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ImFact15

VISION

Work as a catalyst in bringing sustainable change in the lives of underprivileged children, youth and women, with a life-cycle approach of development.

Enable the civil society across the world to engage proactively in the change process through the philosophy of civic driven change.

Adopt highest standards of governance to emerge as a leading knowledge and technology driven, innovative and scalable international development organisation.

MISSION

Empower underprivileged children, youth and women through relevant education, innovative healthcare and market-focused livelihood programmes.

Deploy be st possible me tho do logy and technology for a chieving ideal SROI (so cial return on investment), to practice and promote good governance. To link business competitiveness of the corporate with social development initiatives; also to sensitize privileged children, youth and citizens in general to promote Civic Driven Change.

BELIEF

Smile Found a tion be lieves that unless members of the civil society are involved proactively in the process of development, sustainable change will not happen.

Be lieving in this principle of 'Civic Driven Change',

Smile Found a tion sensitises the civil society in order to make them partners in its mission.

CONTENTS

Page 6 | From the Executive Trustee

Page 7-8 | Smilestones of the year

CHAPTERS

Page 9-20 | Education

Page 21-34 | Healthcare

Page 35-46 | Livelihood

Page 47-60 | Women Empowerment

Page 61-66 | Disaster Response

Page 67-71 | Child for Child

Page 72 | Awards and Recognition

Page 73 | Reach



Children are the future of a nation, particularly of a young nation like ours. But the ir innocence and simplicity also makes them the most vulnerable section of our society to day. Be it education or healthcare; rights or protection—a secure, dignified childhood seems a distant dream for millions of children in India, caught up in the vicious cycle of poverty and ignorance.

If we wish to build a strong found ation for our country in the years to come, it is important that we nurture our children with love, care, education and the right values. Education is indeed, as Nelson Mandela, has said, "The most powerful weapon we can use to change the world." It is both the means as well as the end to a better life – the means because it empowers an individual to earn his/her live lihood and the end because it increases one's awareness on a range of issues – from healthcare to appropriate social behaviour to understanding one's rights – and in the process help him/herevolve as a better citizen

Smile Found a tion was conceived of with this belief in the power of education, and this continues to be our conviction. But over the years, working relentlessly on the ground, we realized that health too was a part of education — health, not just of the child, but the whole family. Relevant skill training to ensure a dignified livelihood is also an extension of education, as is women empowement. Only a mother, who is well informed about her rights, aware about important social issues, will send her children to school. So a child's education would not be complete without the welfare of the whole family. To achieve this, Smile Foundation has adopted a lifecycle approach, focusing its interventions on children and their families.

Im Fact 0.14 records our journey of change during the year 2014-15. We have hand picked interesting facts and representative stories from the ground, to mark the mile stones on this journey.

But this is not a journey that we could have taken alone. We would like to thank our supporters – corporate, institutions, individuals, volunteers, partners and well wishers, who have put their trust in us and held our hand throughout the journey. Im Fact 0.14 is dedicated to each one of them.

Santanu Mishra Co-Founder & Executive Truste e

SMILESTO NES of the Year



April 2014

The first in a series of round the year re sidential capacity building programmes was organised under Smile Foundation's 'Empowering Grassroots' initiative. Empowering Grassroots identifies small, genuine community based organizations (CBOs), doing good work on the ground, and trains them in are as like local fundraising for project management, effective communication, good governance, and developing organisational competencies, to enhance the scalability and susta in a b ility of g rassro ots development projects.



May 2014

On the occasion of World Iabour Day, school going children and volunteers came out in large numbers to take part in a multi-city public awareness campaign, initiated by Smile Foundation, and draw attention to the issue of 'lost childhood'. The campaign titled 'Say NO to child labour, say YES to school' covered all majorcities of West India in Gujarat, Goa, and Maharashtra.

June 2014

Smile Foundation was accredited as a Charities Aid Foundation (CAF) America validated charity. The validation is extended to organizations on basis of a 100 point due diligence review, testing parameters such as operations, infrastructure, governance, and activities of an organization. The review process is in accordance with the US laws and has been structured to ensure safe international grant-making.



July 2014

More than 60 school principals and educationists from Chikkaballapur, Kolar, Bangalore Rural and Bangalore Urban participated in a workshop on the pertinent issue of protection of children from sexual abuse, held at Bengaluru, Kamataka. Part of Smile Foundation's Child for Child programme, the workshop was a step towards ensuring a secure and healthy environment for children to grow up in.





August 2014

A week long Breastfeeding
Awareness Campaign was
organized in Bamer, Rajasthan,
streng thened by participation of by
85 doctors, hundreds of students
from the Nursing College, ASHA
and ANM workers, and block and
district levelgovemment health
officials. Smile Foundation's efforts
for the promotion of breastfeeding
in the region were also recognized
by the Indian Academy of
Paediatrics.



$\mathbf{September2014}$

A live lihood skill training project for young women, titled "Gruhini", was initiated at Kanakal village of Bijapurd istrict, Kamataka, under the Swabhiman programme. The project aimed at providing vocational skills such as stitching and craft making to the socioeconomically disadvantaged girls from the community, enabling them to have an independent identity and dignified live lihood. 40 girls benefitted from the first phase of the Gruhini project, and are now gainfully employed.



October 2014

As hosts of the Golden Jubilee Inter IIT Sports Meet, IIT Bombay launched Mashāl, the first everpan IIT social initiative, in support of Smile Foundation's Mission Education programme. Spread across all 16 IIIs, a series of marathons was organised under Mashāl, with over 5000 students participating and running for Smile Foundation and the cause of childed ucation.



November 2014

Smile Foundation joined hands with Children's Film Society of India to screen value-based films for school children across the country. The film screening was an effort towards making school children aware and sensitized about vital social issues and inculcating in them strong values that they can uphold throughout their lives, growing up to be responsible citizens and change makers.

December 2014

Smile on Wheels mobile healthcare project was launched in Bilaspur, Himachal Pradesh. This first ever welfare project of Smile Foundation in the state is providing doorstep healthcare services in 42 villages of the Sadar, Naina Devi, Jhandutta and Ghumarwin blocks. CMO Dr. ML Kaushal, SP Ashok Kumar, BMO Dr. Chandel, and over a 100 villagers, came togetherat the launch ceremony to welcome the new Smile on Wheels.



January 2015

ASSOCHAM conferred a Commendation Certificate to Smile Foundation in recognition of 'Outstanding Contribution in Skill Development'. The accolade is awarded to recognize an NGO effort for its role in skill development training and placement. The appreciation came with specific reference to Smile Foundation's na tio na l le ve l live liho o d programme, SIeP, that trains urban und e rp rivile ged youth with marke toriented job skills and makes them employed in retail and service se c to rs a c ro ss India





February 2015

Smile Foundation received recognition at the 1st ICAICSR Awards for the 'Best CSR Project in Women Empowerment'. The award has been instituted and conferred by the Committee for Cooperative and NPOS Sector and IND (AS) Implementation Committee of the Institute of Chartered Accountants of India (ICAI).



March 2015

16 new Smile Twin e-Leaming
Programme (STeP) centres were
launched to enhance and expand
the programme's reach and
impact among the country's
disadvantaged youth. Initiated in
NOIDA, Delhi, Lucknow, Mumbai,
Bengaluru and Gurgaon, the se
newest STeP centres will directly
benefit over 1800 youth.





IMPROVING QUALITY ENHANCING EDUCATION

- Teaching Learning Materia
- Teacher's Capacity Building



NUTRITION FOR BETTER EDUCATION

- Nutritio n Support
- Nutritio n Aware ne ss



INFRA STRUC TURE SUPPOR



MEcentre on the banks of the Yamuna River, Hathi Basti, New Delhi

nnission Education

With presence in 21 states across India,
Smile Foundation's flag ship initiative –
Mission Education provides education
to over 20,000 children every year.

The high-impact and cost-effective model of Mission Education programme is designed to give a second chance at learning to the disadvantaged students left out from the formaleducation systems.

Complementing mainstream school systems with innovative teaching methods and materials, the Mission Education centres bring leaming to thousands of children, particularly those affected by extreme poverty, violence, displacement or discrimination. The underprivileged children, with special focus on the girl child, are targeted at pre-primary level with the goal of preparing them to entermainstream schools.

Mission Education programme also enhances the quality of education by training teachers, applying computer-enabled learning, increasing student participation in co-curricular activities, facilitating sports for development, establishing and stocking libraries, and scholarship support to girls. With twin objectives of providing nutrition and ensuring 100% attendance of children, the programme also provides nutritious mid-day meals in the Mission Education centres.



Ne wly la unc he d ME c e ntre in Kalimpong District, We st Bengal

SCALING UP OF EFFORTS

Mission Education began in 2002 as a response to the perceived need for a quality education programme to educate the disadvantaged and out-of-schoolchildren in India. The programme began with providing educational support to a few hundreds of children through partnership with community based organisations in select locations. Throughout 13 years of Mission Education, Smile Foundation has provided education directly to more than 200,000 children in India.

Projects under Mission Education



70 2013



90 2014



114

Children provided education



 $16{,}500$



 $18,\!953$



20,370

IMPACT

- **20,370 children** are provided education during the year.
- The re was an overall increase of 7.47% from last year in enrolment at Mission Education centres in the reporting period.
- ▶ 53% of the total benefic iaries

 were girls. Education of girls gets
 priority by bringing about an
 attitudinal change in the parents'
 outlook towards their education.
- ▶ 100% of teachers at Mission

 Education centres received training in innovative academic methodologies, ensuring an interactive and engaging environment for children in the classroom.
- 2484 school drop-outs resumed education under Bridge Course, to facilitate their mainstreaming into formaleducational institutions.
- ▶ 5947 children received

 Remedial Support as an extended
 effort to ensure retention and a good
 academic performance in School.
 54.95% increase from last year.
- 91% of e lig ible children mainstreamed to reputed formal schools, after successfully passing from MECentres, further ensuring a bright future.
- More than 450 health camps were conducted to cater to healthcare needs of children.



CHANGE THAT INSPIRES US

300 c hildren from a slum c lusternear Ashok Viharin Gurgaon, Haryana, do not sift through piles of garbage anymore, in search of occasional treasure. They now attend school daily at Smile Foundation's Mission Education centre Max Vision.

Most of the families in the community are migrants from Rajasthan, who had come to Delhi decades ago, looking for better live lihood opportunities. The parents have never been to school and never considered education to be of any importance. For them, two square meals a day and whatever it takes to get them had been the only purpose of life.

Aftermonths of counse lling of the parents, door to door visits to the shanties and continuous awareness sessions in the community, to day all the children are enrolled at the centre. They are not only being provided primary education, but also being taught basic hygienic practices, good values and different activities, to ensure their holistic development.

Mo tivated by the irc hildren, so me mo thers have also started showing interest in learning alphabets, to be able to write the ir names. They attend informalclasses in the afternoon, whenever they get spare time. This gradualchange has brought hope of a new life, of new dreams, new aspirations, in not only the lives of the children, but the whole community.



Meenu, Visakhapatnam, Andhra Pradesh

Mr. K. Naidu works as a street vendor, selling seasonal fruits, on Visakhapatnam Beach Road.

A father to three children—a son and two daughters, K. Naidu faces extreme difficulties in meeting the basic every day household needs.

Unable to bear the expenses of the education of his children, he discontinued the schooling of Meenu—the eldest girl child in the family.

While his son still remained in the local government school, Meenu stayed at home and engaged he rself in taking care of her younger sister and he lped her mother in house hold chores. One day when the father leamt about Smile Foundation's Mission Education centre 'Lepakshi Educational Society' in Visakhapatnam, he immediately showed up at the centre and inquired if his daughter can study there.

The teachers gladly enrolled little Meenu in Class 1 at the centre, after conducting a basic test to understand her capabilities. She was provided uniform and books at the centre. Punctual, regular and a fast leamer, Meenu is one of the brightest student in the class.

Meenu dreams of becoming a teacher one day.





Sheeba, Noida, Uttar Pradesh

The eldest of four sisters, Sheeba has grown up doing all the household chores, because of her mother being on permanent bed rest. Her father used to work as a carpenter, but lost his hand in an accident two years ago and has since been unemployed. Her paternal grandfather, himself poor, sends them a little money, which somehow keeps the family alive.

Sheeba had earlier been enrolled at a government school, but had to drop out after her father's accident. Taking care of her parents and sisters became her daily activity. 12-year old Sheeba had lost hope of ever continuing her studies again. However, she wanted to make sure that her sisters go to school.

When Sheeba came to know about Smile
Foundation's Mission Education centre Raasta
which provides free education to girl children, she
visited the centre with herneighbouring aunt and
shared herstory with the teachers there. The
teachers were moved with the girl's courage and
convinced hertogetenrolled at the centre.

After securing the third position in Class 5, Sheeba has now come to Class 6. Her teachers take pride in her, as do her parents. She has lots of friends at the centre, who are all inspired by herexample. Be sides excelling in studies, Sheeba is a talented artist and often wins painting competitions.



IMPROVING QUALITY ENHANCING EDUCATION

Smile Found a tion's Mission Education centres offer opportunities of holistic development to children from the socio-economically marginalized sections of the society. Emphasizing on quality education, in 2014-15, Mission Education has widened the use of effective teaching learning materials across all its centres. This in turn has helped the children to consolidate what they have learned, extend and construct knowledge for the mselves and develop strategies and adequate skills for better learning.

Through innovative teachers' capacity building workshops for teachers from all the four zones, Smile Foundation introduced new methodologies and tools for teachers to help them make the classroom teaching-leaming process interesting and effective among the students.

HIG HLIG HTS 2014-15

TEACHING LEARNING MATERIAL

During the year, Smile Foundation identified genuine local grass root organizations doing exemplary work in promoting children's education, to provide Teaching Learning Material (TLM). The TLM kits include various interesting activity-based learning materials, along with conceptual descriptions, to benefit the students in the grades between pre primary to class V. These child-friendly educational aids also foster self learning among the students that allow them to study according to their aptitudes and skills.

Specially designed for easy understanding, the se kits accommodate varied leaming abilities of the children and enhance their potential towards mathematical concepts and usage.

TEACHER'S CAPACITY BUILDING

During the year, Smile Foundation organised special workshops on utilization of mathematical tool kits for the community based organizations from a cross 21 states of India. The objective behind was to improve the quality of the teachers, their capabilities and the teaching approach towards the students who are first generation school goers.

The workshop focused on three major skill areas to be developed in teaching children to use and apply mathematics:

- 1. Problem Solving Strategies,
- 2. Re a so ning Mathematically and
- 3. Communic a ting with Mathematics.

The workshop included activity based games and leaming methodologies to help develop well defined role structures for teachers and students and to build strong relationship between the children and teacher. It also focused on training teachers in enhancing the leaming levels of the children and giving them opportunities to act as equal partners in the academic process. New narrative methods were also introduced to make the process of leaming an enjoyable experience.

ADDING VALUES

Understanding learning capacities

With the increased usage of teaching learning materials and enhanced pedagogical techniques at the Mission Education centres, teachers are now betterable to gauge the individual capacities of children to perceive, grasp, and respond to concepts and lessons. This has further helped them in preparing specific child development plans, focusing on the strength and improvement areas of each child.

Engaged Leamer

The new TLM kits and innovative teaching methods have succeeded in developing interest and enthusiasm in the children to leam. Challenging subjects like Mathematics have been made not only easier but fun, as children are encouraged to understand concepts in their own way, by building stories and models. Inclusion of group activities and discussion methods has enhanced the bonding of children, and they are now taking initiative in helping each other leam.

Development of conceptual knowledge on the subject

Using engaging, practical and interactive teaching methods and TLM kits is helping children understand difficult concepts with ease. Strengthening their basic concepts of the subjects, the children are now enjoying the classes and participating actively in the classeom activities. Their academic performance in the subjects has also been progressive, denoting increased interest and understanding.







DURING THE YEAR

- Learning tool kits provided to 1289 children at 55 Mission Education centres
- 38 partner organisations participated in the Capacity Building workshops
- 45 teachers were given training on utilisation of teaching learning materials
- 4 capacity building workshops were conducted, covering all the four zones of the country



NUTRITION FOR BETTER EDUCATION

Ma Inutrition a mong children is one of the major problems of our country. To mitigate this problem, Smile Foundation's nutrition programme has providing, overmany years, both direct nutrition interventions and a broad range of "nutrition sensitive" interventions addressing the determinants of malnutrition.

The project has been designed to address the issue of malnutrition and enable behavioural change regarding proper child care and proper dietary practices within existing family budgets in two phases:

- a) Nutrition Support: Catering to nutritional needs of the underprivileged children, and
- b) Nutrition Aware ness: Sensitizing the underprivileged communities towards the issue of malnutrition amongst children, mothers and family members

HIG HLIG HTS 2014-15

NUIRIIO N SUPPORT

The project aims to improve nutritional levels of the underprivileged children at Mission Education learning centres and simultaneously their enhance enrolment, retention, attendance. The overarching aim of the project is to support the underserved children to reduce child malnutrition and contribute to breaking the intergenerational cycle of under nutrition. The project focuses on scaling up nutrition interventions that aim to strengthen nutrition security, particularly for children, by supplying the right food (quality and quantity) at the right time. The project integrates nutrition goals into broader efforts in critical areas such as water and sanitation, health by sensitizing the children and community.

DURING THE YEAR

The nutritional support provided at the 25 Mission Education centres has reached out to 3448 beneficiaries.

NUTRITIO N AWARENESS

During the year, Smile Foundation conducted special social mobilisation sessions on child's nutrition, adolescent nutrition and nutrition for mothers to raise awareness and seek commitment to the cause from influential members of the community. Through nationwide campaigns, the project created understanding of the overview of the nutrition situation, and awareness on the importance of providing optimal nutrition for children, adolescents, expecting women & lactating mothers.

Partic ip ants at this orientation include government and nongovernment officers, village leaders and elders, health officials, alternative health care providers, teachers, parents, children and other respected members of the community.

DURING THE YEAR

Nutrition demonstration & exhibition sessions were held at 25 Mission Education centres. Die tary charts were prepared according to the age groups of children as well as a dult and displayed in the campaign. Parents and children were given knowledge on healthy eating habits, meal planning, infections and unsatisfactory feeding practices by die tary experts. A total of 5417 beneficiaries from underprivileged communities were benefitted through this campaign.

Street plays based on importance of nutrition and combating malnutrition were conducted at the Mission Education centres across India. The children demonstrated through role plays how unhealthy eating habits lead to stomach infection wherein balanced diet keeps a person healthy, fit and active. And a total number of 5696 beneficiaries gained through this campaign.

Po ste r/Painting/Story Writing/Essay Writing Competitions on Healthy eating habits were conducted across the Mission Education centres under the programme. The students were at their creative best with very striking and imaginative posters. The competition involved children in writing and creation of evocative nutrition based canvas of vegetables, fruits etc. The teachers examined the paintings and writings of the children. Selection of the winners was very difficult for the teachers among such great pool of talents. Consolation prizes were given to all the participants and prizes were distributed to the winners in the presence of community members. A total of 4801 community members were reached out through this campaign.









Keeping the hands clean is the first line of defence against the spread of many illnesses — from the common cold to more serious infections. The Mission Education Centres conducted a hand washing awareness campaign as a step for encouraging hand hygiene among the children. Demonstrations focusing on importance of hand washing, spread of infectious diseases, how to get rid of the gems, why is it important to wash hands, etc. were given to the children. A total number of 4062 community members attended and bene fitted through this campaign.



INFRASTRUC TURE SUPPORT

When learning conditions are improved, the possibilities of learners to excelacademically increase. Majority of the education centres in urban slums and rural areas in India experience infrastructure backlog. This causes lack of interest among the children in studies and accounts for high dropouts of children.

Smile Found a tion, through infrastructure support under the Mission Education programme, a ims to address the infrastructure backlog and thereby improve the learning conditions of the underprivileged children. Infrastructure support project covers construction of classrooms, sheds, to ilets and water tanks in the schools. It also includes equipping the centres with electronic gadgets, fumiture, sports items and entertainment utilities.

HIG HLIG HTS 2014-15

9515 children from 23 different locations across
13 states benefitted from Smile Foundationprovided Infrastructure Support. During the year,
Smile Foundation identified 41 education centres
where children had to suffer from a poorleaming
environment because of lack of proper
infrastructure. The project facilitated for
construction and provision of classrooms, furniture,
lavatories, drinking water facility and more.
The children were also provided uniforms, shoes
and note books.

DURING THE YEAR

Classmooms were constructed in 14 schools in 7 states (Uttar Pradesh, Telangana, Tamil Nadu, Kamataka, Bihar, West Bengal, Chhattisgarh) benefitting 1988 children.

To ile ts we re built in 14 schools in 9 states (Delhi, Haryana, Uttar Pradesh, Rajasthan, Telangana, Andhra Pradesh, Kamataka, We st Bengal, Chhattisgarh) benefitting 3393 children.

Sheds were built in 4 schools in 3 states (Haryana, Bihar, and West Bengal) benefitting 1450 children.

Drinking water facilities were built in 8 schools in 5 states (Uttar Pradesh, Telangana, Bihar and West Bengal), benefitting 1506 children.

















SMILE ON WHEELS

- Matemal Health Programme
- School Health Programme



SMILE HEALTH CAMPS

- Special health camps
- 12th Annual Mega Health Camp



ENHANCING HEALTH-SEEKING BEHAVIOUR

- Swine flu prevention campaign
- Clean India, Healthy India



Smile Foundation's healthcare initiatives in 265 remote villages and slums benefits 300,000 lives directly in a year.

Smile Found a tion's healthcare programmes aim to improve matemal, neonatal, and child health and nutritional status, reduce vulnerability to communicable diseases, combat noncommunicable diseases and enhance the quality of life. By combining preventive, promotive, curative and rehabilitative health services, the programmes serve the disadvantaged, socially excluded and hard-to-reach population.

Smile Foundation implements Smile on Wheels (SoW) - a unique mobile hospitalprogramme and Smile Health Camps under the umbrella of its healthcare initiatives.

Both SoW and Smile Health Camps aim to improve access to essential health services through delivering doorstep medical care and organising a bridging network with the public healthcare system. Also, the organisation has created a pool of frontline community health workers, who strive to address the crisis of human resources in the health sector by playing a substantial role in providing accessible and affordable services to the majority of the population.



Smile on Wheels flagged off by community stakeholders

SCALING UP OF EFFORTS

Smile on Wheels was initiated in 2006 to address the lagging health status of the remote rural and urban slum population in India. Targeting the extremely poor house holds, who are unable to access or benefit from healthcare development interventions, Smile on Wheels reaches out to over 265 locations in the country. It has revolutionised the primary healthcare approach in India by catering to over 300,000 people every year with promotive, preventive and curative services. This year, Smile on Wheels completes its 10th year of providing the much-needed healthcare to the impoverished population, right at their doorstep.

Projects under Smile on Wheels



12



17 2014



2015

Health camps conducted



36 2013



96 2014



 $\frac{112}{2015}$

Be ne fic ia rie s



231000



310047



317053

IMPACT

- ▶ The re was an overall increase of 2.26% from last year in the number of benefic iaries of Smile Foundation Healthcare programmes.
- So W be ne fitted 317,053 people directly through 22 operational projects covering 265 remote villages and urban slums across the country.
- ▶ 112 multi-speciality and mega health camps were conducted in urban slums and rural villages, meeting immediate healthcare needs of 36440 people
- ▶ 54% of the total benefic iaries covered in the reporting period were women.

 Focus is given on women and children through ante and post natal care, distribution of iron, folic and vitamin upplements, immunisation and growth monitoring of children.
- ▶ 5027 school going children
 benefitted from School Health
 Programmes that are conducted
 regularly in various schools to
 ensure good health of children.
- More than before and much stronger linkages were built with government health officials and NRHM, which has further augmented the project's reach to the underprivileged people. Also, intensive capacity building sessions were held for ASHA and ANM workers.



ENSURING SAFE MOTHERHOOD IN COMMUNITIES

Expecting mothers in the villages of Rae Bareli, Uttar Pradesh, are now increasingly availing benefits of the antenatal and prenatal services under the Smile on Wheels mobile hospital project operational in the district.

This positive development occumed when a marked increase in the haemoglobin levels of women who had availed of the ANC/PNC services at Smile on Wheels was recorded.

Lower HB levels had led to many cases of complications during delivery and miscarriages in the community. But with regularcheckups, monitoring, follow-ups and making the mothers aware of proper dietary and nutritious intake, by the doctors at Smile on Wheels, the level of HB among the expecting mothers was restored.

Smile Found a tion's project team has been incessantly working with Anganwadiworkers and ASHA in the covered 15 villages of Harchandpur Block, to counsel and mobilize expecting mothers from the community to visit Smile on Wheels for their ANC/PNC check-ups. The women are also encouraged to opt for institutional deliveries.



Vivek Kumar, Kanoh, Haryana

Vive k was a line a dy a ttending remedial classes at Mission Education centre in Kannoh, when he started to fall ill. At first, not thinking it to be serious, Vive k's parents' started with the traditional home remedies but soon it was evident that these were not enough. They decided to visit to a doctor in the city nearby but owing to the distance and expenses, no follow up visits were made.

Vive ks's condition worse ned as he developed severe abdominal pain and started to lose weight considerably. All this in turn led him to miss his classes at the centre. When he was brought to one of the school health campsorganized in the area, the doctorimmediately noticed his yellowish eyes and skin. After referring to his earlier reports, the doctor confirmed Vivekhad jaundiced. The doctor prescribed the medicines and advised diet precautions to Vivek's parents, along with complete bed rest for three weeks.

After his recovery, Vivek resumed his classes and has been regularly going since.





Ashu, Anna Nagar, New Delhi

Ashu, two and a halfold, is the youngest in her family of four. Her father is a daily wage labour in a socks manufacturing unit and eams a meagre income of 6000 which hardly make ends meet.

Due to unhygienic condition of the household, Ashu was suffering from scabies/skin infection for three months and despite a visit to a doctor, problem persisted, due to ignorance about the root cause.

After being referred by a community coordinator,
Ashu visited Smile on Wheels and underwent some
pathological tests. Based on diagnosis, she was
prescribed medicines and lotion including
antibiotics, multivitamins and the doctorexplained
the precautions to hermother. She was under the
treatment for two months.

Now she is healthy and happy and hermotherwas thankful to Smile on Wheels team.



SMILE ON WHEELS Mobile Hospital for the Underprivileged

Smile on Wheels, adopting a doorstep delivery approach, provides promotive, preventive and curative services in remote rural areas and urban slums. It has revolutionised the primary healthcare approach in India by reaching out to millions, and addressing problems of mobility, accessibility and availability of primary healthcare.

The programme aims to increase access to health services, through demand-based strategies and by providing a package of health services which meets the needs of the impoverished communities. The fully equipped GPS enabled mobile hospital units feature all the necessary equipment along with audio visual aids and a team of medical experts.

HIG HLIG HTS 2014-15

MATERNAL HEALTH PROGRAMED

During the year, 720 women benefitted from Matemal Health Programme, which is an integral feature of Smile on Wheels. This intervention is mainly aimed at providing primary healthcare at the community level, working with village health committees to encourage behaviour change among the underserved people, addressing issues of pregnancy, newborn and child health, and facilitating access to obstetric and newborn care at public and private facilities.

Smile on Wheels envisages improvement in the he alth status of poor urban and rural pregnant women, lactating mothers and newborn children by bringing healthcare services to their doorsteps. Smile Found a tion's Community Health Workers (CHWs) provide antenatal and postnatal care and e ssential newbom care directly. Through behaviour change communication interventions, they motivate, educate and prepare expectant mothers for child birth, highlighting an array of health issues, including maternal and neonatal danger signs, maternal and neonatal nutrition and so on.

SC HOOLHEALTH PROGRAMME

During the year, 5027 children benefitted from 35 school health camps organised across India under Smile on Wheels programme. In a school health camp, health check-up and growth monitoring of the children, including height and weight monitoring as well as eye and dentalcheck-up are conducted. Anaemic children are identified and provided requisite treatment.

In addition, multiple health awareness sessions were conducted to inculcate health-seeking behaviour among the children. The objective is to 'Catch them Young' and equip them in a beneficial way, so that they could create awareness in their respective families and communities aschange agents. Interactive workshops on different issues like personal health, hygiene and nutrition were held on regularbasis.







DURING THE YEAR

Smile on Wheels has offered doorstep healthcare services in 19 districts across 16 states



40,000 Be ne fic ia rie s No ida, Raebareli Utta r Pra d e sh



55,000 Be ne fic ia rie s Asho ka na gar, Madhya Pradesh



82,500 Be ne fic ia rie s Madhepura, Bihar



35,000 Be ne fic ia rie s Mumbai, Maharastra



22,000 Be ne fic ia rie s Rudra pra ya g, Utta ra kha nd



62,000 Be ne fic ia rie s South & Central Delhi Delhi



20.000 Beneficiaries Bila sp ur, Him a c ha l Pra d e sh



58,000 Be ne fic ia rie s Gurgaon, Haryana



50.000 Be ne fic ia rie s Be ng a luru, Ka ma ta ka



48,000 Be ne fic ia rie s Chennai – Tamil Nadu



1.50.000 Be ne fic ia rie s Kolkata - West Bengal



1.30.000 Be ne fic ia rie s Ranchi - Jharkhand



50,000 Be ne fic ia rie s Jaipur, Rajasthan



73,000 Be ne fic ia rie s Ahmedabad - Gujarat



57.000 Be ne fic ia rie s Hyderabad - Telangana



23,000 Be ne fic ia rie s Kalahandi, Odisha



SMILE HEALTH CAMPS

Smile Health Camp is a special initiative, which is formulated to provide health care services to the marginalized communities in remote rural areas and slums through standalone camps. These camps are conducted with the help of important community stakeholders, government health department, and specialist doctors (Gynecologist, Pediatrics, and General Physician). Extensive mobilization is done in and around the areas through pamphlet distribution, announcement and posters, which results in greater footfall of patients in the camps.

A wide range of services are provided during Smile Health Camps, which include Women & Child Health, ANC & PNC Services, Awareness Session with Women, Child Health, Free Medical Check-up, Free Laboratory Test (HB, Blood group. Blood & Urine routine Test HIV, TBetc.), Referral formajor Cases other such services. Free health care check-ups, lab test and medicines are also provided.

Health Camps



36



96



 $\underset{2015}{112}$

Be ne fic ia rie s



11,196

24,391

36,440

Loc a tions

9

25 2013 9

77 2014

9

84 2015

SPECIAL HEALTH CAMPS

19 free health camps were organised for mig rant construction workers in New De lhi, Haryana and Uttar Pradesh. Construction labourers form a majority of the unorganised migrant workers. Owing to lack of ready accessibility to hospitals and afford a bility, often they neglect their health along with that of their accompanying families. Smile Foundation's team consisted of a doctor, pharmacists, project coordinator, and volunteers from among the workers at each site, accompanied by a Smile on Wheels mobile hospital. This series of health camps be nefited more than 2326 labourers and their families directly at the site s of the ir work.

Dedicated to the healthcare needs of auto, taxi, bus and truckdrivers 23 camps were conducted across Delhiat all Indraprastha Gas Stations. Expert doctors, assisted by a dedicated team of lab a ssistants and volunteers, facilitated the camp. The services included routine medicalcheck-up, lab tests, heightweight and blood pressure check-up, and distribution of free medicines. Counselling of the drivers on pertinent issue s such as tempermanagement and mad rage that affect both physical and mental health was an integral part of the project. This series of smile health camps directly benefitted 2963 people.

68 camps were conducted exclusively for daily wagers, construction workers and tho se from unorganized sectors across 32 locations of India. Qualified doctors, lab technician and a team of paramedics cum support staff form the core team for each camp. Skin allergy, vision, cough, TB, silic o sis, b lo o d g luc o se a nd haemoglobin etc. are part of the primary he alth care services. The beneficiaries are also being oriented on numerous he alth hazards and how to take precaution while taking up various ha za rd o us jo b s. In a d d itio n, c o unse lling and referral services, health supplements were made available free of cost. 6149 people benefitted from this series of health camps.







12TH ANNUAL MEGA HEALTH CAMP

Smile Foundation's annual multi-disc iplinary free mega health camps in Shahpura in Bhilwara district, Rajasthan directly be nefitted 20,000 people from about 100 villages in Bhilwara district. The 10-day mega health camp had a make-shift hospital with 500 beds. More than 100 specialist doctors and paramedical staff from surgery, ophthalmology, gynaecology, dentistry, orthopaedics, medicine, ENT, anesthesia, radiology, paediatrics and pathology provided voluntary service at the camp.

Pro sthe tic s, tri-c yc le s and c rutches were distributed to the specially-abled. Special arrangements were made to provide free accommodation and food for the patients as well as the visitors. Local doctors and Govt. of Rajasthan's Mobile Surgical Unit also added strength to the endeavour like every year. Volunteers from Sadbhavana Seva Thust and Jain Conference, which also included hundreds of house wives, rendered selfless services during the annual megahealth event.members were reached out through this campaign.









ENHANC ING HEALTH-SEEKING BEHAVIO UR

Enhancing Health Seeking Behaviour is a core function of Smile Foundation's healthcare initiatives, and contributes to the work of tackling all possible communicable and non-communicable diseases and other threats to health. Under this programme, he alth a ware ness and sanitation drives are organised to increase attentiveness about health and hygiene issues in the villages, encouraging the people to adopt a healthy way of life. Among st the ruralpopulace of India, in many villages, the benefits of propersanitation and faeces disposal are being taught. Special camps are conducted in schools to sensitise the students about basic hygiene habits like washing hands and regular bathing. The 'healthy child' competition is an innovative concept that has been introduced to promote a health-seeking behaviour among the young generation of the community.

HIG HLIG HTS 2014-15

SWINE FLU PREVENTION CAMPAIGN

During the year, with the death to llcrossing 600, Swine Flucases across the country became dangerously so aring. The airborne virus puts people living in poorhygienic conditions and crowded places at a high risk of contracting the flu. Lack of awareness, means and access to healthcare have caused people living in the slum clusters of the country become extremely vulnerable.

Realizing this, Smile Foundation conducted a series of awareness camps on Swine Flu in several slums, focusing on sensitizing people to the symptoms, prevention methods and nearest facility centres for testing and curing the virus.

Easy-to-understand and popular methods like street plays and song to spread awareness about the basic symptoms of the virus including cough, fever, so re throat, runny nose, body aches, chills, fatigue, diamhea, loss of appetite, etc were used.

Community members were advised to cover their faces while sneezing or coughing, eathealthy food, drink lots of water, maintain cleanliness and personal hygiene, and wear masks when visiting are as where cases of H1N1 have been reported.



CLEAN INDIA, HEALTHY INDIA

During the year, a cleanliness campaign was run under the theme "Swachh Bharat, Swastha Bharat" (Clean India, Healthy India) across the urban slums of the country to inculcate the habit of maintaining cleanliness at home and the surroundings among the residents. A series of street plays were conducted, wherein trained artists put on inspiring shows to emphasize the benefits of maintaining cleanliness at public places, and also described the severity of the problems emerging out of polluted surroundings. In locallanguages, they stressed on using dustbin for disposing off the garbage in the community's premises.

Smile Found a tion's Swachh Bharat, Swastha Bharat the me complements Swacha Bharat Abhiyan, the national cleanliness drive initiated by Hon'ble Prime Minister Narendra Modion Mahatma Gandhi's 145th birth anniversary.







INCLUSIVE SOCIO-ECONOMIC DEVELOPMENT

- Curric ulum
- Personality Development



ENHANCING EMPLOYMENTO RIENTED SKILL

- Industry Exposure
- Volunte er Engagement



PLACEMENT SUPPORT

- Career Counselling
- Centra lise d Placement Cell





Introduced as a national-level livelihood programme in the year 2007, Smile Twin e-Learning Programme has so far provided employability training to over 18,000 youth and placed over 12000 in reputed brands.

Smile Twin e-Leaming Programme (STeP) works for the marginalised youth, helping them attain a decent employment by providing vocational education and training. Targeting girls and boys between the age group of 18 and 25 years, the programme strives to empower them through market-oriented skill training, along with placement support in the end. English Proficiency, Basic Computer Education, Personality Development and Soft Skills are the primary subjects covered in the training.

In addition to enhancing the youth's prospects of employment in the fast expanding retail and service sector, the programme aims to make them confident and independent, and lead dignified lives. In all STePcentres, initiatives are taken to enhance personal growth and social skills. STeP's significant features - Employee Engagement & Exposure Visits, Career Counselling, Job Placement Support and Post Placement Support ensure that every candidate is successfully placed at the end of the training.



SCALING UP OF EFFORTS

Smile Twin e-Leaming Programme began in 2007 with providing employability training to a few young boys and girls through partnership with community based organisations in select urban locations. The centres were made open for the underprivileged youth who were deprived of higher education due to financial crisis in their families. Within eight years of the programme's implementation, more than 18,000 youth have been provided training on employability skills and more than 12,000 have been placed.

Projects under STe P



26 2013



33 2014



45 2015

Youth provided training



2898



3343 2014



5670 $_{\scriptscriptstyle{2015}}$

Youth placed



1456



1822 2014



2015

IMPACT

- 12 new centres were added across 5 cities in India.
- The re was an overall increase of 73.4% from last year in enrolment at STeP centres
- ▶ 3 corporate engagement programmes and three exposure visits were conducted in each of the 33 STePcentres across the country.
- ▶ 68.4% of the total trained youth got placed in first attempt of the recruitment drive in more than 140 reputed brands.
- More than 60 volunteers were inducted from reputed colleges and institutions at STeP centres to make the training sessions interesting and engaging.
- ▶ 55% of the total beneficiaries were girls.
- the new and improved curic ulum introduced to match the current lmarket needs.
- One-third of all the STeP centres were fitted with new computers and accessories.



MAKING YOU'IH JOB-READY

60 schoold rop-outs from the slums of Kalyan East in Thane district, Mumbai, are preparing to be the first generation white-collar workers in their families. The se youth had given up their education to join their parents at work at a very young age, and help their families survive.

Working as daily wagers and helpers at construction sites, shops or factories, the se boys and girls never got an opportunity to choose and walk on their own paths.

Though hard working, sincere and dedicated, they were unskilled and hence unfit to get a job in the organized sector, and had to crush their hopes.

The Smile Twin e-Leaming Programme (STeP) centre GBS was initiated to help such youth from the socio-economically marginalized communities, to eam a dignified living and dream for a better to morrow.

At the centre, the youth are getting trained in market oriented skills such as English proficiency, computer literacy, basic retail management and sale smanship, personality development, etc. with the aim to enhance their employability.

After successful completion of the six-month extensive STePcourse, the se youth will be placed in reputed brands from the service and retail sectors.



Kalpana, Hyderabad

Like most other young sters, Kalpana wanted to pursue higher studies. She had to discontinue education after her 10th, owing to acute financial crisis in the family. However, she was wise enough to realise the difficult situations and never complained.

Herfatheris a daily wagerwho eams a meagre salary. Nevertheless, Kalpana always took pride in herfather's efforts for he is the man who never leaves any stone untumed to look after his old mother as well as his wife and children.

With a strong desire to contribute to her family's financial well-being, Kalpana enrolled herself for Smile Foundation's Smile Twin e-Leaming Programme in Hyderabad. She worked tirelessly for months to make the most of the career-enhancing programme, which honed her computing and communication skills.

To day, Kalpana works as a computer operator and eams a good salary. She is now bringing home not only bettereconomic security, but also a sense of pride.





Rakhi, Patna

Rakhi wakes up early in the moming, fixes breakfast, cleans the house and afterwaving goodbye to her husband and mother-in-law, sets off on her way to St. Marks School, where she teaches.

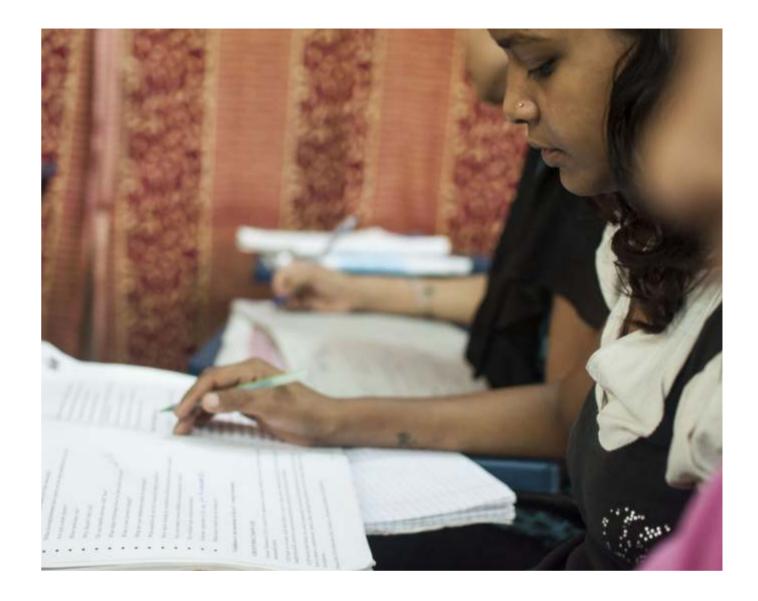
A yearback, Rakhi's life was completely different.

She was married to Sanjeet Kumar, who works as a helper in an electrical shop. The couple lived in a slum in Digha (Bihar) and struggled to survive with limited resources.

To lend a helping hand in supporting the family financially, Rakhibegan herquest for a job. Though she had a bachelor's degree, lack of knowledge of computers and communication skills became the biggest hurdle on herpath to a successful career.

When Rakhi leamt about Smile Twin e-Leaming Programed (STeP), which offers free employability training, she immediately enrolled herself at the nearest STeP centre—Prayas in Patna, Bihar. The six month training helped heremerge well versed in notonly computer handling, but also health education, marketing techniques and fluency in communication.

After the six-month training, she got an offer to teach in St. Marks School. To day, she is not only able to contribute to her family's financial well-being, but also enjoying the profession she always wanted to be in — teaching!



INCLUSIVE SO C IO -EC O NO MIC DEVELO PMENT

One-third of the world's extremely poorpeople are in India (Source: UN Report). One of the main reasons that have led to this grim reality is 'unemployment'.

Smile Twin e-Leaming Programme aims to help individuals break away from poverty by developing the skills they require to improve their live lihoods, and generate production outputs that fuel economic growth.

The programme ensures inclusive socio-economic development of the youth, making it more likely for men and women not just to be employed, but to hold jobs that are more secure and provide comfortable working conditions and decent pay. In doing so, STeP not only helps lift family units out of poverty, but also guards them from falling—or falling back—into the cycle of poverty.

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C URRIC ULUM

A 6-month training module is developed under this project. English Proficiency (verbal and written), Basic Computer Education, Basic Management, Retail Management and Soft Skills are the primary subjects that are covered in the course. The goal is to enhance the candidate's prospects of employment in the fast expanding retail, hospitality, BPO and other sectors.

In meeting the primary objective of providing quality employability training, Smile Foundation has put a highly research-based approach into practice. The purpose behind this was to make the leaming experience of students easier and user friendly. This was done by introducing a new curic ulum on Functional English, focused on interactive skills in the language rather than the intricacies of grammar.

Computeroperating systems and office products were also upgraded at all the centres to match the current market needs. New computers, complemented with accessories, were provided in the centres to meet the needs of the newly enrolled students.

PERSO NALITY DEVELO PMENT

Smile Twin e-Leaming Programme mainly targets young boys and girls who come from extremely poor families. Owing to poor financial conditions of families and less employment opportunities, they are bound to drop out from schoolearly, and get engaged in contractual or casual labour work, or even unsolicited activities.

To encourage these individuals look at the brighter side of life and develop a positive attitude towards life, Smile Foundation has included Personality

Development as a core aspect of the programme.

The inclusion of the subject has helped trainers in

inc ulc a ting positive qualities like punctuality, flexible attitude, willingness to leam, friendly nature, eagemess to help others, etc.among the students.

We ll-trained teachers work with the students in an interactive and planned manner, so that they adapt and modify their flawed concepts for themselves. The programme centres acts as a means of socializing the youth and of nurturing the mental health and personality alteration necessary to facilitate him to take his place as a responsible citizen in a self-governing world.

The objective of including Personality Development as a subject is to eliminate and curtail those obstructions or hindrances that stand in the way of the expression of individual personality, through a process of training. These modules are specifically designed to cater the demands of the professional world and to ensure that participants are given a dequate opportunity to gain skills that will help to improve their functional efficiency.









ENHANCING EMPLOYMENT ORIENTED SKILL

Smile Twin e-Leaming Programme is completely inclined to wards practical training. The idea is to make the youth 'Job Ready' as well as to inculcate a competitive attitude in them so that they could easily cope with the fast-paced work environment. The 'Employee Engagement Programme' and 'Industry Exposure Programme' have been integrated in STeP to help the young professionals understand the firsthand philosophies of the employment sector.

HIG HLIG HTS 2014-15

INDUSTRY EXPOSURE

The Industry Exposure Programme was introduced with the purpose of broadening the perspectives of the candidates who will very soon jo in the dignified workforce of India. Through exposure visits, the students get a chance to learn from the experience of others by direct interaction. The learning experience is practical, which allows the students to ask questions pertaining to the functioning and activities of the various departments, and get first hand feedback at the same time. Very soon, after completion of their six month STeP course, the youth will seekemployment in retail, hospitality and service sectororganisations. Industry exposure visits are part of the STeP curriculum, which helps them become market ready.

Students of STe Pare taken for exposure visits to reputed corporate houses, retail outlets and private organizations, during the training period. There are many times when the employer who visits the se centre s invite s the students for an industry exposure visit, showing the nuances of their trade. During such visits, the students are imparted knowledge on management skills, on-job experiences, and measures that they must take to upgrade their skill le ve ls on a continuous basis. The exposure programme starts with a warm welcome, followed by motivational sessions, guided orientation of different departments, lunch and ends with a de taile d que stion-answerse ssion.

VOLUNTEER ENGAGEMENT

A new aspect has been introduced under the Smile Twin e-Leaming Programed (STeP), in the form of volunte er engagement se ssions, where privileged



youth from reputed colleges and universities take the onus of adding value to the learning process of the ir less privileged counterparts inducted at STeP c entre s a c ross India.

The se young dedicated volunteers not only score high with STeP students by bringing a more interactive approach in the classrooms, but being of the same age group, are also able to understand better and resolve the various challenges that the students face.

Inno vative techniques, games and puzzles are being used by the se volunteers to increase student participation at the STePcentres. Mostly these volunte ers help enhance the communication, vocal and interpersonal skills of the students. The volunteers consider this a two way learning process, which also augments their own knowledge and skills.







PLACEMENT SUPPORT

Smile Twin e-Leaming Programme has consistently trained and produced candidates capable of matching the employer's expectations and this has been reaffirmed everytime. Not only did existing re cruiters maintain their relationship with STeP through recruiting STeP's students but many new recruiters also came down to recruit based on the growing reputation of STeP passouts. The placement cycle begins with counselling early in the programme and continues with live exposure to the industry and its dynamics throughout, culminating in the placement of a student.

HIG HLIG HTS 2014-15

CAREER COUNSELLING

Smile Foundation has introduced career counselling in the programme to offer the right career guidance to the students. The main aim is to help students choose a field that is in tune with their skills and the ir job expectations. Professional counsellors from the service industry are invited at the centres to help the students in knowing their inherent stre ng ths.

The career counse lling sessions are interactive, where in the students enthusia stically participate in discussions about the new trends in the job market. The counse llors focus on motivating the students in making an informed choice on their career path. They also provide guidance in organizing one's thoughts and ideas on decisions. The activity has proved valuable in increasing the morale and confidence of the students and giving them new directions which will be beneficial for the whole society.

C ENTRALISED PLACEMENT CELL

Under STeP, Smile Foundation operates a Centralised Placement Cell works with potential employers from different sectors to understand their needs, analyze them and create opportunities for students, both through campus and off-campus placements. Post the training period, Smile Foundation's Centralized Placement Cell takes up the responsibility of identifying relevant job opportunities for the graduating youth.

The Placement Cellalso organizes workshops on a range of topics covering professional development, communication skills, interview process and career guidance.

STe P has tie-ups with more than 200 renowned brands that offeremployment to the students.

STe P's placement cell works in cooperation with regional programme teams and potential employers, in order to achieve a fair placement percentage.

A good number of a spirations of the youth have been catered to in the year 2014-15. Overall, 68.4% of the students who have completed the course are placed in reputed brands. Majority of these young professionals are sole earning members of their families. They are first generation blue-collar workers who work in an organised sector. Education has led them to a dignified employment and they have now become inspirations for their siblings, cousins and other youths in their communities.

STePalso undertakes post placement follow-ups. The aim is to ensure healthy employee-employer relation as well as retention of the newly recruited students.













EXPANDING ECONOMIC OPPORTUNITIES

- Swabhiman Scholars
- Live liho od programme Gruhini



PROMOTING HEALTH-SEEKING BEHAVIOUR

- Maternal and Child Health
- Fe minine Care & Wellbeing



SUSTAINING CHANGE WITHIN COMMUNITIES

- Change Agents
- Ne two rking with community leaders
- Male involvement





Swabhiman, which was initiated in 2005 to save the girl child, empower poor and support women empowerment, has successfully made a difference to the lives of over 150,000 underprivileged women and adolescent girls.

Swabhiman, meaning self-respectin English, aims at achieving empowement of the less-privileged women, by enabling them to build, secure and use so c io -politic alassets to improve their wellbeing, exercise their rights, take advantage of new opportunities and play a more active role in public life. Smile Foundation is directly reaching over 150,000 women through a set of programmatic interventions in the areas of Education, Reproductive and Child Health, Behavioural Change, Life Skill Education, Networking, Privileged Women and Youth sensitization.

The programme identifies a dolescent girls and women from the community and develops them into Change Agents, who in turn actively contribute to the community mobilization process. Engaging with the community people, the programme focuses on creating awareness and building capacity for women's political participation and collective action against social injustice and exploitation. Capacity building and institutional strengthening, gender sensitising, and addressing healthcare needs of mothers expecting women fund a mentale lements of the programme. Swabhiman also increasingly emphasises on the involvement of men in the process of women's empowerment.



SCALING UP OF EFFORTS

Smile Foundation's women empowerment programme – Swabhiman was established in 2005 and has transformed the lives of over 150,000 under privileged women and girls. Various studies, as well as our experience, have shown that when we help women and empower them, the whole society benefits. Their families are healthier, children go to school, income levels improve and communities become more prosperous.

During the years, mobilising girls and changing them into change agents has proved powerful in accelerating progress in each location, through facilitating networking, coordination, and collaboration among women and women's groups. Gradually, the interventions under Swabhiman began to involve women at all stages. Spectrum of the programs were broadened and made more flexible than before, empowering women themselves to challenge the multiple causes and consequences of their subordination and discrimination. To day with a proven 4 'S' Model that stands for Seeking Healthcare as a Behaviour, Support for Education, Supporters in Men through Male Involvement, and Sustaining the Change in Communities, Swabhiman benefits more than 35,000 women and girl children directly in a year.

Women and girl children benefitted







36,450

IMPACT

- ▶ 300 women and adolescent girls
 were trained to be "change agents"
 to further serve as Community Health
 Educators, Health Volunteers and
 Peer Educators in their communities.
- Over 25,000 community members were counselled on issue s concerning women rights through innovative advocacy events, celebration of events like International Women's Day and Girl Child Day, puppet shows and street plays.
- In the re was an overall increase of 48% from last year in the number of men and boys who were sensitised about the rights of women and girls, reproductive health, family planning and education of children.
- ▶ 70% of the adolescent girls and women benefic iaries, along with community stakeholders, were provided adequate knowledge of reproductive and sexual health issues and access to primary health services
- ▶ Educational support was provided to 82 underprivileged girls for secondary and senior secondary education through full scholarships, be sides regular counselling for academic and personal development



WOMEN LEAD THE WAY TO CHANGE

Meena, who never went to school herself, now sends her two daughters to school and takes lessons from them. Santosh, a victim of child marriage, has started using birth control pills after an early pregnancy spoiled the joy of motherhood for her. Both of them live in a slum cluster near Dhaula Kuan in South Delhi and are part of the Swabhiman programed.

The se women are either house wives slogging hard each day tending to their families, or working as sweepers and maids to help with the house hold income. Health had never been on their priority list as the daily grind for survival hardly left them any time. Early marriages, unhygienic living conditions, no gap between children, lack of knowledge about proper nutrition and low self esteem because of the inherent gender bias in society, had not only had an adverse effect on the health of these women, but also made them oblivious to their individual identities.

When Swabhiman was initiated in the community, most women were reluctant to be a part of it, owing to work and familial commitments and restrictions at home. But afterpersistent counseling and regular community mobilization sessions, today these women regularly attend awareness meetings and trainings on reproductive health, appropriate nutrition, life skills, family planning and other subjects central to a woman's life. Many of them have become Change Agents and are instrumental in creating behavioural change in the community.



Pushpa, Devngere Village, Bengaluru

Pushpa, 23, is a migrant from Davangere village. She is residing at Shivanandanagar with her husband Mr Basavaraj who works at private sector. They got married 2 years ago and after 6 months of her marriage, she conceived but had to go through MTP at a private hospital in the 3rd month with doctor's suggestion as she was bleeding excessively and the report showed that the child's heart was very weak without foetus growth.

After 2 months she conceived again, but unfortunately it got more complicated and again in the 3rd month she went through MTP and was also advised by doctors to not conceive again because heruterus is very weak. She was also told that she would have to undergo Hysterectomy after few years because of unhealthy bleeding.

During the home visit by Swabhiman community healtheducation, Pushpa's problem was discussed with the project coordinator and she was referred to a knowndoctor, Dr. Hindumathiat Vanivilas hospital, a multi superspecialty Govt. hospital.

Pushpa's treatment went for 4 months and after that she conceived and is now 4 months pregnant. All herreports are normal and she has been advised to do scanning on regular basis as advised by doctortill herdelivery. Our CHE's are doing the regular follow up with Pushpa.





Gunjan, Begumpur, Delhi

Seeing no way to raise another child after already having three kids and no support from an alcoholic spouse, Gunjan, a 27 year old from Begumpur, Delhi, ate some medicines for abortion and started to bleed profusely.

When Gunjan came across Smile Foundation's Community Health Educator, Nootan via a house hold visit, she explained her health issue to Nootan. Nootan suggest immediate tending to the excessive bleeding once that was done Nootan counselled Gunjan about various family planning methods available and then convinced her to have a Copper-Tinsertion, which is said to be the easiest and a fairly successful mode of contraception. The procedure of Copper-Tinsertion was done in January 2015, in Madan Mohan Malviya Hospital in South Delhi and Gunjan recovered without any complications.

Gunjan says she is indebted for life for receiving help from Nootan at herdoorstep and thanked her for the counselling. She says she is now considering a permanent contraception with tubectomy. Iccha, Delhi

Ic chais a 32 year old woman in her 7th month of pregnancy. She is living in Delhi with her husband.

At the 3rd month of pregnancy herhemoglobin was 8 and she was taking some medic ines from a 'baba' nearby hervillage. When she went to govt. ho spital for hercheck up the doctors denied taking hercase into consideration for institutional delivery due to her low hemoglobin level which could be risky for her and for herchild and the hospital did not want to take any risk.

After this rejection she came in contact with Swabhiman's Community Health Educator, Ms.

Nootan who took her case as a serious problem and started to motivate her to visit nearby PHCs and also made her aware about the importance of Iran Folic acid tablets and told her to not to follow village medication.

No otan mobilized her continuously for about 1 and half and after regular follow ups and insistence to take IFA tablets and follow other healthy eating habits, Iccha's Hemoglobin level have now gone up to 11.

Herhealth is now normal and she is healthy to deliverababy. She has successfully got registered in Govt. Hospital at Malviya Nagar.





Rajani, Bengaluru

Bom to a poor family in Bengaluru, Karanataka, Rajani had barely started understanding the hard truths of life, when she was married to Hanumantha, a vegetable seller. Hanumantha was a caring husband, but owing to his meagereamings, the couple often had to sleep on empty stomach and go without even the basic necessities of life.

When Rajanic onceived one year into the mamage, she was very weak. She gave birth to a pre-mature and underweight baby, a daughter. When she conceived again, she was unable to carry the baby and had a miscamage. This was followed by another miscamage, which further worse ned the physical as well as mental health of Rajani.

Swabhiman's Community Health Educators (CHE) came to know of Rajani's condition during door to door visits in her slum area. They asked her to attend the special health camp for women, which are held regularly under the programme. At the camp, Dr. Vijaya Chandrashekhar, the team gynaecologist, counseled her and started her treatment.

Afterproper intake of medicines and couselling, Rajani is now healthy and in a positive state of mind. The CHEs also counseled her husband and the couple have now decided to adopt family planning methods and wait for the right time to have their next baby. Meanwhile, Rajani is focusing on ensuring a low-cost nutritious diet and healthy mutine for herself and for her young daughter.



EXPANDING ECONOMIC OPPORTUNITIES

In many parts of the country, women face discrimination that limits their education and economic options. Educating a girl child has enomous benefits on improving the lives of girls and women, and the lives of those around them. Lack of education directly affects their rights to equalemployment opportunities, their chance to overcome poverty and accelerate development. Smile Foundation's Swabhiman programme encloses education of adolescent girls and providing live lihood training to underprivileged women as its integral interventions.

HIG HLIG HTS 2014-15

SWABHIMAN SCHOLARS

Young, spirited and extremely talented, 82 girls from slum clusters around Delhi, have been awarded merit-based scholarship to complete their schooling and higher studies under Smile Foundation's Swabhiman programme. Many of these girls are pursuing their graduation from reputed colleges and universities across the city, including the Delhi University.

Be sideseducational support, the Swabhiman scholars are also educated on a spects like critical and creative thinking, interpersonal relations, decision making and problem solving, advocacy, conflict management skills, negotiation and refusal, reproductive health, gender-based violence, goal setting, and coping with emotions and stress. They are taken on regular exposure cumeducational tours to enhance their knowledge and over-all personality.

The se girls are all first generation learners, with their parents engaged as dome stichelp, drivers, street vendors and daily wagers. Along with difficult financial conditions at home, the Swabhiman scholars also had to overcome the prevailing gender bias in their families and community, and the vicious trap of child marriage, to even go to school.

However with determination, hard work and courage, these girls were able to defeat their circ umstances and emerge as winners. Each one of them is an inspiration for thousands of other girls struggling to survive. Many of them are spearheading the movement of change to day, by teaching youngergirl children from the community and spreading awareness about the importance of education among their peers.

LIVELIHO O D PRO GRAMME - GRUHINI

During the year, Smile Foundation initiated a live liho od skill training project for a dole scent girls and young women, titled "Gruhini", under its Swabhiman programme. The nine-month project aimed at providing vocational skills such as stitching and craft making to the socio-economically disadvantaged girls and women from the community, enabling them to have an independent identity and dignified live lihood. Be sides providing vocational training, the Gruhini project ensured holistic development of the girls and covered various aspects, including nutrition and health awareness, life skills development, social a ware ne ss, va lue e duc a tio n, b a sic lite ra c y, so c ia l adaptability and personality development. Girls who are enrolled in school received remedial support to improve their academic performance.





Efforts were also made to engage and sensitize the families and community of these girls and women towards their dreams and aspirations.

The pilot project, implemented in partnership with Sisters of Charity at Kanakal village of the Basavana Bagewadi Taluk in Bijapur district, Kamataka, inducted girls and women between 14 to 24 years of age, including schooldrop-outs, illiterates, child laborers, children of devadasi, children with single parent, and child widows. Lack of opportunities, social barriers, low self-confidence and bare minimum participation in social spheres, had stifled the talents and dreams of these young women.

To day, each one of them is capable of building an independent identity for herself, as are thousands of other girls and women who have been touched by the Swabhiman programed.





PRO MO TING HEALTH-SEEKING BEHAVIO UR

One of the key interventions of Swabhiman is promoting positive health seeking behaviour through various group activities like meetings & counselling sessions as well as home visits. The focus is on addressing critical issues like consequences of early marriage and early pregnancy, benefits of e a rly registration of pregnancy and institutional de livery, significance of properante natal & post natalcare, having healthy & economical food and nutrient supplements, importance of breast feeding, etc. This well structured intensive intervention helps in reduction of infant & child morta lity as well as maternal morta lity. Counselling and group meetings result in higherdemand for he alth services which are met through fully equipped mobile hospital.

HIG HLIG HTS 2014-15

MATERALAND CHILD HEALTH

Over 20,000 children and mothers were provided Matemal and Child Healthcare services during the year. Matemal and Child Health intervention started in 2005 as a pilot initiative of Swabhiman. The intervention is largely aimed at providing basic primary healthcare and addressing issues of pregnancy, newborn and child health, and facilitating access to public and private facilities.

Swabhiman envisages improvement in the health status of mothers, newboms and children in urban slums by bringing healthcare services to their doorstep through well-equipped Mobile Hospital Units and Smile Health Camps as well.

Smile Found a tion operates Mobile Hospital Units to provide much needed medical services to the underprivileged women, mothers and children who normally might not have the opportunity to receive health care. From medical examinations to vaccinations/immunizations, non-emergency care, hearing and vision screening, laboratory evaluations and disbursement of medicines, the mobile hospitals provide a wide-ranging health services, right at the doorsteps.

During the year, 45 Swabhiman Health Camps were conducted in 38 locations that directly benefitted 11,500 women and children. Swabhiman Health camps are specialised camps where in preventive and curative health services as well as free medicines are provided to the beneficiaries. Each camp features a team of medical experts, including paediatricians, gynaecologists, paramedics, volunteers and Swabhiman change agents. Diagnosis, counselling, medicines and contraceptives are made available for free during the camps.

Furthermore, through continuous communication interventions in house holds and communities, the programme motivates, educates and prepares expectant mothers for child birth, highlighting an

a may of he alth issues including matemal and neonatal danger signs, matemal and neonatal nutrition and more.

FEMININE CARE & WELLBEING

Smile Foundation's Swabhiman programme, through its culturally acceptable gender-sensitive interventions, generates intense awareness among the women and girls, so that affirmative, healthpromoting behaviours are adopted.

The programme helps young women and a dolescent girls:

- understand their sexual and reproductive wellbeing
- makes them aware of their menstrual hygiene
- know consequences of unprotected sexual behaviour
- understand how various methods of temporary and permanent contraception can facilitate making informed choices and prevent SII and RIIs.







Through community participation tools like workshops, trainings on various health components and other outreach initiatives, the programme lets women and girls know about importance of health, education, decision-making powers and legal rights. Home visits, community meetings and street plays are essential components of the programed.

The Swabhiman team regularly counsels and advocates the women and adolescent girls on issues concerning their reproductive and sexual health, family planning, adolescent health,

a c quiring life skills for selfempowement and education for holistic and sustainable development. Innovative tools like theme based street plays, puppet shows, mime shows, counselling sessions, one-to-one interactions, etc. are used for community mobilization and awareness generation. An information centre is also developed where deliberation of contentious and sensitive issues are addressed. This centre, in addition, acts as a depot for provision of information on government schemes, distribution of family planning methods, etc.

Distribution of sanitary kits to adole scent girls





Training on reproductive health for Community Health Educators



Schoolgirls attend aware ness session on personal hygiene



SUSTAINING CHANGE WITHIN COMMUNITIES

Swabhiman by far has been able to affirm through community actions and advocacy that though women and adolescent girls face numerous sociocultural challenges coming from their prescribed societal roles and ascribed status within the family, community and society, contravening such challenges is very much possible through creation of opportunities and enabling environment. The programme, thus also focuses on bettering the attitude and behaviour of women and adolescent girls individually, in order to develop in them, behaviour to seek their rights and eventually seek the methods through which they can realize their optimum potential in all facets of societal living.

HIG HLIG HTS 2014-15

CHANGEAGENT

The mainstay of Swabhiman programme's community outreach is through Change Agents, Peers Educators, Community Health Educators and Swabhiman Health Volunteers. These change agents are identified from the community and empowered through regular training sessions on relevant issues. They furthereducate and spread awareness among their peers in the community. A cascading effect of change is built through these change agents, which is sustainable and long lasting. More than 100 of these change agents were developed and provided training by some of the best trainers and resource persons from specialized organizations like Parivar Sewa

NEIWORKING WITH COMMUNITY LEADERS

One of the major interventions under Swabhiman programme is networking with government institutions to enhance community awareness. The community institutions with which the networking is undertaken are Integrated Child Health Scheme (ICDS), health departments, educational institutions and panchayats. The fostering of network with such institutions has qualitatively impacted the outcome of efforts and activities, and Swabhiman has always kept these organizations under the information loop ensuring possibilities of future convergence and relationships.

Ne two rking is a lso done with 3-level structures of the health administration for seamless implementation of its interventions:

- a) Primary le ve l—working c lo se ly with Auxiliary Nurse Mid wive s(ANMs) and Accredited Social health Activists (ASHA) workers in the community
- b) Second level—coordination with Primary Health Centres (PHCs)/dispensaries
- c) Third leve contact coordination with medical personnelat specialty hospital/institutions

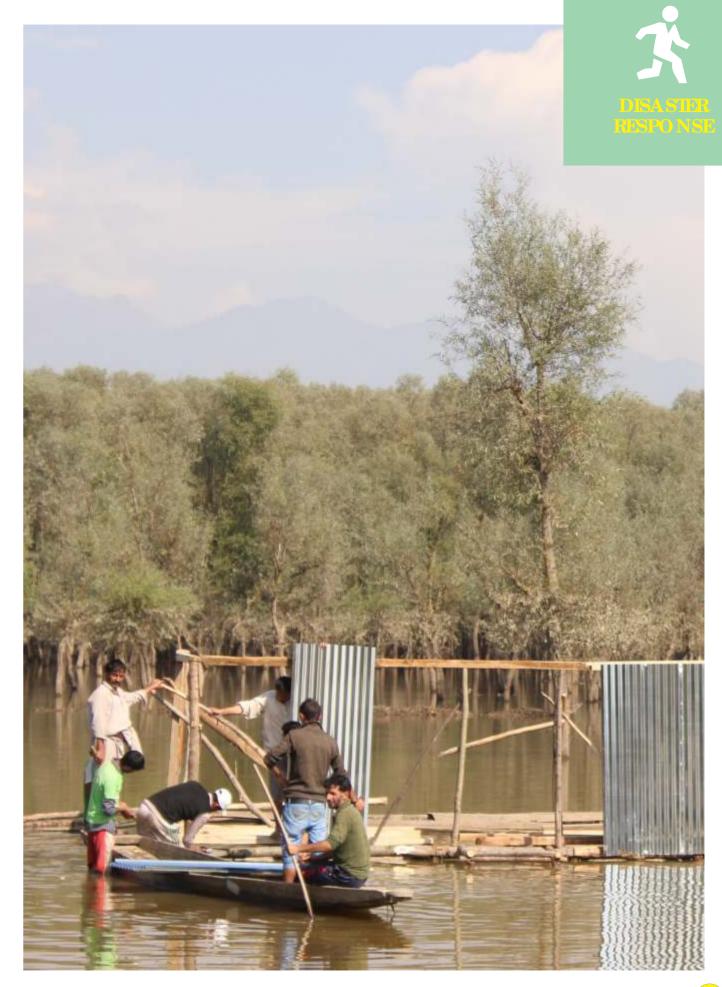


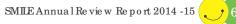


MALE INVO LVEMENT

Smile Foundation be lieves that a woman cannot be empowered until and unless herpartnerallows her to practice her freedom by will and lets her participate in all decision-making processes, whether in the family or in the community. This programme is specially articulated to bring attitud in a l a nd b e ha vio ura l c hanges in the community men who acts as male protagonist, models who would set example, and real men who equally supports there partners in all walks of life. Men in the community are oriented with appropriate messages on planned and responsible parenthood underlying the importance of increased male involvement in planning families, responsible fatherhood, adoption of permanent male sterilization, providing critical care support to spouse during pregnancy and ensuring safe de live ry.

Regularhouse hold visits, spouse counselling, informal meeting with male family members, activities encouraging betterfamilial and spousal communication are some of the activities that are focused upon to bring about male involvement and attitudinal shift in them.







Initiated in 2005, Smile Foundation's
Disaster Response Programme has led
relief and rehabilitation projects during
Kashmir Earthquake, Mumbai floods,
Tsunami, Uttarakhand floods and
now the J&K floods.

India is vulne rable, in varying degrees, to a large number of disasters. Within the past 10 years, the country has experienced an increase in the frequency and intensity of natural disasters. As per National Disaster Management Authority, more than 58.6 percent of the landmass is prone to earthquakes of moderate to very high intensity; over 40 million hectares (12%) of its land is prone to floods and rivererosion; close to 5,700 kms, out of the 7,516 kms long coastline is prone to cyclones and tsunamis; 68% of its cultivable area is vulnerable to droughts; and, its hilly areas are at risk from landslides and avalanches.

Emerging from the need to address disaster management more effectively, Smile Foundation's Disaster Response Programme was initiated in 2005. Focused on children and their families, this programme acts beyond relief and response to immediate needs into rehabilitation and maintaining a sustainable approach to help them rebuild their lives by facilitating their education, healthcare and live lihood.

RESPONDING TO THE JAMMU & KASHMIR FLOODS

Strong winds and heavy rains triggered landslides and flooding in several parts of the Jammu & Kashmir state during the last stage of Monsoon in India, in September, 2014. Within two days, the Jhelum River was reported to be flowing several feet above the dangermark. Flooding of the river caused heavy casualties and loss of property in over 2600 villages, out of which 390 villages in Kashmir were completely submerged. Bandipur, Ganderbal, Srinagar, Poonch, Rajori, Reasi, Kulgam, Anantnag, Shopian and Pulwana districts were the worst hit districts. Among these, Kulgam, Anantnag, Shopian and Pulwana were completely cut off.

Government reports had put the death toll at a mund 300, with over 600,000 people affected. Several hospitals were affected and ran out of life-saving drugs. Children and patients were in grip of panic, as Kashmir valley was on a severe healthcare crisis. For the thousands of people affected, problems seemed to be only mounting with every passing day. Displaced and rescued families lived in tents braving the chilly autumn season for many days. Short on resources and with little hope of returning home, the se up rooted families remained desperate for help.

In the absence of light and heating devices, and shortage of woolens, it was the thousands of families living in tented colonies that were worst hit, when the temperature dropped to nearly 5 degrees in the night. Food, water and other essentials being the foremost necessity, healthcare too has become the need of the hour in all the affected areas.

To getback on its feet, the state required a massive national effort.

As a response to the nature's worst fury that Jammu and Kashmir faced in 60 years, Smile Foundation's Disaster Response programme began to provide relief support to the affected communities. It camed out its rescue operations in two phases:

EMERGENCY RELIEF O PERATIONS - PHASE 1

Phase 1 focused on emergency rescue and distribution of humanitarian supplies to children and families. The team started with the relief efforts in RS Pora, Sure-Chakand Malke Chak. As few houses were ruined completely in Sure-Chakand Malke Chak, people were living in relief camps provided by civil society organizations. The flood has swept away the normalcy of human life there and immediate need of basic food items, milk, school bags, books etc were observed.





The team worked towards amanging logistic as listed with the help of villagers and representatives of othercivil society organizations. Milk powder, biscuits, waterbottles, schoolbags, copies and penswere disturbed in these villages. The way people tumed out to receive these relief materials was the testimony of the plight the area is going through.

In Kashmir, the team started with relief material distribution in Kulgam, Anantnag, Pulwama and Badgam areas, where the marks of devastation were quite visible. Later, they camed out their relief operations in Lasjan, Soitang and Bandipore. Villages like Shahgund, Gulshan Muhallah, Gondi Boon and Kaniyari were badly affected. The team distributed milk powder, biscuits, water bottle, chlorine tables and ORS etc. among the villagers. In addition to these, Smile Foundation provided the bare minimum woolen and blankets to the flood affected families to help them endure the stark winters.

5,000 children and families were directly benefitted from the relief interventions.



HEALTHC ARE SUPPORT – PHASE 2

Into its second phase of relief operations, the Smile Foundation team on ground focused on providing comprehensive healthcare to the flood victims.

The number of hospitals affected in the floods is huge, causing a severe healthcare crisis. To address the healthcare needs of the people, a series of Smile Health Camps are being organized across the affected villages, seven of which have already been conducted at seven locations, namely—Lasjan, Budgam district; Ghati Shalimar

Gawmarg and Moti Mohalla Kalan, Srinagar district; Nowgam Bala Mohalla, Bandipora district; Gulzarpora, Pulwama district; Chattabal, Kulgam district and Matipora Pattan, Baramulla district.

With doctors, pharmacists and volunteers joining efforts to make the health camps a success, the second phase of operations has been quite effective in benefitting thousands of villagers in Jammu and Kashmir. Each health camp offered diagnostic, counselling, curative and referral services.





Camps conducted



115 2014-15

Families benefitted



 $10,\!000$





Reaching out to an approximate of 6.5 lac children from an average of 2000 schools from over 400 districts in the country every year,

Smile Foundation's Child for Child programme seeks to inculcate a conscience and value system in the children so that they grow up to become responsible citizens.

Children have the potential to be the best change agents, be it in their family or the community in which they live. They must be sensitized from the beginning as the values that are instilled in this tenderage decide the future of a child, and subsequently of the whole nation. If privileged children take the responsibility of ensuring welfare of the underprivileged children, an equitable society can be envisaged.

Child for Child (CFC) is a national level programme which aims to sensitize privileged children towards the life and aspirations of their less privileged counterparts, and inculcate in them feelings of empathy and conscience. In addition, their parents and teachers are also involved in the process. The programme has today reached out to every part of India with the exception of Lakshadweep.

HIG HLIG HTS 2014-15

DURING THE YEAR

- 1. More than 1500 value education sessions were conducted in schools across India. Under the se sessions, children are sensitized to various causes, value systems and ushered to realize the importance of growing up as responsible citizens of the country. To engage the young minds, stories and lessons are shared from the lives of inspiring change-makers, pioneers and leaders of India who dedicated their lives to the betterment of society.
- 2. Safe ty & Self-defence workshops, especially for girl students, were organized in various cities of North India. Facilitated by external trainers and experts, the sessions cover safe ty precautions at road, home, school, public places, and also while using the internet. Self-defence tricks and techniques are taught to the students to prepare them for any adverse situation.
- 3. Smile Foundation joined hands with Children's Film Society of India to screen value-based films for school children across India. The film festival was well received by not only school children across India, but also highly appreciated by their parents, teachers and principals. Every screening was followed by discussions and interactive sessions where representatives from the Child for Child team discussed how the children could implement leamings from the films in their own lives.









6,55,114



7,18,020

Sc hools



1974



2200







- 4. Government schools, and smalleducational initiatives working for marginalized communities, were extended support by privileged schools for construction of new classrooms and computer literacy centres in the school premises. This was a step towards bridging the existing gaps and inequalities between the privileged and underprivileged children, which is one of the major objectives of the Child for Child programed.
- 5. Workshops were conducted for over 100

 Princ ip als and educationists in Bengaluru and
 Chennai, on the pertinent issue of protection of
 children from child abuse. Steps to safeguard
 children, enabling teachers, sharing ideas for
 prevention and precautions were the main focus of
 the workshops. The aim of the initiative is to create
 a collective effort to make the society a better
 place to live in, where children can be nurtured in a
 secure and conducive environment.
- 6. Various platforms were created to bring children from two different worlds to gether, as an endeavour in sensitising the privileged children about the life and aspiration of their less privileged counterparts, as well as building the confidence of the underprivileged through interactions outside their own social periphery.



AWARDS AND RECOGNITION

Re c o g nitio n for rendering valuable services under Social Responsibility by IC SI

Innovation Excellence Award in Social Sector 2015 by ASSOCHAM

NGO Leadership & Excellence Award 2015 by ABP News

Be st NGO (Skill De ve lopment) for 2014-15 by ASSO C HAM

ICAICSR Award 2015 for the 'Best CSR Project in Women Empowerment'

Global CSR Excellence & Leadership Award 2014 by ABP News

Education Excellence Award 2013 by the Associated Chambers of Commerce and Industries (ASSOCHAM)

NGO Exc e lle nc e) 2013 by IPE (Institute of Public Enterprise)

Quality Initiative Mission Award 2013

Healthcare Leadership Award 2012

Represents India as nominated member of Together4Change Alliance

GEHe althc are - Modem Medic are Excellence Award

Asia-pacific Child Rights Award

Barclays Bank Chairman's Awards

EMPANELMENTAND ACCREDITATION

Ac c re d ite d as a Guide star India Platinum validate d c harity

An Implementation Agency under CSR
IA Hub of the Indian Institute of Corporate
Affairs (IICA) under a eg is of Ministry of
Corporate Affairs, Govt. of India

Accredited as a Charities Aid Foundation (CAF) America it valid at ed referring ince 2014 at TISS, an initiative under Ministry of Heavy Industries & Public Enterprises

Ac c re ditation with India Development Foundation of Overse as Indians, under the Ministry of Overse as Indian Affairs, Govt. of India

Ac credited as Charities Aid Foundation (CAF) India validated charity since 2012

Ac c re d ite d as IRD-re g iste re d no n-p ro fit o rg a nisa tio n with Guide Star

Listed as a member organisation with United Way Worldwide

PRO JECTLO CATIONS



In the year 2014-15, Smile Foundation directly benefitted 400,000 children and their families through 158 welfare projects in 732 villages and slums, across 26 states of India

20,370 und erp rivile g e d c hild re n we re provide d e d uc a tio n through Mission Ed uc a tio n programe d

5670 youth were given employability training and 3987 were placed under STeP programme

317053 c hild ren and the ir families received healthcare services at the ir doorsteps through Smile on Wheels

36440 people were provided with specialized healthcare through Smile Health Camps

36450 women and girls were empowered under Swabhiman programme

SMILE FOUNDATION

Regd. Off: V-11, Green Park Extn., New Delhi-110016

BALANCE SHEETAS AT31STMARCH, 2015

(Amount in Rs.)

PARIICULARS	SCHEDULE	AS AT 31STMARCH, 2015	AS AT 31STMARCH, 201
SO URC ES O F FUNDS			
Capital Funds	1		
Corpus Fund		22,75,20,598	18,75,20,598
General Reserve Fund		8,31,70,721	8,57,83,751
Current Lia bilities & Provisions	2		
Sundry Creditors for Expenses		4,29,280	2,54,297
Restricted Grants - Pending Execution		5,67,52,219	2,58,71,082
Other Current Liabilities		59,25,785	1,07,18,947
TO TAL		37,37,98,603	31,01,48,675
APPLICATION OF FUNDS			
Fixe d Assets To tal Gross Block of Fixed Assets	3	8,88,13,755	8,75,77,147
Less: Gross Block of Assets held by		2,22,09,563	2,22,09,563
Trust having Right to Use Only		2,22,00,000	2,22,00,000
Gross Block - Owned Assets		6,66,04,192	6,53,67,584
Le ss: Ac c um ula te d De p re c ia tio n		2,40,04,800	2,09,16,749
Ne t Blo c k o f Fixe d Asse ts		4,25,99,392	4,44,50,835
Current Assets & Loans and Advances			
De po sits	4		
Deposits with banks		31,61,70,364	24,44,66,796
Se c urity De po sits		5,87,210	4,48,210
Tax Refund Dues		83,91,966	69,61,041
Loans & Advances	5		
Project Advances		19,55,440	20,97,004
Re stric te d Grants Receivable		19,03,607	85,29,944
O the r Ad vances		21,37,949	29,14,216
Cash in Hand		52,674	2,80,68
TOTAL		37,37,98,603	31,01,48,675

Signific ant Accounting Policies & Notes to Accounts forming part of Balance Sheet

AUDITORS' REPORT

As per our report of even date annexed

For M.K. Kuchchhal & Co.

C harte re d Ac c o untants

Manoj Gupta

FC A/Pro p./M.No.086669

Firm Regn. No.007670N

Place: New Delhi Date: 18th September, 2014 For and on behalf of board of trustees of SMILE FOUNDATION

Sd/-AGM - Finance (Pratap Ray)

Chief Operating Officer
(Vikram Singh Verma)

Sd/-Tłuste e (Shantanu Misra)

Sd/-Truste e (Yogesh Jagia)

SMIE Annual Review Report 2014 -15

SMILE FO UNDATION

Regd. Off: V-11, Green Park Extn., New Delhi-110016

INCOME AND IIS APPLICATION ACCOUNT FOR THE YEAR ENDED ON 31STMARCH, 2015

(Amount in Rs.)

For and on behalf of board of trustees of SMILE FO UNDATION

Chief Operating Officer

(Vikram Singh Verma)

Sd/-

Sd/-AGM - Finance

(Pratap Ray)

PARIIC ULARS	SCHEDULE	FOR THE YEAR ENDED ON 31STMARCH, 2015	FOR THE YEAR ENDED ON 31STMARCH, 2014
INCOME			
I. Voluntary Contributions (including for specified programmes)	6	16,58,59,274	15,46,94,382
II. O the r Inc o mes Interest Inc o me O the r Misce Ila neous Income	7	2,13,63,472	2,09,16,988 84,823
(II)		2,13,63,472	2,10,01,811
Gross Income Available for Application (I+II)		18,72,22,719	17,56,96,194
APPLICATION OF INCOME			
I Income Applied for Execution of Various Social and Welfare Programmes: Mission Education Programed Action for Children Programed Child for Child Programed Education Programed U/s 35AC of Income Tax Act, 1961 Smile Twin E-Leaming Programed Smile on Wheels Programed		2,95,73,949 4,97,70,308 2,17,17,624 8,64,103 1,55,97,833 2,66,86,881 45,04,560	3,57,38,363 3,36,94,654 2,04,65,118 3,61,300 98,35,151 2,83,50,945 52,82,275
Scholarship Programed Other Social and Welfare Programmes		51,99,621 23,21,703	11,74,778
(1)		15,62,36,582	13,49,02,583
II. Administrative & Other Expenses	8	3,05,11,116	2,19,44,117
Total Income Applied (I+II)		18,67,47,698	15,68,46,700
Net Surplus / (Defic it) before Depreciation & Taxes		4,75,021	1,88,49,493
Le ss: De p re c ia tio n	3	30,88,051	29,72,729
Net Surplus / (Defic it) before Taxes Less: Provision for Tax		(26,13,030)	1,58,76,764
Net Surplus / (Deficit) transferred to General Reserves Fund		(26,13,030)	1,58,76,764

Signific ant Accounting Policies & Notes to Accounts forming part of Income and its Application Account

AUDITORS' REPORT

As per our report of even date annexed

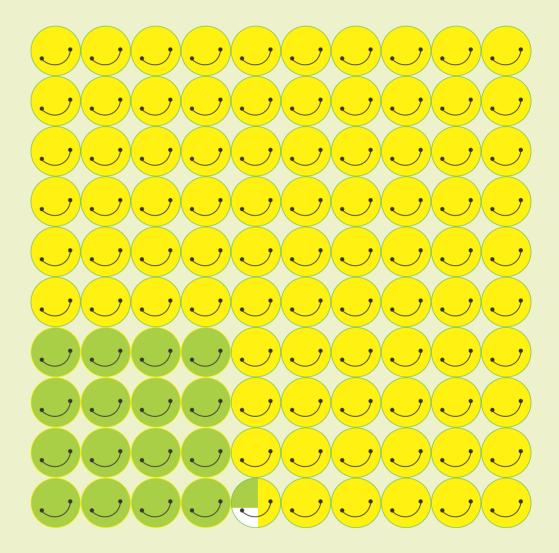
For M.K. Kuchchhal & Co. Chartered Accountants

Manoj Gupta

FC A/ Pro p ./ M.No .086669 Firm Regn. No.007670N

Sd/-Place: New Delhi Truste e Truste e Date: 18th September, 2015 (Shantanu Misra) (Yogesh Jagia)

2014-15

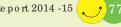


DISBURSEMENTOF FUNDS

Amount (in Crores)

Receipts18.72

- Pro je c t Exp e nse s15.62 (83.45%)
- Administrative Expense s3.05 (16.29%)
- Ac c umula tion for Next Ye ar 0.05 (0.26%)



CERTIFICATE OF COMPLIANCE

TO WHOM ITMAY CONCERN

We have examined the compliance of conditions stipulated in the "Standards of Good Governance" by Smile Foundation, for the year ended March 31, 2015.

In our opinion and to the best of our information and according to the explanations given to us, we certify that Smile Foundation has complied with the standards as stipulated in the "Standards of Good Governance".

The compliance of clauses/conditions of "Standards of Good Governance" is the responsibility of the management; our examination was limited to procedures and implementation thereof adopted by Smile Foundation for ensuring the compliance of all the standards.

For S Behera & Co Company Secretaries

Sd/-

(She sde v Be he ra)

Company Secretary in Practice
CP No. 5980
Date - September 30, 2015