



Centre for
Advocacy and
Research

Annual Report
2022-2023



25
YEARS



Annual Report

2022-2023



Centre for
Advocacy and
Research





CONTENT

1.	From the Executive Director's Desk	I
2.	Our Interventions on the Ground	ii
3.	Achievements at a Glance!	iii
4.	Water Sanitation and Hygiene	1-6
5.	Health Communication	7-14
6.	Health and Social Inclusion	15-18
7.	Social Inclusion	19-24
8.	Preventing Gender-based Violence	25-26
9.	The Partners & Teams	27-28
10.	Community Based Organisation (CBOs)	29-30
11.	Awards and Achievements-April 2022-March 2023	31-31
12.	Board Members	32-32
13.	Institutional Profile & Financials	33-44



From the Executive Director's Desk

“ The year 2022–2023 was a period of innovation, marked by the transition from offline communication to online platforms and e-governance. Our communities across cities responded to this challenge with positivity and enthusiasm.

In Bhubaneswar and Jaipur, mobile app-based radio -Janhit Vaani and Jaipur Vaani - reached out to first-time users from marginalized groups, encouraging them to share feedback and WASH priorities with municipal officials for a timely response. Our single window and caller club members educated communities on using QR codes to strengthen fecal waste management services, facilitated citizens to register suggestions on public sanitation services through a dedicated app. contributing to the Swachh Sarvekshan or national sanitation survey. The innovative community sanitation wall – Saniwall - recorded data on access or lack of quality WASH services, to hold service providers accountable and presenting scalable solutions that can be replicated across cities and states, empowering marginalized groups to participate in strengthening inclusive and gender-responsive WASH in underserved slums.

In five cities, we significantly enhanced our collaboration with urban local bodies and sector departments to establish e-mitra and digital service centers. These centers facilitated the linking of beneficiaries with critical services in health, food, and pension, addressing gaps in service delivery. For instance, in Ajmer, Help Desk members collaborated with the district collectorate, while in Pune and Bhubaneswar, they worked closely with municipal corporations and health authorities to provide last-mile linkages for transgender individuals, pregnant and lactating women, and elderly domestic workers.

As part of the Janadhikara intervention in Bengaluru, Help-desk delivered quality and improved health services through Public Health Centers in high-risk areas for vulnerable communities. They also activated and strengthened the use of e-governance portals such as Janaspandana, Mahiti Kanaja, and the State Scholarship, offering doorstep and on-site services for the elderly, semi-nomadic groups, and construction workers.

CFAR continued to strengthen health-related communication on RMNCHA+N and reporting in Uttar Pradesh and Bihar. Working with state media and government health departments, we amplified attention towards disease elimination efforts, promoting early diagnosis and effective treatment of Tuberculosis, Kala-Azar, and Filaria. Our Patient Support Networks at the village, block, and district levels disseminated knowledge, enhanced uptake during drug administration drives, and supported the government's efforts in disease eradication.

Lastly, Gram Sakhi sensitized and fostered convergence between zonal, block and village stakeholders to create a community safety network for prevention and redress of gender-based violence in Kishangarh underscoring our commitment to creating safer communities for women and girls.

In this one year, we enabled 21,77,312 marginalized communities to secure sanitation, welfare, health, and social services. None of this would have been accomplished without the unwavering support and collaboration of our team, partners, and stakeholders.”



Akhila Sivadas

-Akhila Sivadas

Our Interventions



- WATER, SANITATION AND HYGIENE**
Rajasthan & Odisha
- HEALTH COMMUNICATION-
REPRODUCTIVE, MATERNAL, NEW-BORN,
CHILD, ADOLESCENT HEALTH AND
NUTRITION AND LF-VL**
Uttar Pradesh & Bihar

- SOCIAL INCLUSION**
Rajasthan, Maharashtra, Odisha, West Bengal & Delhi
- PREVENTING GENDER-BASED VIOLENCE**
Kishangarh, Rajasthan
- HEALTH & SOCIAL INCLUSION**
Karnataka

Achievements at a Glance!

Total
Beneficiaries
21,77,312

Sector	Project Title	Supported By	Geography	Constituency	Beneficiaries
Water, Sanitation and Hygiene	Mobilizing, Facilitating and Replicating Socially Inclusive WASH Initiatives in India's Urban Slums	Water for Women- Department of Foreign Affairs and Trade, Australian Government	Bhubaneswar, Jaipur, 41 wards, 4 districts	Women, persons with disabilities, Sexual and Gender Minorities, elderly, sanitary workers	96,040
Health And Social Inclusion	Janadhikara-urban poor special project	Azim Premji Foundation	Bengaluru urban –rural - 76 settlements, 23 wards, 4 Gram Panchayats, 2 districts	Informal sector workers-construction, domestic, garment workers, beedi, sanitary and sex workers, street vendors, ethic communities- Kole Basava Hakki-Pikki	1,40,000
	Communication support for LF and VL Elimination	Bill & Melinda Gates Foundation	Uttar Pradesh, Bihar 58 blocks, 21 districts	LF-VL patients and survivors	13,71,579
Health Communication	Strengthening communication using mass media to support programme and advocacy priorities on RMNCHA+N	Bill & Melinda Gates Foundation	Bihar, Uttar Pradesh-113 districts	Health department officials, media personnel	7,800
Social Inclusion	Unlocking rights and entitlements for social protection	Michael & Susan Dell Foundation	Delhi, Kolkata-wards- 33, districts-10	Unorganized sector workers, women, persons with disabilities, migrants	4,21,136
	Developing Community-led model of integrated slum development through strengthening multipurpose Workers Facilitation Centres	Azim Premji Philanthropic Initiatives	Delhi-settlements-21, districts -4	Informal workers-construction, domestic, drivers, street vendors, daily wage workers, gig workers, sanitary workers	81, 350
	Scaling up and institutionalizing social inclusion through digital Single Window –e-Mitra/ CSC-Help-desks in collaboration with Urban Local Bodies and key departments	Azim Premji Foundation	Ajmer, Bhubaneswar, Pune- 194 settlements, 34 wards, 5 districts	Informal sector workers-construction, domestic, garment workers, beedi, sanitary and sex workers, street vendors, PLHIV, trans persons, women, adolescents, persons with disabilities, ethic communities-sansi, waghari	54,820
Gender-based Violence	Building a coordinated response to prevent and reduce Gender-based Violence – Phase II	India Development and Relief Fund- Partnership for Transformation	Kishangarh, Ajmer-33 villages, 10 Gram Panchayats	Women and girls, survivors of gender-based violence	4,627



Water, Sanitation, Hygiene

In 2022-2023, CFAR continued to strengthen inclusive and gender responsive WASH and set up community led accountability and feedback mechanisms to enhance access and quality services in informal slums of Bhubaneswar and Jaipur. Special focus in this phase was on deploying innovative, digital tools to strengthen WASH system's capacity for last mile delivery, scaling up and replication across the city and adoption in other states. Deliberate efforts were made to make WASH governance gender responsive and socially inclusive for marginal groups.

CFAR ensured sustained delivery of services by ensuring the responsiveness of the WASH system and the development of a robust community engagement framework. This participatory ward level governance model was shaped in collaboration with diverse stakeholders, including communities, technical experts, and right holder organisations. CFAR adopted a community-centric approach, building technical capacities of community operating structures - community management committee and single window forum - and facilitating them to do micro-planning, sensitise stakeholders, jointly campaign for safe sanitation including mechanised desludging and waste segregation, and integrate gender, MHM and WASH education in adolescent and health institutional facilities.

To bolster this community-centric approach, CFAR implemented various initiatives. Training waste collectors on self-protection, sensitizing police personnel on issues related to women and trans persons, and supporting persons with disabilities in securing social entitlements and assistive aids were integral components. Self-help groups of rag pickers, trans persons, and women were also re-skilled and facilitated to successfully invest in social enterprise, generating profits and contributing to community resilience.

Strong governance and community-level ownership were highlighted as crucial for the success of inclusion in institutional processes related to WASH. Community representatives and WASH actors together developed and deployed innovative mechanisms. These included a QR code for connecting slum residents with desludging services, disability signboards to indicate households with persons with disabilities for waste collection, and using a mobile app-based community radio for diffusion and dissemination of experiences, insights, and innovations.

In Bhubaneswar and Jaipur, CFAR institutionalized community monitoring through the Saniwall WASH Dashboard. This dashboard reflects sanitation service data collected from households and aggregated at the ward level. It is reviewed monthly by the Ward Committee for course correction and service improvement. The Saniwall played a pivotal role in shifting paradigms, garnering support for decentralization, and building confidence in participatory governance. A turning point in 2022 demonstrated the value of community engagement processes, resulting in a significant increase in inclusion and improvement in sanitation rankings in both Bhubaneswar and Jaipur according to the national government's annual survey.

Mr Santana Ojha, Community Member, creating awareness through songs, Bhubaneswar



Conscious efforts were made towards making WASH governance gender-responsive. Key factors such as the presence of self-help groups, women's roles as frontline workers, and their influence in WASH responsibilities were acknowledged. To address deep-seated inequities, Single Window Forums and Community Management Committees saw increased representation of women and diverse genders, acting as links between communities and WASH systems. They successfully secured WASH services and social entitlements for various marginalized groups.

Collective advocacy and impact on power structures were enhanced through offline and online service monitoring, regular feedback, and active engagement with men and boys to redefine gender norms. Mainstreaming WASH programs across governmental institutions was another crucial aspect. These processes led to approvals and budgetary allocations for the construction of seven gender-inclusive community and public toilets with SBM 2.0 funds by Municipal Corporation Jaipur and installation of unisex signage across all facilities.

The significant twin-achievements of building cost-effective social mobilization models within the WASH system and enhancing the self-efficacy of communities this year demonstrate attitudinal shift on gender among decision-makers and an empowered community committed to long-term WASH inclusion. Additionally, emphasis on livelihood improvement and professional skills development for the WASH workforce, with self-help groups acquiring new skills, co-managing WASH programs, and addressing the stigma associated with sanitation-related work, purposefully contributed to sustainable community-led initiatives.

Key Achievements

Developed diverse and technically trained community leadership

1,411 women, men, girls, diverse genders, elderly, persons with disabilities, socially excluded groups

- ✎ Strengthening Collective Voice and Agency - 75 slums, 736 community representatives
- ✎ Generating Demand - 52 wards - 424 community representatives
- ✎ Co-facilitating Last Mile Service Delivery - 21 wards - 252 community representatives
- ✎ Shaping Pathway - 21 wards - 211 community representatives.

93 master trainers trained 544 frontline workers and WASH duty-bearers on Gender, MHHM, and WASH in 30 schools, childcare, and health institutions



Single Window Forum Member pasting disability sticker; Bhubaneswar

“

“With the disability signage and sticker, I feel that others in my neighbourhood are raising their collective voice for me. I can't hear the waste van approaching but the neighbour tells me. Now, people call me for meetings and take my suggestions. I feel valued and confident.” Mahalaxmi Maharana, persons with disabilities - deaf, Bhubaneswar, Ward 21

”

Enhanced Accountability and Transparency

- ☞ Saniwall-WASH Dashboard launched in Bhubaneswar replicated across 27 wards by Jaipur Municipal Corporation.
- ☞ Saniwall data collection, updation, and ward review meetings facilitated by 695 community representatives.
- ☞ Using mobile app based radio 3,257 first time users from marginalised groups provided real-time community feedback on WASH services.
- ☞ Collected 38,546 citizen feedback for Swachh Sarvekshan in both cities contributing to improved sanitation ranking in both cities.



DC Visit to CTC complex, Amogarh, Ward 78 Jaipur

Changed Gender and Social Norms

- ☞ Visible changes in WASH gender norms is reflected in the decrease in the practice of women and girls collecting water from 75% to 36% in Jaipur.
- ☞ Enumerated and trained 628 rag pickers for formal registration with the Municipal Corporation re-skilled and certified for contracting as MCC workers.
- ☞ Ten SHGs with 35 trans persons contracted by WATCO to manage 10 Water Kiosks and FSTP plants and Material Collection Centre.
- ☞ Parichay trans person SHG secured a trade license in the vending zone of North Zone to set up Sani-shop.

WASH Service Inclusion

WASH service delivery improved positively for 68,813 people, including 23,668 in marginalized populations across 41 wards.

- ☞ Access to basic water improved for 73,778 beneficiaries
- ☞ Access to safe drinking water for 163,014 beneficiaries
- ☞ Access to toilets and desludging improved for 77,339 beneficiaries
- ☞ Hand washing with soap strengthened for 101,480 beneficiaries
- ☞ Strengthened O& M for community toilets for 1,963 beneficiaries
- ☞ Improved door to door waste collection for 1,093 beneficiaries
- ☞ Street lights installed benefitting 1,122 beneficiaries
- ☞ Storm water drain de-silting benefitting 10,970 beneficiaries
- ☞ Fogging and fumigation services for 2,731 beneficiaries



Smt Sulochana Das, Mayor Bhubaneswar hands over keys of battery operated vehicle to Susant Rout, representative, persons with disabilities for waste collection

“

“This inclusive toilet is the first of its kind in Jaipur and I appreciate the effort made by representatives of women, men, transpersons and persons with disabilities to design and see it through till the end. This is a big learning for me. We will popularize this model and persuade Councillors in other wards to adopt this model of gender-inclusive toilets in their areas.” Naresh Nagar, Councillor Ward 84, Jaipur

”

Community Toilet With a Difference, Jaipur



Gender-inclusive Community Toilet Ward 84, Jaipur

On World Toilet Day, 2021, 14 Single Window Forum (SW) and Community Management Committee (CMC) members representing single women, persons with disabilities, adolescents, elderly, transgender, sanitary workers and male forum members from six settlements (12,236 population) Jaipur, while collectively reflecting on the Year's theme 'Valuing Toilets' pointed out to WASH system decision makers:

"I feel unsafe at night as the toilet is far from our house" (Poonam, female sanitary worker); "I cannot use the community toilet; it is not made for me" (Hari Singh, elderly - disabled); "No idea where to dispose the used absorbents" (Seema, adolescent)

This and other sharing done by a cross-section of persons living in highly vulnerable situations, struck a chord. By early January, 2022, the Director and Chief Engineer, DLB and Municipal Corporation sanctioned the construction of five gender inclusive community toilets (CTs). Now the goal shifted to securing support to the process that the 14-member team who now set themselves up as a 'Gender Resource Group' (GRG) should be given unfettered right to design the toilets. This was agreed to. Speaking on behalf of GRG, Nafisa said *"We decided that each cubicle will have grab bars, railings, western seats, tactile floor, sanitary napkin vending machine, incinerator, nursing and baby changing room. The cubicles will be segregated into women/trans-women and men/trans-men and one will be reserved for children."*

The design was technically vetted by Engineers and GESI-WASH Experts from UNICEF and transgender CBO, Nai Bhor. Now the bigger challenge was to ensure that in the process of toilet construction the design was not compromised and so the GRG members again asserted their right to supervise the construction. Explaining this, Chiranjilal said *"Throughout the construction, GRG members supervised the operation. Two members worked shoulder to shoulder with the contractor and with the Assistant Engineer, technical lead and the rest of us check quality of materials, and helped the construction workers."*

The first of the CT was inaugurated by Mayor on February 26, 2022 and thrown open for the residents in April 2023 and soon after this, Gender Resource Group members took the responsibility for managing the service and elaborating on this Kanak, transgender artist said: *"To strengthen collective pride and ownership, we conducted sensitisation workshops for users, painted murals depicting inclusivity and readiness to share space with mutual respect and trust and go beyond just symbolism of inclusiveness."* Finally what made Kali Devi, representative, person with disabilities, happy was the fact that *"this CT model is being replicated in the other wards of Jaipur. The Corporation has passed the budget for construction of seven other gender-inclusive toilets in Jaipur."*

Disability Inclusion and Social Accountability



Rekha washes her hands at the handwashing unit in ward 113, Jaipur

Despite making significant strides in shaping socially inclusive WASH, CFAR realized that much needs to be done to achieve effective disability inclusion in WASH. In the last six months, the focus has been on strengthening social accountability; enabling persons with disabilities (to take the lead in all the deliberations at the monthly Ward review meetings held to discuss threadbare the WASH service data displayed on Saniwall or Community Dashboard and the challenges that persons with disabilities, women and other marginal groups are facing.

While participating in these meetings, 16 persons with disabilities representatives of Community Management Committee (CMC), self-help group (SHG) supported by caregivers from eight wards 63, 57, 21, 9, 18, 19, 8 and 50 stated clearly that no decisions can be made without consulting them.

Speaking on behalf of persons with disabilities Pramila Mohapatra (Ward 63) wondered “How can we as CMC members declare that sanitation is inclusive when most toilets are inaccessible?” Sushant Rout (Ward 21) added “Without ensuring our participation, how can we get to know what the government is doing to improve WASH and livelihood?” Anand Chandra Behera (Ward 21) went a step further and said “If the service is not designed keeping our realities and needs in mind, how can, we benefit from it?”

Realizing that not enough 'focused and meaningful' attention will be paid to their needs, Sandhyarani Sahoo, a caregiver, suggested at a Ward review meeting (February 2022) that to sensitize all service

providers - collecting waste or in charge of WASH maintenance - about their special needs, sign board indicating the area where PwDs reside and stickers outside their homes could be placed.

Ten days later, a multi-stakeholder consultation was held with the decision makers of Bhubaneswar Municipal Corporation where it was decided to officially roll this out in three wards and later extend it. From April 2022, 405 (1.51%) persons with disabilities were identified in 8 Wards and reached with signage boards and household stickers. In the next two months, we plan to identify persons with disabilities across 41 Wards and reach out to a minimum of 1,800 at the earliest. The effect that this has had on the community and WASH duty-bearers, is evident from the testimonies, shared below:

“I feel this will ensure inclusion of persons with disabilities in all WASH services. I am hopeful that whatever WASH improvement happens in the future, the issue of accessibility will be addressed.”
Mohanta Gouda, caregiver

“I have got a battery operated vehicle to collect waste and now I plan to focus on persons with disabilities households and make a living.” Sushant Rout, physically challenged

“The Ward officer, Sanitary Inspector and Community Organizer respond to our demands and we do not have to go to them repeatedly. Waste vans are also servicing us.” Dangi Parida, persons with disabilities, locomotor disability



Health Communication

Kala-azar Patient/Survivor Network Member educated community on Kala-azar and importance of IRS complete spraying in HHs for prevention of Kala-azar in Jagdishpur, Bankata block, Deoria

In 2022-23, CFAR continued strengthening health related communication on RMNCHA+N and reporting in Uttar Pradesh and Bihar. Working with State Media and Government Health Department amplified attention towards disease elimination, fostered support for eradication efforts, early diagnosis and effective treatment of Tuberculosis, Kala-Azar and management of Filariasis. CFAR strengthened Patient Support networks at the village, block and district levels to disseminate knowledge, strengthen uptake during the drug administration drives and build a collective enablement for disease management and elimination.

As part of the BMGF-supported program spanning 113 districts in Bihar and Uttar Pradesh, CFAR is providing technical support to the Department of Health and Foundation partners to strengthen health communication on RMNCHA+N through mass media engagement. This involves monitoring media reports, capacitating health functionaries and journalists in evidence-based reporting, and documenting ground-level stories to reach the intended audience through online web portals and innovative communication strategies

In Bihar and Uttar Pradesh, Patient Support Group members, served as 'torchbearers,' by playing a pivotal role in sensitizing and mobilizing the community on prevention, supporting MDA and IRS elimination. Their contribution involved dispelling myths, addressing misconceptions, and enhancing risk awareness through experience sharing, benefiting the elimination program. They identified 7,198 LF and 347 VL patients, forming 311 Patient Support Groups with 3,640 members.

The Patient Network conducted a 'readiness assessment survey' in 5,251 households for the MDA campaign across 9 districts in Uttar Pradesh and

Bihar. They supported ASHAs to ensure Directly Observed Treatment (DOT) in 10,018 households, successfully overcoming 1,010 refusals for MDA. Support group members proactively participated in health awareness campaigns, street plays which enhanced participation in Night Blood Survey Camps and community preparedness for timely response to Acute Encephalitis Syndrome (AES) outbreaks. Additionally, the groups played a crucial role in linking patients with the health system for sustained medication, training peers on MMDP, and facilitating spraying, contributing significantly to the program's success.

Our health communication initiatives demonstrated that partnering with state media and engaging with regional platforms and web portals enhances widespread dissemination, amplified the impact of health messaging, and strengthened the connection between public health initiatives and the general public. Our efforts in analysing and highlighting diseases in an elimination mode significantly contributed to government eradication initiatives which established the importance of data-driven reporting in responding to health challenges.

Filaria Patient Network members making people aware about filaria and its prevention sitting in health department stall in mela organized on the occasion of Bihar Diwas in Patna



Key Achievements

Uttar Pradesh, Bihar

102,906

Reports, press releases, factsheets and profiles on RMNCHA+N facilitated in media.

2,353

Journalists sensitized through media sensitization workshops on Filaria, AES, Routine Immunization, and Kala-azar.

1,839

Government officials trained on communication, media advocacy and the importance of key messages in health communication.

2,235

414 educators and 303 facilitators educated 2,760 patients through 121 MMDP trainings. Across 21 districts, 81% (2,235) patients now practice self-care and exercise regularly.

1,038

individuals tracked their daily practices and conducted awareness activities with 32,000 community members.

33,549

Strengthened advocacy through JOSH Talks Platform, where Ram Sanehi and Poonam Devi, two network leaders shared their personal testimonials viewed by 33,549 persons

40,650

Network members supported Asha workers to administer DOT among 40,650 patients in 79 villages in UP and Bihar.

Filaria Patient Network members raised awareness on Filaria at block health mela in Kanpur



Uttar Pradesh

Media reports tracked and monitored

197,563

Media reports published

71,843

Bihar

13,499

Reports channelled through leading publications - Dainik Jagran, Dainik Bhaskar, Prabhat Khabar, Hindustan and Aaj.

29,938

Reports facilitated through web portals

15378

Reports disseminated through regional publications.

14,943

Reports focused on diseases in elimination mode – Tuberculosis - 7,119, Filaria – 5,697 and Kala-azar – 2,127.

Media coverage

Media coverage on targeted diseases included 24,240 (41.1%), system strengthening services – 14,396 (24.4%), child and new born health – 10,607 (18%), maternal health – 4,471 (7.6%), reproductive health – 3,434 (5.8%) and adolescent health – 1,667 (2.8%).

Best practices stories

Showcased 83 best practices stories (805 reports) and profiled 173 survivors, champions, Nikshay Mitras and FLWs (1,935 reports).

In Kanpur sitting in the health department stall in Health mela organized in Kanlyanpur block Filaria Patient Network members educated people visiting the stall on Filaria, its causes and prevention



"The state of Uttar Pradesh is resolute in its commitment to eliminate Lymphatic Filariasis. In the ongoing mass drug administration campaign frontline workers play a vital role, not just in distribution but in ensuring on-the-spot consumption. Success lies in the community willingly consuming the drug, and inspiring others to do the same."

Parthasarathi Sen Sharma, Principal Secretary, Health, Uttar Pradesh.



"CFAR's significant contribution includes not only facilitating the program's outreach to the community through media channels but also sensitizing journalists to urgently disseminate positive health information. As a result, crucial child-related issues have been effectively spotlighted, capturing public attention."

Dr. Bijay Prakash Rai, State Programme Officer, Child Health, Bihar State Health Society

"I wash my legs twice a day and exercise daily. Now there is no pain and swelling. I tell other filaria patients that washing and exercise will benefit you more than the medicine."

Shanti Devi, Laxmi Patient Support Group member, Muzaffarpur

In Ballia Filaria Network Members were trained by Health department and Partner organization PATH on Morbidity Management and Disability Prevention and also provided MMDP kits





Filaria Patient Network member visited beneficiary along with ASHA to break refusal during MDA round in Deoria

Jai Shankar Bajpai—working tirelessly for LF elimination program

Jai Shankar Bajpai, a 59-year-old resident of Sachendi village in the Kalyanpur block of Kanpur district, did not reveal his hydrocele condition for five years. Unaware that hydrocele is a form of filaria, he was ashamed and did not have the courage to reach out for support. His wife, Maya Devi, also a filaria patient, joined the Radha Mohan Patient Support Group in August 2021. For a year, Jai accompanied Maya to monthly meetings. He observed group activities, attended trainings, and listened to discussions. After almost a year, he gained confidence to reveal his hydrocele during a meeting. Witnessing the group's caring and respectful nature, one day he summoned courage and spoke about his hydrocele and also reached out to the Health Department. He now actively participates in awareness activities, conducting over 150 sessions in the community, including meetings, school programs, and engagements with stakeholders. During the National Filaria Mass Drug Administration, he collaborated with the Health Department, mobilizing people for filaria testing. Jai tirelessly works towards LF elimination, shedding feelings of shame and hesitation. During awareness programs, he urges people not to hide hydrocele, and shares his experience informing them that hydrocele can be treated.

Training of Filaria Patient Network members on self-care and Morbidity Management and Disability Prevention (MMDP) by health department and Lepra in Patna



Orientation of Network members on Filaria and importance of self-care in Sachendi, Kalyanpur block in Kanpur



Naseem Bano

TB Champion

Naseem Bano, 35 years is a single woman living with her parents in Babu Purwa Colony, Kanpur. Her father, a tailor, and her mother, a homemaker, support her alongside her two married brothers. Naseem earns a living by providing home tuitions. In February 2016, Naseem experienced symptoms like fever, persistent cough, and chest pain. Initially seeking relief from local medical stores, her symptoms persisted. A few months later, as the fever returned, she underwent a chest x-ray, in which tuberculosis went undiagnosed. Due to her family's financial constraints, consulting a doctor became challenging. In May 2017, during an active case finding campaign, she was diagnosed with pulmonary TB and commenced treatment. Facing challenges and side effects during treatment, including nausea, acidity, shortness of breath, hair fall, and skin problems, Naseem persevered with the support of her elderly parents. Despite facing discrimination from her community she continued her treatment with determination. In this process her elderly parents remained a steadfast source of support and guidance from TB unit officials played a crucial role in restoring her confidence which helped her overcome the disease.

The program provided timely assistance, ensuring proper treatment, counselling, and follow-up. Bridging the support gap for Naseem, it prevented the development of a more acute and drug-resistant form of the disease. Today, Naseem as TB Champion advocates against stigmatization of TB patients, using her experience to help others.



Empowering Maternal Health through the PMSMA Awareness Campaign:

The introduction of the Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) in Madhubani district aimed to elevate the standard of antenatal care for pregnant women from the 9th to the 21st week. Despite encountering initial challenges related to low ANC uptake, the Health Department adopted an innovative strategy to promote safe and institutional deliveries across the district. The department designated specific sub-centers every Thursday and established mini PMSMA camps at all Primary Health Centers under them. These camps facilitated comprehensive prenatal examinations, aiming to raise awareness and prompt timely healthcare seeking.

Recognizing the potential impact, Dr. R.K. Singh, the Nodal Officer for PMSMA, collaborated with CFAR to create awareness through newspaper coverage, targeting the general public. This news coverage had a substantial impact, generating widespread awareness and inspiring pregnant women to actively participate in healthcare services, especially the mini PMSMA camps. The success of this collaborative effort is evident in the data as in April, the percentage of pregnant women receiving ANC in the district surged to 96%, further increasing to an impressive 107% in May. This underscores the positive impact of the PMSMA awareness campaign on maternal healthcare uptake in the region.





Health & Social Inclusion

Ward-level review meeting with representatives from Ward committee members, Mahila Arogya Samiti (MAS) members, and Bala Vikasa Samithi members to review the progress of Janadhikara initiatives

In 2022, CFAR's urban poor *Janadhikara* intervention in Bengaluru contributed purposefully in improving access, quality and governance of public health services delivered through the Public Health Centers in high-risk areas for vulnerable communities. Three e-governance portals - Janaspandana, Mahiti Kanaja, and the State Scholarship - were activated for doorstep service delivery for the marginalised.

The community-led Sahaya Single Window ensures targeted health services and welfare entitlements through a digital Common Service Centre. They have also improved living conditions and access to quality sanitation services through active and informed participation in urban governance institutions/structures.

Forum members conducted settlement-level enrolment camps, interacted with service providers, and coordinated with grievance redress authorities to set up Pension Adalats for the underprivileged and ethnic communities to articulate their concerns.

Simultaneously, *Mahiti Kanaja*, unified web platform, was activated to provide the community with information on the use of public money. CFAR also supported the Department of Personnel and Administrative Reforms to accelerate the development of IT-enabled government services and converge with key departments such as Labour, Health, Women and Child Development, Revenue, and Health to improve their efficiency and transparency in delivering quality services.

Daksha Samuha Women's collective meeting at Ahammed Nagar, Nagarabhavi, Bangalore



Key Achievements

- Four resource centers have been established to disseminate information, provide support, and offer referrals on government schemes and programs. These centers also serve as activity centers for women, adolescents, and the elderly.
- A community kitchen, managed by dedicated volunteers, serves hot, cooked meals to 60 destitute elderly regularly.
- Help desk facilitated the enrolment of 43 children from Hakki Pikki a stigmatised, semi-nomadic tribe, traditionally engaged in bird hunting and confined to living in forest areas.
- The Data Dashboard of the e-government and Labour Department has been made public to demonstrate transparency in governance.
- Trained Single Window members are managing Janaspandana, Mahiti Kanaja, and the State Scholarship Portal, ensuring the doorstep delivery of government services for citizens.
- Kutumba IDs, enabling children to apply for scholarship benefits in collaboration with government school authorities, facilitated.
- Weekly Nadakacheris have been activated for the direct approval of pension, caste, and income certificates by the Directorate.
- The School Development and Monitoring Committee has been supported to facilitate transfer certificates for school dropouts registering in government institutions.
- Regularized teacher-parent meetings aim to improve learning outcomes for children.

Help desk member interacts with beneficiaries during community meeting , Bengaluru



Taranam Banu

Taranam Banu, a 28-year-old widow, began selling soap powder after her spouse Nayaz Pasha succumbed to kidney failure. Following the intervention of the Help-desk, applications for the Widow Pension and the National Family Welfare Scheme (20,000) were submitted. Two months later, Taranam started receiving a monthly deposit of 800 rupees.

To add to her woes, their eight-year-old was diagnosed with 100% intellectual disability, and immediately, a disability pension was applied for. However, Taranam received Rs 1,200 instead of the approved amount of Rs 2,000. This issue has been escalated for redress.

Taranam Banu registering applicants for pension schemes, Bengaluru





Social Inclusion

Help desk members at the Duare Sarkar Camp, Kolkata

In the year 2022-23, CFAR significantly enhanced its collaboration with urban local bodies and sector departments to institutionalize community engagement processes in the governance of social development services. Additionally, CFAR developed digital mechanisms aimed at addressing critical gaps in health, food, pension services and basic citizenship documentation in five cities

In the five cities of Ajmer, Pune, Bhubaneswar, Kolkata and Delhi, CFAR focused on aligning with existing programmatic opportunities and key schemes prioritized by state governments to develop pathways and enhance the quality of service delivery. Evidence gathered from baseline studies highlighted the need for convergence and coordination between social sector departments, as well as the importance of strengthening e-governance processes for redressal and feedback. This social inclusion work with marginal unorganized sector workers, migrants, ethnic communities and socially marginalized group was supported by Azim Premji Foundation and Michael and Susan Dell Foundation.

In Ajmer, Pune, and Bhubaneswar, Helpdesk members actively worked with administrative units to complete due diligence processes, provide mandatory documents, and designate Nodal officers to verify documents promptly. At the community level, the Helpdesk intensified processes such as line listing and micro-planning. Digital training sessions were conducted for community representatives to enhance their capacity in using helplines and online portals for effective problem-solving.

In Delhi, and Kolkata, CFAR's membership in key district level committees enabled us to streamline and develop dedicated pathways with key Nodal Departments to strengthen service delivery across seven milestones for marginal groups across 121 informal slums. In yet another intervention CFAR focused on setting up five Workers Facilitation Centres in informal slums. Baseline and household level need assessment prioritizes ten schemes and services required by workers and their families which included immunization, basic identity documentation and grievance redress. Helpdesks disseminated information and facilitated completion of mandatory documents, IEC materials and settlements level camps, online registration services and linkages with government campaigns and programmes. Simultaneously a mobile 24/7 helpline service was launched to facilitate the process of securing information and addressing gaps in service delivery.

Across all five cities, 98,298 marginalized poor have been linked to seven sectoral schemes and services through 10 Single Windows. Of the 7,668 grievances received, 43% (3,354) related to food, health, and pension schemes were successfully resolved.

Nukkar Natak on Social Schemes outside, One Stop Crisis Centre, Delhi



Key Achievements

Streamlined digital delivery of social sector services with Nodal Departments

- ❧ The District Collector of Ajmer streamlined due diligence processes for single women, widows, and PLHIV.
- ❧ A QR code system was implemented to register feedback and grievances related to health, food, nutrition, and social security, facilitating faster redressal in collaboration with the Pune Municipal Corporation.
- ❧ The Department of Health in Pune and Ajmer successfully enrolled 4,190 migrants for the Urban Poor Arogyadayee Yojana.
- ❧ In Delhi, created pathways for convergent delivery of health, social security, livelihood and education services with appointment of a Nodal official for direct interface and communication with help desk members and key departments - District Administration, DLSA, Dept. of Education, Health, India Post, UIDAI and ICDS.
- ❧ CFAR designated as member of Delhi Legal Service Authority, District Vigilance & Monitoring Committee on SC/ST, District Nutrition Programme, Monitoring and Coordination Committee for Shelter Homes, Septage Management Committee, Delhi.
- ❧ District Revenue Department, Delhi, mandated a weekly campaign Prashashan Gaon ki Ore to promote use of 1076 government helpline for doorstep delivery of 40 key social sector services.



Help desk members disseminate information on schemes, Delhi



Campaign with DM office on Social Inclusion Scheme, Delhi



Legal Literacy at Single Window, Delhi

Institutionalized Help-desk in decision making and governance of key services



Help-desk Meeting Teja Chowk Ward 2, Ajmer

In Ajmer, Bhubaneswar, Pune, 327 Helpdesk members designated in decision making committees such as the School Development and Management Committee, Ward Kalyan Committee, Anganwadi Vigilance and Monitoring Committee, and Mohalla/Ward committee.

A total of 140 Helpdesks activated the use of Aaple Sarkar, Janarogaya Yojana Helpline in Pune, Public Grievance Redressal portal, BOCW Helpline in Bhubaneswar, Sampark Portal, and Labour Line in Ajmer and e-Governance Helpline in Delhi.

Helpline 8310520585 and area-specific Whatsapp groups launched with diverse stakeholders to follow up on day to day grievances. Information on 23 schemes and services disseminated by helpdesk members across 67 wards in five cities.



Beneficiary at Help-desk during campaign on Social Inclusion with DM office, Delhi

“Migrant population from Uttar Pradesh, Bihar, Rajasthan and Madhya Pradesh living here for many years do not have basic documentation which excludes them from welfare schemes. When I was approached to support the Aadhaar camps, I saw this an opportunity to link migrants to schemes and benefits,” Urmila, Asha worker and community leader, Khichdipur.

Kamla

Single Window links Kamla to Social Entitlements



Kamla, a widow residing in the resettlement colony of Gautampuri with her two children, works as a domestic worker. Struggling since the loss of her spouse seven years ago, Kamla faced challenges securing widow pension despite multiple visits to the department.

Her basic documentation failed to establish her identity as a widow living in Delhi for over five years. In response to Kamla's request, Helpdesk member Satender advised her to attend the Single Window meeting. Initially hesitant, Kamla eventually agreed after much persuasion. Through the Single Window, Kamla was assisted in applying for an Aadhar Card and Voter ID card at the Mega Enrolment Camp organized by DLSA and District Administration. Additionally, her residence verification was facilitated with the support of the local ward councillor.

Equipped with these crucial documents, Kamla successfully filed an online application for widow pension in August 2022. By January 2023, she began receiving the pension directly in her bank account, marking a significant positive change in her financial situation.

Kariman

Overcoming Mobility Barriers: Kariman's Journey with Workers Facilitation Centre

Kariman Ram, a 33-year-old cobbler from Khichdipur, faces the daily challenges of living with a locomotor disability caused by polio since the age of five. Despite these obstacles, Kariman relies on an old tricycle to navigate short distances, allowing him to maintain his job and support his family. Reflecting on his experience, he shared, "It is not easy when your legs don't work. It has been a constant struggle to go around and do simple things – it is all a challenge."

Geeta, a Helpdesk member, encouraged Kariman to attend a camp for the distribution of free

assistive aids. Initially concerned about potential costs, Kariman decided to go, and to his surprise, he received a new tricycle without any hassle. The paperwork process was smooth, leaving him feeling cared for and supported. Kariman's story shows that even a small incremental change can have a purposeful impact and contribute to building self-confidence. Today, inspired by this positive change, Kariman is learning a new skill—he is undergoing training to make shoes, aiming to scale up his business and further enhance his independence.

Kariman Ram is now able to move on his own with his wheelchair, Delhi





Preventing Gender-based Violence

In 2022-23, CFAR was involved in sensitizing, building consensus and enabling convergence between District administration and the Department of Women and Child Development, Legal Services Authority, One Stop Crisis Centre, Mahila Suraksha and Salah Centers, Aanganwadi, and Police. The aim was to strengthen prevention and address gender-based violence.

Across 10 Gram Panchayats in Kishangarh, community representatives designated as Gram Sakhis conducted knowledge camps, educating girls and women on women-centric laws. They disseminated information among self-help groups on legal regulations pertaining to sexual offenses and harassment at the workplace. Wall writing, leaflets, handouts, videos, and street plays were utilized to create an enabling environment around gender-based violence.

Gram Sakhis raised issues of safety of women and girls in public spaces during Gram Panchayat meetings. This proactive approach resulted in elected representatives designating beat officers to increase police patrolling in high-risk and dark spots in villages.



GBV Awareness Activity with Youth at Maliyo ki Badi, Kishangarh



GBV Awareness Activity and Pledge taking by Youth at Maliyo ki Badi, Kishangarh

Key Achievements

- ❧ 10 Women's Forums formed in 10 Gram Panchayats, comprising 136 members.
- ❧ Installed 40 cameras and 116 road lights in four Gram Panchayats, enhancing safety for women and girls in public spaces.
- ❧ Sensitized 77 men to advocate with Gram Panchayats on women safety in public spaces.
- ❧ 640 girls used *Speak-up* App to register SoS complaints for police support.



Health Camp at Kamla Bawadi, Ward 8, Ajmer



Multi Stakeholder Consultation on MHM, Jaipur

We express our gratitude to the following partners. Without their consistent and generous collaboration and support, our work across the states would not have been possible. We extend our thanks for their collaboration, mentorship, and guidance:

- ✧ National, State, and City-level government agencies, line and allied departments, and institutions
- ✧ Academic institutes, research networks, and think-tank alliances
- ✧ Global networks, bilateral organizations, international non-governmental organizations (INGOs), and regional alliances
- ✧ Technical organizations, private sector agencies, and communication partners
- ✧ Civil society organizations, development partners, and subject experts
- ✧ District, Zonal, and Ward-level nodal focal points, program implementers, and service providers
- ✧ Community leaders, platforms, and institutional frontline workers
- ✧ Community-based organizations working for the welfare of marginalized groups, including children, women, sexual and gender minorities, persons with disabilities, sanitary workers, and ethnic groups
- ✧ Donors, corporates, and social sector departments for their financial and in-kind support.
- ✧ Disha, Rajasthan, Uttar Pradesh, West Bengal.
- ✧ Operations in 11 cities and 152 districts

The Team: The Work and the Mission of CFAR



CFAR is defined by the team it has fostered, the collectives it has grown and the partnerships it has built over the years. The organization draws strength from the strong network of team members across the country and from the relationships it has built with the community, the government and other bilateral, international and local organizations.

The Team The work and The Mission of CFAR is made possible by its diverse and driven team members, technical consultants, community representatives, volunteers and allies. The organization has a total strength of 423 personnel, with over 120 team members working from its national office in Delhi and seven state offices in 11 cities and 152 districts. These team members bring in a wide range of skills and background in development, research, communication, social-work, media and advocacy along with technical expertise in managing health, social inclusion, WASH and gender programmes. The national core team comprises of the programme, research, administration, communication, HR and financial personnel, along with the project managers and coordinators overseeing the state program teams. In addition, each of the eight state offices include project based team members, external consultants and volunteers.

Community Leadership-Across all states CFAR has an exhaustive community network of :

- ❧ 6 community based organisations (CBOs) of women, men, persons with disabilities;
- ❧ 1,222 community forums with 13,313 community representatives ;
- ❧ 9 accredited e-Mitra digital service centres;
- ❧ 182 Self Help Groups of trans persons, women, rag pickers, elderly, persons with disabilities and sanitary workers ;
- ❧ 963 digital facilitators representing diverse communities.

This leadership is facilitated as help desks, single window forums, gender forums, community management committees and kishore-kishori samooths to manage Single Window operations. These collectives enable us to reach over 34 lakh urban poor every year.

CFAR follows a diverse hiring practice and ensures that all genders and socio-demographic groups and people of different abilities/ disabilities are included in the hiring process, and the organization thrives on a well-knit team structure with frequent and open communication lines.



Community Based Organisation

Across states and cities, The Centre for Advocacy and Research extends works in tandem with 13 CBOs and extends technical support through capacity building and skilling, policy advocacy, facilitating stakeholder linkages and in knowledge management. Of these six CBOs of women, men, persons with disabilities were set by community leadership who were a part of CFAR interventions and seven are partners working with marginal groups.

Mahila Pragati Manch

Mahila Pragati Manch, Delhi (2006) brings together women living in slums to enhance their social mobility, disseminate information on women-centric laws, and strengthen the delivery of WASH services. Core thematic areas include gender-based violence, social entitlements and livelihoods.

Daksh Samooah

Daksh Samooah, Jaipur (2012) focuses on food security, domestic violence, toilet, and WASH rights for communities living in slums and resource poor habitats.

Satark Yuva Sangthan

Satark Yuva Sangthan, Delhi (2019) engages young people through creative mediums such as summer camps, sports activities, sanitation drives, dance, and music programs to enhance community development.

Kranti Mahila Sanghatan

Kranti Mahila Sanghatan, Solapur (2008) disseminates information on social and welfare schemes and promotes the education of children from households of home-based and brothel-based sex workers.

Sarvodaya Samiti

Sarvodaya Samiti, Ajmer (2012) facilitates access for female home-based and brothel-based sex workers and their families to welfare entitlements, health services, and education services.

Naibhor Sanstha

Naibhor Sanstha, Jaipur (2005) focuses on mainstreaming rights and inclusion of trans person in Garima Grah providing skilling, livelihood development, social protection, violence protection and health care.

Janshi Lakshmi CBO

Janshi Lakshmi CBO, Ananthaparamu (2006), supports sex workers living with HIV by enhancing treatment adherence, reducing stigma and discrimination, providing referrals and welfare services, and facilitating skill-building.

Alor Disha

Alor Disha, Kolkata (2012) mobilises communities, forming task forces with stakeholders to promote waste management, composting and safe menstrual hygiene management.

Daksha Samuha

Daksha Samuha, Bengaluru (2013) proactively engages with issues related to nutrition, gender-based violence, water, sanitation, and civic amenities to improve quality of life for slum communities.

Atma Nirbhar Sashakt Jeewan Sansthan

Atma Nirbhar Sashakt Jeewan Sansthan, Jaipur (2022) facilitates assistive aids, conducts sensitization programs to reduce stigma, and empowers persons with disabilities to form collectives for skill development and entrepreneurship.

Transgender Rights Association

Transgender Rights Association, Chennai (2007) promotes the mainstream inclusion of transpersons in sex work through alternative skilling, legal aid, and welfare services.

SAKHA Trust

SAKHA Trust, Bhubaneswar (2009) advocates for a dignified, stigma-free, and empowered life for LGBTQ members by enhancing their access to WASH, HIV prevention, treatment, and providing skills for economic empowerment.

Third Gender Welfare Trust

Third Gender Welfare Trust, Bhubaneswar (2018) empowers transgender through promotion of sanitation-linked livelihoods, addressing gender-based violence, education, and improving access to welfare entitlements.

Positive Women Network

Positive Women Network (1998) supports women and children living with HIV through peer counselling, treatment adherence and referral services across 13 states and 50 districts of India.



Awards and Achievements

April 2022-March 2023

CFAR recognized with appreciation letters, and awards across thematic areas by National and City stakeholders

Uttar Pradesh and Bihar:

- 38 awards for communication and media support to the Department of Health and Family Welfare.

Rajasthan :Six (6) awards :

- Best NGO Partner recognition from the Municipal Corporation for strengthening Inclusive Water, Sanitation, and Hygiene (WASH) in urban slums contributing to improved sanitation rankings 2022.
- Exemplary work in the welfare of persons with disabilities by the Department of Social Justice and Empowerment

Pune

- District Legal Services Authority recognized CFAR's Help-desk members as the Best Para Legal Volunteers.

Delhi

- Appreciation for mainstreaming efforts in Climate Change Adaptation and Disaster Risk Reduction (CCA-DRR) into city plans



TO READ MORE: <https://app.box.com/s/dz6eb5qmx9ge7exww7zt48rtkkyga1lc>



- CFAR made 19 new short films on accessible and socially inclusive WASH
- Disseminated widely among partners and social media platforms



TO VIEW : <https://www.youtube.com/channel/UCLwxrP9Uc9GySCTwLHfqf0Q>



Publications

Developed 25 new resources which include:

- Assessments on micro-planning for climate-resilient WASH
- Training curriculum modules and IEC materials on: gender and WASH ;menstrual health and hygiene management; male engagement, financial inclusion; welfare schemes; safe sanitation and preventive health
- Monographs on community engagement and ward-level governance.



TO READ MORE: www.cfar.org



Board Members



AKHILA SIVADAS

Akhila Sivadas is a founder member of the Centre for Advocacy and Research. She brings with her over four decades of experience as a development professional, researcher, communication, and advocacy expert. Since 2006, she has been engaged in strengthening community participation and involvement to address numerous quality of life issues such as health, education, food security, and climate-resilient WASH for the urban poor residing in informal urban slums. Ms Sivadas has played a key role in creating effective pathways for social inclusion, including establishing strong community platforms in informal settlements and building their capacity in the governance of services across cities. In her capacity as an advocacy and communication expert, she has purposefully contributed to policy guidelines and strategy documents on gender, health, governance, and inclusive development.

Anuradha Mukherjee, a founding member of CFAR, and Program Manager from 1998 to 2006, contributing to projects spanning child rights, women's issues, and media education. During her years with CFAR, she facilitated training workshops, developed media education modules, motivated communities, and coordinated community-based interventions like UNICEF's initiative with children. Her diverse experience in advocating for care for HIV-positive children with Naz Foundation, the inspection of child care institution facilities with the Delhi Commission for Protection of Child Rights in four districts of Delhi, and editing feminist publications with Women Unlimited has contributed to the discourse on child and women's rights. She has led research assignments for HAQ-Centre for Child Rights. Currently she works as a freelance consultant with NGOs.



ANURADHA MUKHERJEE



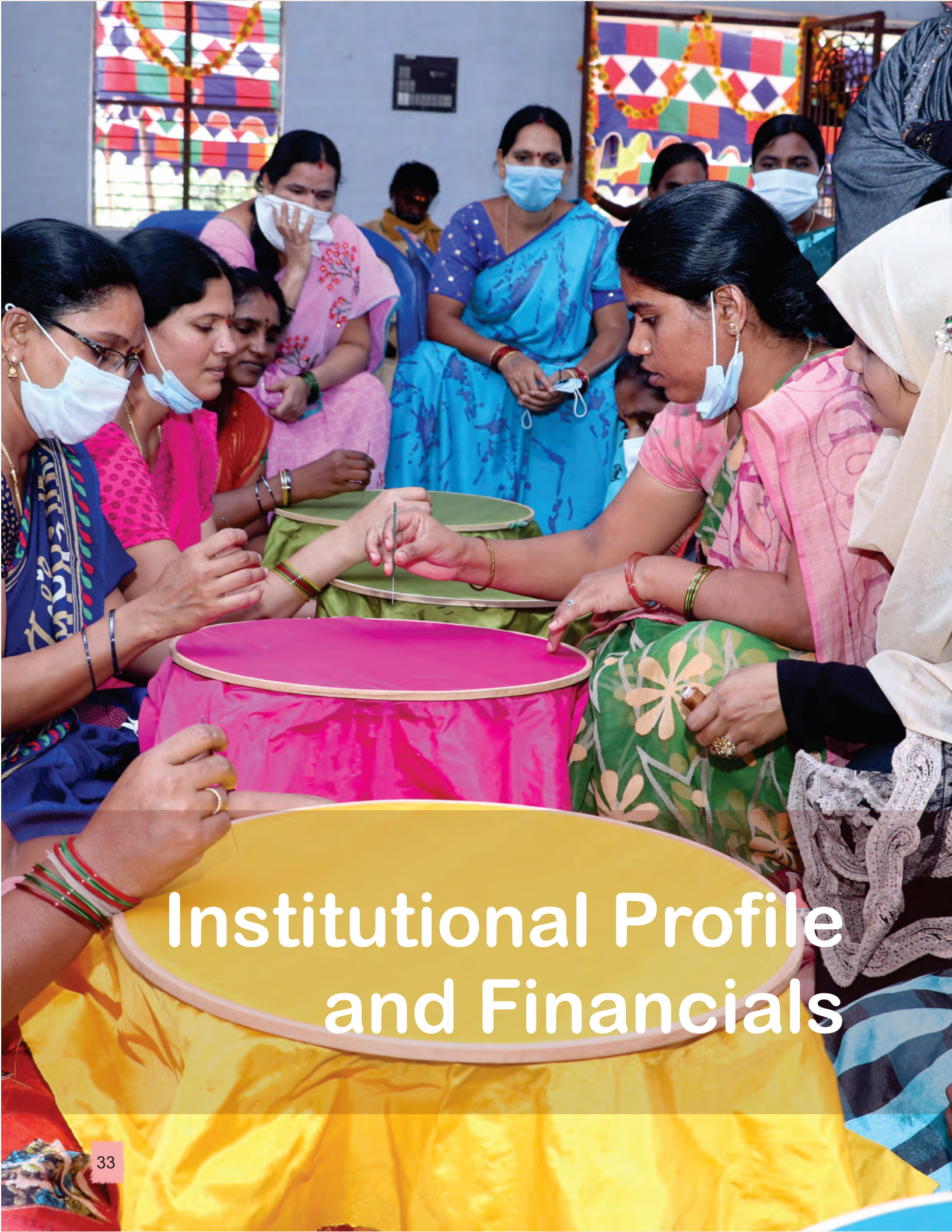
MATHEW CHERIAN

Mathew Cherian holds an engineering degree from Birla Institute of Technology and Science Pilani, and a postgraduate degree in rural management from IRMA, Gujarat. Additionally, he is a fellow from the Advocacy Institute, Washington DC. Mr. Cherian has a remarkable record of founding several organizations, including Charities Aid Foundation in India, Credibility Alliance and Resource Alliance. He serves as a Member of the NGO Task Force of Planning Commission and Core Committee of the Niti Aayog, National Human Rights Commission, Chair of the Empowered Experts Committee, and former chair of the Royal Commonwealth Society of the Blind now Sightsavers India. Member of the Grant in Aid Committee of the Ministry of Social Justice and Empowerment. Is an Author of Books like a Million Missions, Managing a Million Missions on the non-profit sector. Serves as Amicus Curae to the Supreme Court in the matter of elderly rights.

Amita Puri has worked in both the for-profit and not-for profit sector. In 2014-15, she served as the Executive Director of Fundraising, Marketing, and Communications at CARE India. Subsequently, she joined Standard Chartered Bank, leading retail and corporate banking functions. Ms. Puri moved on to CRY, as the Head of Global Operations and later as General Manager led the Resource Mobilization portfolio. She held the position of CEO at Charities Aid Foundation from April 2009 to April 2012 and at the All India Artisans and Craft Workers Welfare Association (AIACA) from 2012 to 2014. Additionally, she is an advisory group member of the Asian Venture Philanthropy Network and has contributed as a resource person for the South Asian Fund Raising Group and Resource Alliance. Currently, she provides advisory services to various non-profits, focusing on organizational strategy, governance, and fundraising.



AMITA PURI



Institutional Profile and Financials

Institutional Profile: Centre for Advocacy and Research

The Centre for Advocacy and Research (CFAR), headquartered in Delhi is a non-government, non-political, non-religious and non-profit organization registered in January 1998 as a Charitable Public Trust. The CFAR Trust is committed to advancing the rights of marginal communities such as; sex workers, urban poor, girl child, unorganized workers, transgender persons and sexual minorities, single women, People Living with HIV, people who inject drugs (PWID) and people living with disabilities.

Being a registered Public Charitable Trust, The CFAR Trust is duly adhering to all required statutory compliance. The CFAR Trust has at its helm by its governing body and Managing Trustee, Ms. Akhila Sivadas, who is duly authorized to lead the centre.

1. General Information of the Organization:

Name of Organisation : CENTRE FOR ADVOCACY AND RESEARCH
Date of establishment of CFAR : 29th January, 1998
Registered Office Add : E-1, Press Enclave, Saket, New Delhi-110017,
Function Head Office Add : H-16A, 2nd & 03rd Floor, Kalkaji, New Delhi-110019, India
Telephone Numbers : +91-011-26418846, 26410133, 41864172 & 41600905
E-mail Address : cfarheadoffice@cfar.org.in

2. Name and Designation of the Authorized Person/Chief Function

• Name : Ms. Akhila Sivadas
• Designation : Managing Trustee/Executive Director/Chief Functionary
• Contact No. : Mobile No. (9810415066)

3. Registration details of Organization

• Registered as : Public Charitable Trust
• Registration No. : 661
• Place of Registration : Delhi
• Date of Registration : 29/01/1998
• Area of operation : National Level NGO (All over India)
• Registration Valid : (forever)- Permanent

4. Registration of Organization with Income Tax Department

• Registration of CFAR Trust with Income Tax Department U/S 12A of the Income Tax Act 1961
• Registration No. u/s 12A : C-520
• Place of Registration : Delhi
• Date of Registration : 17/09/1998
• PAN No. : AAATC-0743-J
• TAN No. : DELC-04334-B
• 80G Order No u/s 80G : No-DIT(E)/2009-2010/C-520/1860 dated 29/09/2009
and valid from A.Y. 2010-11 to A.Y.2012-13

Note

- Donor can claim exemption on income tax under section 80G subject to a limit prescribed under the Income Tax Act 1961.
- Any approval under Section 80G(5) on or after 1.10.2009 would be a one times approval which would be valid till it is withdrawn as per the Circular No. 7/2010 [F.No.197/21/2010-ITA-I], Dated 27-10-2010.

5. Registration of organisation with MoHA-(Ministry of Home Affair of India) FCRA Division

Registration of CFAR Trust under the Foreign Contribution (Regulation) Act, 1976 and latest amended Act 2010.

- Registration No.: 231660104
- Date of Registration: 10/01/2001
- Date of Renewal: 02/12/2021.
- Validity of FCRA Reg. No. : 31/12/2026.

6. MAIN FCRA Bank Account Name, Address and Account Number.

- Name of Bank: **STATE BANK OF INDIA**
- Address of Bank : New Delhi Main Branch, NDMB Main Branch 11, Parliament Street, New Delhi.- 110001.
- Branch Code : 691
- IFSC Code : SBIN0000691.
- MICR No. : 110002087.
- Account No : 399XXXX9568 (Saving Account)

7. Utilization Bank Account (Sub –FCRA Utilization Bank) Name, Address and Account Number:

- Name of Bank: **STANDARD CHARTERED BANK.**
- Address of Bank : 1st Floor, Express Building, 9-10 Bahadurshah Zafar Marg, New Delhi-110002.
- IFSC Code : SCBL0036086.
- MICR No. : 110036020.
- Account No : 520XXXX7084 (Saving Account)

8. Online Payment Bank Account (Sub-FCRA Utilization Bank) Name, Address and Account Number:

- Name of Bank : **HDFC BANK**
- Address of Bank : M Block, Shop No. M-29, Greater Kailash-II, New Delhi-110048.
- Account No. : 501XXXXXXXX5822, (Saving Account)
- IFSC Code : HDFCXXXX557.
- MICR No. : 11024008

9. DFAT Project (Sub FCRA Utilization Bank) Name, Address and Account Number:

- Name of Bank : **HDFC BANK**
- Address of Bank : M Block, Shop No. M-29, Greater Kailash-II, New Delhi-110048.
- Account No. : 501XXXXXXXX8631, (Saving Account)
- IFSC Code : HDFCXXXX557.
- MICR No. : 110240087.

10. Project (Sub FCRA Utilization Bank) Name, Address and Account Number:

- Name of Bank : **HDFC BANK**
- Address of Bank : M Block, Shop No. M-29, Greater Kailash-II, New Delhi-110048.
- Account No. : 501XXXXXXXX8390, (Saving Account)
- IFSC Code : HDFCXXXX557.
- MICR No. : 110240087.

11. NON-FCRA (Local Currency) Bank Name, Address and Account Number:

- Name of Bank : **UNION BANK OF INDIA (CORPORATION BANK)**
- Account No : 5203XXXXXXXX8514, (Saving Account)
- Account No : 5201XXXXXXXX7151, (Saving Account)
- Account No : 5201XXXXXXXX7168, (Saving Account)

- Account No : 5201XXXXXXX3537, (Saving Account)
- Add. Of Bank : M-4, Greater Kailash, Part-II, New Delhi-110048.
- IFSC Code : UBINXXXX861.
- MICR No. : 110026324.

12. APPI Project (Local Currency) Name, Address and Account Number:

- Name of Bank : **HDFC BAN**
- Address of Bank : M Block, Shop No. M-29, Greater Kailash-II, New Delhi-110048.
- Account No. : 501XXXXXXX1440, (Saving Account)
- IFSC Code : HDFCXXXX557.
- MICR No. : 110240087

13. Online Payment Bank Account (Local Currency) Name, Address and Account Number:

- Name of Bank : **HDFC BANK**
- Address of Bank : M Block, Shop No. M-29, Greater Kailash-II, New Delhi-110048.
- Account No. : 501XXXXXXX3082, (Saving Account)
- IFSC Code : HDFCXXXX557.
- MICR No. : 110240087.

14. Online Donation Account (Local Currency) Name, Address and Account Number:

- Name of Bank : **HDFC BANK**
- Address of Bank : M Block, Shop No. M-29, Greater Kailash-II, New Delhi-110048.
- Account No. : 501XXXXXXX2132, (Saving Account)
- IFSC Code : HDFCXXXX557.
- MICR No. : 110240087.

15. Geographical Coverage/Area of Operation:

The CFAR has presence in the 8 states of India: Bihar, Delhi, Karnataka, Maharashtra, Odisha, Rajasthan, Uttar Pradesh and West-Bengal

16. Annual Remuneration Paid to Board Members/Key Person during FY 2022-2023.

- Paid to Ms. Akhila Sivadas, Managing Trustee, who is serving full time for CFAR Trust as a capacity of Executive Director and reporting to the Board Members of CFAR Trust.
- The Managing Trustee/Executive of CFAR Trust plays proactive role on behalf of Board by directing the programme and scaling operation, spearheading strategic planning, designing and implementing policies, ensuring proper compliance of applicable regulations and statutes, monitoring financial systems and oversight management
- CFAR Trust has been paid total amount of **Rs. 30,00,000.00 (Rupees Thirty lakhs only)** to Ms. Akhila Sivadas during the FY 2022-2023 as salary @ Rs. 2,50,000/-per month towards compensation for rendering her full-time services as a capacity of Executive Director in the CFAR Trust.

Note

- *No, remuneration, sitting fees was paid to any other Board Members except Ms. Akhila Sivadas, Executive Director, during the FY 2022-2023.*

17. Monthly Remuneration Paid to Executive Directors/Chief Functionary during FY 2022-2023.

The gross monthly remuneration paid to Executive Director/Chief Functionary was Rs.2,50,000/-per month starting from 1st April 2022 to 31st March 2023 period.

18. Range of Remuneration paid to staffs during FY 2022-2023.

Highest range..... Rs. 2,50,000/-

Lowest range..... Rs. 17,600/-

Note

- *Excluding contractual consultants and part-time/freelance associates.*

19. Total Cost Incurred on Travel during FY 2022-2023.

The CFAR Trust incurred approx.Rs.2.68 Crore on account of travel (*including air fare, ground travel, stay and food cost*) during the year 2022-2023 towards implementation of various projects activities undertaken by CFAR Project Team.

20. Total Cost Incurred on International Travel during FY 2022-2023:

The CFAR Trust incurred approx.Rs.14.94 Lakhs on account of International travel (*including air travel, ground travel, stay and food, visa, Insurance cost etc.*) during the year 2022-2023 towards attending workshop at Melbourne & Brisbane (Australia) under DFAT- GHD- Water for Women Fund, provides collaborative support to our partners in delivering project activities.

21. Institutional Membership of CFAR Trust:

- a) CFAR Trust is an accredited member of **CREDIBILITY ALLIANCE** vide Membership Number **CA/08/2021**. This accreditation is awarded to CFAR Trust for adherence to the minimum norms of Governance & Accountability, Transparency, Organizational Capacity and Program Implementation & Effectiveness.
- b) CFAR Trust was also accredited by **Samajik Suvidha Sangam, Mission Convergence**, NCT of Delhi Government, for adherence to better Governance & Accountability, Transparency, Organizational Capacity and Program Implementation & Effectiveness.
- c) CFAR Trust is further accredited by **GuideStar India**, for adherence to better Governance & Accountability, Transparency, Organizational Capacity and Program Implementation & Effectiveness. GuideStar India has awarded Platinum Certificate (Champion level vide **GSN No-596**) to CFAR Trust recognising it for better transparency and adhering to full compliance of required statute.
- d) This apart, CFAR has also internationally equivalency determination certificate awarded by **NGO source-Tech Soup an International repository of USA**. This certificate states that CFARs standards are equivalent to those of U.S. Public Charitable Organisations Registration **ID-948**.
- e) CFAR Trust is also registered with **Niti Ayog (Planning Commission)** under portal of **DAARPAN** created of Niti Ayog vide registration No- **DL/2016/0095652**.
- f) CFAR Trust is also registered with **Ministry of Corporate Affairs-(MCA)** vide registration No. **CSR00001168**.
- g) Apart this we are registered with following credible organisation and statutory bodies Like:-
 - **FICCI-SEDF-FICCI Socio Economic Development Foundation**
 - **India Sanitation Coalition-(ISC)**
 - **BSE-Samman**
 - **DASRA**
 - **NALSA-National Legal Service Authority**
 - **National Alliance of Fecal Sludge and Septage Management (NFSSM Alliance)**
 - **Benevity Causes Portal**

22. CFAR's own visibility and networks :

- Organisation's Website ID : www.cfar.org.in
- Organisation's e-mail ID : cfarheadoffice@cfar.org.in
- Facebook ID : <https://www.facebook.com/cfar123>
- Twitter ID : <https://twitter.com/CFARngo>
- LinkedIn ID : <https://www.linkedin.com/in/cfar-ngo-4134bab4/>
- Instagram id- <https://www.instagram.com/cfarngo/>

Details of Board Meetings held during the FY: 2022-2023.

FY 2022-2023				
Sr. No	Date	Venue	Total Board Members	Board Members Present
				4
1	09/08/2022	CFAR H-16A, Second Floor, Kalkaji, New Delhi-110019	4	Ms. AkhilaSivadas Ms. Anuradha Mukherjee Ms. Amita Puri Mr Mathew Cherian (On Zoom)
				4
2	30/09/2022	CFAR H-16A, Second Floor, Kalkaji, New Delhi-110019	4	Ms. AkhilaSivadas Ms. Anuradha Mukherjee Ms. Amita Puri Mr Mathew Cherian (On Zoom)
				4
3	28/02/2023.	CFAR H-16A, Second Floor, Kalkaji, New Delhi-110019 (Zoom)	4	Ms. AkhilaSivadas
				Ms. Anuradha Mukherjee (On Zoom)
				Ms. Amita Puri
				Mr Mathew Cherian
				4
4	27/03/2023.	CFAR H-16A, First Floor, Kalkaji, New Delhi-110019	4	Ms. AkhilaSivadas Ms. Anuradha Mukherjee Ms. Amita Puri Mr Mathew Cherian

A. Consolidated (FCRA & Non-FCRA) Financial Statement of CFAR Trust for the FY 2022-2023

FORM NO. 10B

[See rule 17B]

Audit report under section 12A (b) of the Income-tax Act, 1961, in the case of charitable or religious trusts or institutions

I have examined the balance sheet of **Centre for Advocacy & Research (CFAR) :: New Delhi PAN NO.-AAATC0743J** [name of the trust or institution] as at **31st March 2023** and the Profit and loss account for the year ended on that date which are in agreement with the books of account maintained by the said Trust or institution. I have obtained all the information and explanations, which to the best of my knowledge and belief were necessary for the purposes of the audit. In my opinion, proper books of account have been kept by the head office and the branches of the above named trust/institution visited by me so far as appears from my examination of the books, and proper Returns adequate for the purposes of audit have been received from branches not visited by me, subject to the comments given below:

In my opinion and to the best of my information, and according to information given to me, the said accounts give a true and fair view-

- (i) in the case of the balance sheet, of the state of affairs of the above named *trust/institution as at **31st March 2023** and
- (ii) in the case of the profit and loss account, of the profit or loss of its accounting year ending on **31st March 2023**

The prescribed particulars are annexed hereto.

Place : New Delhi

Date : 22.09.2023

R.K.SHARDA & ASSOCIATES

Chartered Accountants

FRN No.-006226N

R.K.Sharda



R.K.SHARDA

M.No.-084847

CENTRE FOR ADVOCACY AND RESEARCH

E-1, Press Enclave, Saket, New Delhi-110017

BALANCE SHEET

AS AT 31ST MARCH 2023

PARTICULARS	SCHEDULE	Amount 2022-23 (Rs.)	Amount 2021-22 (Rs.)
LIABILITIES			
FIXED ASSETS FUND	A	7,532,386.00	7,577,520.00
CORPUS FUND	B	6,201,100.00	6,201,100.00
RESERVE FUND	C	3,340,353.10	2,788,813.10
GENERAL FUND	D	3,222,335.77	3,983,725.75
PROJECTS FUND	E	66,474,174.11	120,570,997.06
CURRENT LIABILITIES	F	97,466.00	22,342,792.97
	TOTAL	86,867,814.98	163,464,948.88
ASSETS			
FIXED ASSETS	G	7,532,386.00	7,577,520.00
INVESTMENTS	H	6,206,570.00	4,976,656.00
CURRENT ASSETS	I	73,128,858.98	150,910,772.88
	TOTAL	86,867,814.98	163,464,948.88
Accounting Policies & Notes	J	-	-

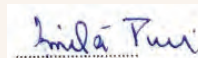
As per our audit report even dated attached

For **R.K.Sharda & Associates**
Chartered Accountants
Firm Reg. No. 006226N


Proprietor

M.No.084847

UDIN No-22084847XKVR1326



(Treasurer/Trustee)



(Managing Trustee)

Place: New Delhi
Date : 22/09/2023



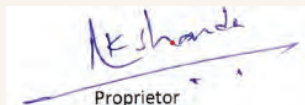
CENTRE FOR ADVOCACY AND RESEARCH

INCOME & EXPENDITURE ACCOUNT YEAR ENDED 31ST MARCH 2023

PARTICULARS	SCHEDULE	Amount 2022-23 (Rs.)	Amount 2021-22 (Rs.)
<u>INCOME</u>			
Project Income-(Grants/CSR/Covid etc)	K	174,715,447.00	284,040,603.25
Donation Received		6,927,000.00	143,452,605.84
CFAR Project Contribution-(Service Charges)		3,333,487.00	5,883,659.00
Sale of Scrap/Equipment		57,100.00	2,026.00
Bank Interest Earned-(FDR/Saving)		3,764,168.36	4,580,282.04
Interest on IT Refund		-	-
	TOTAL	188,797,202.36	437,959,176.13
<u>EXPENDITURE</u>			
Core Project Expenditures	K	204,622,590.70	312,020,255.12
Project Manangement/Administrative Expendiutres		38,481,284.59	32,244,744.87
	TOTAL EXPENDITURE	243,103,875.29	344,264,999.99
<i>Balances Carried over to Project Balance Fund</i>		<i>(54,420,315.95)</i>	<i>92,424,817.16</i>
<i>Surplus/ Deficit transferred to General Fund</i>		<i>(437,896.98)</i>	<i>641,151.98</i>
<i>Surplus /Deficit transferred to Reserve Fund</i>		<i>551,540.00</i>	<i>628,207.00</i>
<i>Project Deficit transferred to Reserve Fund</i>		<i>-</i>	<i>-</i>
	TOTAL	188,797,202.36	437,959,176.13

As per our audit report even dated attached

For **R.K.Sharda & Associates**
Chartered Accountants
Firm Reg. No. 006226N

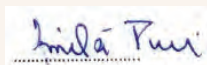

Proprietor
M.No.084847

UDIN No-22084847XKVR1326

Place: New Delhi
Date : 22/09/2023



(Treasurer/Trustee)





(Managing Trustee)



CENTRE FOR ADVOCACY AND RESEARCH

RECEIPTS & PAYMENTS ACCOUNT YEAR ENDED 31ST MARCH 2023

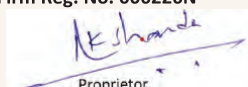
Annexure	Amount 2022-23 (Rs.)	Amount 2021-22 (Rs.)
RECEIPTS		
Opening Balances		
Cash-in-hand	29,143.00	38,848.00
Bank Balance	8,700,162.81	12,529,473.60
Short-Term Deposits-FDR/Bank Guarantee	125,900,000.00	21,400,000.00
Investments	4,976,656.00	4,756,996.00
Amount Recoverable/Adjustables etc	(6,061,325.90)	1,125,142.17
Receipts for the year		
Project Income-(Grants/CSR/Covid etc)	174,715,447.00	284,040,603.25
Donation Received	6,927,000.00	143,452,605.84
CFAR Project Contribution-(Service Charges)	3,333,487.00	5,883,659.00
Sale of Scrap/Equipment	57,100.00	2,026.00
Bank Interest Earned-(FDR/Saving)	3,764,168.36	4,580,282.04
Interest on IT Refund	-	-
TOTAL (A)	322,341,838.27	477,809,635.90
PAYMENTS		
Core Project Expenditures	204,622,590.70	312,020,255.12
Project Manangement/Administrative Expendiutres	38,481,284.59	32,244,744.87
Closing Balances		
Cash-in-hand	19,748.00	29,143.00
Bank Balance	28,508,532.84	8,700,162.81
Short-Term Deposits-FDR/Bank Guarantee	42,000,000.00	125,900,000.00
Investments	5,206,570.00	4,976,656.00
Amount Recoverable/Adjustables etc	3,503,112.14	(6,061,325.90)
TOTAL (B)	322,341,838.27	477,809,635.90

As per our audit report even date attached

For **R.K.Sharda & Associates**

Chartered Accountants

Firm Reg. No. 006226N


Proprietor

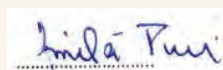
M.No.084847

UDIN No-22084847XKVVRE1326

Place: New Delhi

Date : 22/09/2023





(Treasurer/Trustee)



(Managing Trustee)



B. Financial Statement of FY 2022-2023 as per FCRA Act 2010.

SCHEDULE - (K) PROJECTS RECEIPTS & UTILIZATION DURING FY 2022-23

CENTRE FOR ADVOCACY AND RESEARCH: NEW DELHI																
CFAR (FCRA + NON FCRA) FUNDS 2022-23																
DETAILS OF FUNDS RECEIVED AND UTILIZED DURING FY 2022-23																
Sr. No.	Short Abbreviation of Project	Sources of Funds	Opening Balance as on 01.04.2022	Receipt during the year 2022-23					Total Funds	Utilisation During the Year 2022-23				Total Utilization	Closing Balance as on 31.03.2023	
				Project Grants/CSR/Covid etc	Donation	Project Cont./Service Charges	Sale of Scrap/Equipme nt	Interest Earned		Contras	Project Grants/CSR/Covid etc	Admin/Project Management Cost	Project Support/Donat on Payments etc			Contras
FCRA PROJECTS																
1	MSDF-1 (Social Inclusion + Covid Vacc/Rel)	FCRA	7,096,860.00	-	-	-	-	51,859.00	-	7,148,719.00	5,613,703.92	1,334,979.38	-	-	6,948,683.30	200,035.70
2	MSDF-2 (Social Inclusion)	FCRA	10,968,236.30	15,095,000.00	-	-	-	401,554.00	-	26,468,790.30	11,595,418.31	1,485,377.48	-	-	13,077,795.79	13,390,994.51
3	DFAT (WNV171)/DFAT (WNV-1861)	FCRA	21,867,360.14	56,341,244.00	-	-	-	442,843.00	-	78,055,447.14	45,322,635.55	9,090,958.78	-	-	54,413,594.33	24,241,852.81
4	BMGF-Covid 2 - (UP-BHR-CG) INV 03462	FCRA	12,010,982.34	-	-	-	-	90,805.00	-	12,011,787.34	10,805,533.41	1,296,233.93	-	-	12,101,787.34	-
5	BMGF-UP 3 (RMNCH New) INV 030771	FCRA	3,269,600.79	32,932,418.00	-	-	-	130,959.00	-	36,332,977.79	38,305,577.36	8,481,714.11	-	-	46,787,471.47	(10,454,493.68)
6	BMGF-BHAR 2 (RMNCH) INV 034898	FCRA	5,273,369.86	-	-	-	-	9,493.00	-	5,282,862.86	3,909,164.82	1,373,698.04	-	-	5,282,862.86	-
7	BMGF-LEVA1 INV 024829	FCRA	25,386,706.14	43,826,160.00	-	-	-	850,651.00	-	70,085,517.14	36,907,411.68	5,033,198.18	-	-	41,940,609.86	28,132,907.28
8	IDRF/PTF (GBV Ained) Project Phase-1	FCRA	(133,693.15)	-	-	-	-	-	-	1,571,784.00	906,159.00	24,847.00	-	-	931,066.00	-
9	IDRF/PTF (GBV Ained) Project -II	FCRA	-	150,000.00	-	-	-	11,134.00	-	3,694,038.00	3,404,608.00	289,430.00	-	-	3,694,038.00	-
10	DASRA Project	FCRA	-	-	-	-	-	16,069.00	-	-	-	-	-	-	-	-
11	Charity/Donation A/c	FCRA	19,986.12	-	-	-	-	-	-	241,431,680.36	156,767,392.05	28,502,773.57	-	-	185,270,119.62	56,161,560.74
NON-FCRA PROJECTS																
1	APPHI Covid Grants & BHR/Health Initia	NON-FCRA	6,743,871.36	-	6,891,000.00	-	-	38,107.00	-	13,671,871.36	11,863,289.62	1,235,452.10	-	-	13,098,741.72	574,236.64
2	SCLL-CST Project	NON-FCRA	(2,710,863.40)	-	-	-	-	6,521.00	-	(2,704,342.40)	1,798,000.00	5,552.00	-	-	3,352.00	(2,709,694.40)
3	APT Pavekh Foundation Project	NON-FCRA	2,147,806.00	-	-	-	-	5,304.00	-	2,153,110.00	1,798,000.00	354,110.00	-	-	2,153,110.00	-
4	APPHI-Dehi15 Districts	NON-FCRA	-	-	-	-	-	58,167.00	-	13,011,009.00	446,874.72	582,117.00	-	-	1,028,991.72	12,040,175.28
5	APPHI-11 (3 Cities SJ Grant)	NON-FCRA	25,766,850.00	-	-	-	-	678,286.00	-	23,430,536.00	18,681,694.40	3,417,892.49	-	-	22,099,586.89	1,330,940.11
6	APPHI -BUPSP Project	NON-FCRA	672,069.00	-	-	-	-	42,115.00	-	12,002,784.00	13,090,458.00	1,367,343.00	-	-	14,457,017.00	(2,455,017.00)
7	BMAC-BBSR-Safai Mitra Project	NON-FCRA	(92,917.98)	46,140.00	-	-	-	-	-	(46,777.98)	-	45,540.00	-	-	45,540.00	(92,317.98)
8	E&Y Cuttack Project Assignment	NON-FCRA	331,374.00	1,000,000.00	-	-	-	-	-	1,331,374.00	273,306.00	3,616.00	-	-	276,922.00	1,054,452.00
9	Data Flow Services India Pvt Ltd - CSR Grant	NON-FCRA	-	427,000.00	-	-	-	-	-	427,000.00	20,167.00	-	-	-	20,167.00	406,833.00
10	SEEPD-BBSR-Sweekrut Project	NON-FCRA	2,320,399.00	-	-	-	-	-	-	628,834.00	484,705.00	-	-	-	484,705.00	144,129.00
11	Matila Panchayat-DCW Govt. Project	NON-FCRA	(923,493.00)	-	-	-	-	-	-	323,493.00	-	-	-	-	-	-
12	Charity/Donation A/c	NON-FCRA	92,460.72	-	36,000.00	-	-	-	-	128,460.72	109,593.00	-	-	-	109,593.00	-
TOTAL (A)				34,947,555.70	6,927,000.00	-	-	828,500.00	323,493.00	64,093,123.70	46,786,687.74	7,011,822.59	-	-	53,780,510.33	10,312,613.37
GENERAL ACCOUNTS OF CFAR TRUST																
X	CFAR NRC-GENERAL A/c	FCRA	-	-	-	662,000.00	53,500.00	57,264.36	567,310.73	1,855,455.09	1,024,212.91	83,124.18	-	-	1,855,455.09	-
Y	CFAR NRC-GENERAL A/c	NON-FCRA	-	-	640,515.00	3,600.00	3,600.00	353,657.00	-	997,772.00	62,298.00	806,060.25	-	129,413.75	997,772.00	-
TOTAL (C)				-	-	1,302,515.00	57,100.00	926,301.36	567,310.73	2,853,227.09	1,086,510.91	1,637,302.43	-	129,413.75	2,853,227.09	-
TOTAL (A+B+C)				174,715,447.00	6,927,000.00	1,452,515.00	57,100.00	3,764,168.36	890,803.73	308,378,031.15	204,622,590.70	37,151,852.59	-	129,413.75	241,903,857.04	66,474,174.11
CFAR OWN FUNDS																
A	Corpus Fund	FCRA	1,000,000.00	-	-	-	-	-	-	1,000,000.00	-	-	-	-	-	1,000,000.00
B	General Fund	FCRA	1,728,038.35	-	-	-	-	-	-	1,728,038.35	-	-	-	567,310.73	567,310.73	1,160,727.62
C	Reserve Fund	FCRA	1,917,402.50	-	-	1,309,423.00	-	-	-	3,226,825.50	-	-	-	865,748.00	2,361,077.50	-
A	Corpus Fund	NON-FCRA	5,201,100.00	-	-	-	-	-	-	5,201,100.00	-	-	-	-	-	5,201,100.00
B	General Fund	NON-FCRA	2,255,687.40	-	-	-	-	-	-	2,285,101.15	-	-	-	-	323,493.00	2,608,594.15
C	Reserve Fund	NON-FCRA	871,410.60	-	-	571,549.00	-	-	-	1,442,959.60	-	-	-	463,684.00	979,275.60	-
TOTAL (D)				12,973,638.85	-	1,880,972.00	-	-	129,413.75	14,984,024.60	-	-	-	1,020,217.48	244,124,092.77	79,337,962.98
TOTAL (A+B+C+D)				133,544,635.91	6,927,000.00	3,333,487.00	57,100.00	3,764,168.36	1,020,217.48	323,362,055.75	204,622,590.70	38,481,284.59	-	1,020,217.48	244,124,092.77	79,337,962.98

Project Income (FC+NFC)
Donation Received
CFAR Project Contribution Received
Sale of Scrap/Equipments
Bank/FDR Interest
Total Receipts/Income As per Income & Expenditure (A+B+C+D)

Care Project/Prog Exp (FC+NFC)
Admin/Mgmt Exp (FC+NFC)
Project Cont Support/Donation Exp (FC+NFC)

Total Exp As per Income & Expenditure

As per Incc & Exp A/c
DI

As per Incc & Exp A/c
DI



Prila-Turi

Ashish Sivasdas



CFAR Completes 25 Years





**Centre for
Advocacy and
Research**

H-16A, Second and Third Floor,
Kalkaji, New Delhi-110 019

Email Id: cfarheadoffice@cfar.org.in

Phone No.: +91 26418846, 26224301

Website: www.cfar.org.in

Fb: #CFARngo

Twitter: @CFARngo

Linkedin: <https://www.linkedin.com/in/cfar-ngo-4134bab4/>