
</tr>
<tr>
<td>Liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current Liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Financial Liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trade Payables</td>
<td>1,006,934</td>
<td>810,000</td>
</tr>
<tr>
<td>Other Financial Liabilities</td>
<td>-</td>
<td>22,339,512</td>
</tr>
<tr>
<td>Non Financial Liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Earmarked Fund</td>
<td>72,533,262</td>
<td>26,804,384</td>
</tr>
<tr>
<td>Other Non Financial Liabilities</td>
<td>132,652</td>
<td>89,000</td>
</tr>
<tr>
<td><strong>Total Equity and Liabilities</strong></td>
<td>73,287,646</td>
<td>49,879,322</td>
</tr>
</tbody>
</table>

This is the Balance Sheet referred to in our report of even date.

For and on behalf of the Board of Directors

Nilesh B. Shah
Chartered Accountant
ICAI MN: 107752
Place: Mumbai
Date: 19th September, 2019

Kapil Wadhawan
Director
DIN: 00028528
Place: Mumbai
Date: 19th September, 2019

Govindan Srinivasan
Director
DIN: 06813777
Place: Mumbai
Date: 19th September, 2019

Annual Report 2018-2019
## INCOME AND EXPENDITURE

Income and Expenditure account for the year ended 31st March, 2019

<table>
<thead>
<tr>
<th>PARTICULARS</th>
<th>YEAR ENDED 31-03-19</th>
<th>YEAR ENDED 31-03-18</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grant Income</td>
<td>119,640,622</td>
<td>31,095,616</td>
</tr>
<tr>
<td>Other Income</td>
<td>2,307,947</td>
<td>249,426</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>121,948,569</td>
<td>31,345,042</td>
</tr>
<tr>
<td><strong>Expenses</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Expenses</td>
<td>122,170,197</td>
<td>31,508,616</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>122,170,197</td>
<td>31,508,616</td>
</tr>
<tr>
<td>Income / (Deficit) Before Tax</td>
<td>221,628</td>
<td>163,574</td>
</tr>
<tr>
<td>Tax Expense</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Net Income / (Deficit) After Tax</td>
<td>221,628</td>
<td>163,574</td>
</tr>
<tr>
<td>Other Comprehensive Income</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total Other Comprehensive Income For the Year</strong></td>
<td>221,628</td>
<td>163,574</td>
</tr>
</tbody>
</table>

This is the statement of Income and Expenditure referred to in my report of even date

For and on behalf of the Board of Directors

SD:-
Nilesh B. Shah
Chartered Accountant
ICAI MN: 107752
Place: Mumbai
Date: 19th September, 2019

SD:-
Kapil Wadhawan
Director
DIN: 00028528
Place: Mumbai
Date: 19th September, 2019

SD:-
Govindan Srinivasan
Director
DIN: 06813777
Place: Mumbai
Date: 19th September, 2019
MEDIA COVERAGE

@dhfchangilivesfdn  @dhflclfdn  dhfchangilivesfdn  @dhfchangilivesfdn
POEMS IN MARATHI BY ANGANWADI WORKERS FROM PALGHAR

अंगणवाडी
असावी सुंदर अंगणवाडी छान
अंगणात असावी सामग्री छान
दुढढ दुढढ धावताना विसरती मुले भान
शब्द सुमानानी स्वागत करून पेळू त्याना आत

अंगणवाडीत असावे बाहुली घर
बाहुली घरात झोपली झुंदेच छान
झोपात झोपली बाहुली सुरेंद्र
असावी सुंदर अंगणवाडी छान

एक होता उंदीर
एक होता उंदीर ल्याला दिसतो मंदिर
गाभान्याला दिला उणाने वेढा
ल्याला दिसतो पेढा

उंदीर झाला वेढा
उबलाच उणाने पेढा

पुजारी मागे धावला
उंदीर मामा पठाला

अत्ता पाटील,
अंगणवाडी : राजनपाडा
बीट : सफाळे 2, पालघर विभाग

प्रतिभा राहूत
अंगणवाडी: हरण वाली
बीट : माहिम 1, पालघर विभाग

चांदोबा

चांदोबा चांदोबा भागत्स का
घरचा अभास केल्स का

चांदोबा चांदोबा लपतोस का
पुस्तक हर्वून बसल्स का

चांदोबा चांदोबा पक्तोस का
पचन्ताची शर्यत लावतोस का

कोमत बढे
अंगणवाडी : श्री राम नगर
बीट : दाढी 2, पालघर विभाग


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Annual Report 2018-2019