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ANNUAL REPORT

2021-22

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## **Disclaimer**

The information contained in this annual report concerns the organization's performance and is based on management's views following information available at the time of issue.

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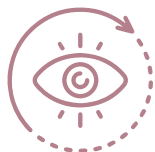
# M MESSAGE FROM THE CEO

The year 2020-21 will be remembered by all of us at KHPT for reasons both good and bad. The pandemic was a jolt to our way of life, and has, since then, changed how we function in very many ways. While offices shut and people confined themselves to their homes, KHPT resolved to continue extending support and services to the vulnerable populations that we work with. This was the time to stand with marginalized communities most affected during the pandemic. Their income sources dried up, their access to services was cut off, those already suffering diseases like TB and HIV were alienated from care and support, and thus began our work to enable this access for these communities. As a public health organisation, despite extremely challenging circumstances, we worked hard to strike a balance between the safety of our staff, especially those on the frontlines, and continue support and engagement, undisrupted, with communities that needed it more than ever before. Our teams on the ground worked tirelessly to continue project activities among priority

community groups and also to offer COVID-related services including humanitarian aid. It gives me immense satisfaction to be a part of a team that has consistently placed the needs of the community and our organisational vision at the helm of all our efforts. I salute the field teams across all of KHPT's geographies. This annual report and the achievements stated herein have only been made possible with a dedicated and inspirational team. We are grateful to our frontline workers, donors, partners, government functionaries and advisory board members who support our vision. In the true spirit of partnership, we continue to seek their inputs and goodwill as we move forward towards our vision of empowered communities asserting their rights to a life of dignity and respect.

**Mohan H L**  
Chief Executive Officer

# K



## Vision

Empower communities to lead a life of quality, health and well-being



## Mission

Empower communities to lead a life of quality, health and well-being



## Intended Impact

Strengthen health systems to achieve population-level impact



A

Adolescent

Health

The Adolescent Health theme works with adolescents (12-19 years old) in the North Karnataka region comprising seven districts including Belagavi, Vijayapura, Bagalkot, Kalaburagi, Raichur, Yadgir, and Koppal. We work to improve the overall quality of their lives by

working with their families, boys and community groups. The interventions focus on empowering adolescents by building knowledge and skills for improving their dietary patterns and nutritional status, menstrual hygiene practices, and sexual health, as well as addressing gender-based violence and improving their mental health.

## Thematic goal

Empower adolescents by building knowledge and skills to improve nutrition, safe and healthy practices, and equitable gender norms

### 1 Sahaj

#### Key projects implemented



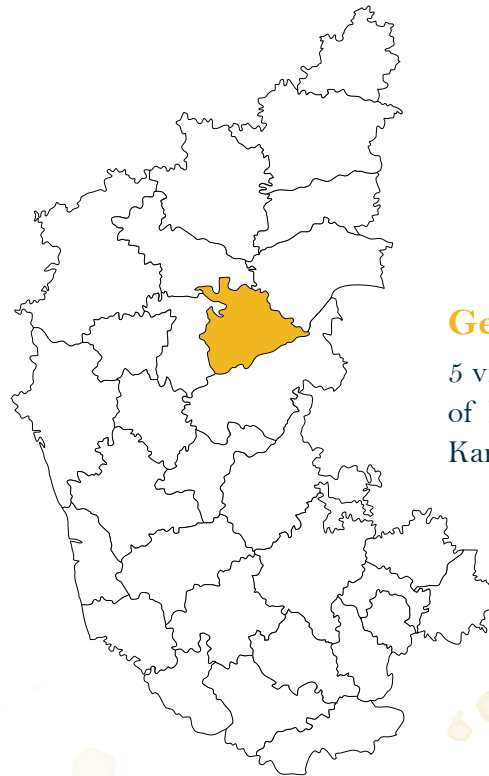
**Objective** To improve menstrual health among rural adolescent girls by adopting a role model concept



**Project Duration** October 2020 to July 2021



**Funder** Mangalore Chemicals and Fertilizers



#### Geography

5 villages of Koppal, Karnataka



## Key Project Highlights

- ◆ Installation of vending machines and incinerators
- ◆ Group sessions to increase awareness of menstrual hygiene and increase the use of sanitary napkins and encourage safe disposal methods

## 2 Developing and Implementing a Framework for Mapping and Assessing Adolescent Vulnerabilities in India



### Objective

To develop a vulnerability framework to identify adolescents with topmost needs and risk factors through the regional representation of selected states.



### Project Duration

December 2019 to  
May 2021



### Funder

World Health  
Organisation (WHO)



## Key Project Highlights

- ◆ Adolescent Vulnerability Mapping Framework and Multi-dimensional Vulnerability Index (MVI)
- ◆ Four (of seven) State-level consultation meetings were conducted to receive inputs for the Adolescent Vulnerability Framework and MVI.
- ◆ KHPT partners with Hindustan Latex Family Planning Promotion Trust (HLFPPT) (Rajasthan), Kripa Foundation (Nagaland), CARE (Bihar) and World Vision (Andhra Pradesh) to conduct virtual state-level consultation meetings to draw inputs from the vulnerability mapping study.

### 3 Addressing Gender-based Violence among adolescent girls and young women through Life Skills Education: Evidence Generation of the Longterm Impacts from Rural and Marginalized Communities in South India



#### Objective

- ◆ To measure the level of Gender-based Violence (GBV) among adolescent girls and young women between 18-29 years in rural Karnataka.
- ◆ To examine attitudes, experiences, and behaviour among adolescent girls and young women in rural Karnataka concerning GBVs.
- ◆ To explore the sustained effects of life-skill education in addressing GBV among the adolescent girls exposed to Samata intervention.
- ◆ To develop a community-based violence redressal plan for future interventions with adolescent girls and young women at the state and national levels.



#### Project

August 2020 to

#### Duration

July 2022 (2 years)



#### Funder

Wellspring Philanthropic Fund, USA



#### Key Project Highlights

- ◆ The community advisory board (CAB) constituted at the district level consists of the individual, Samata girls, departments, and organizations working on the issue of adolescent girls and women. And the consultation meeting on the GBV undertook with the CAB before implementing the research study.



#### Geography

Vijayapura,  
Karnataka



- ◆ The training on ‘Gender and the legal framework’ and the ‘Quantitative tool development’ workshop was conducted for the GBV team in association with the Alternative Law Forum (ALF) in Bangalore Office.
- ◆ An “Ethnography training for the Community Organizers (COs)” was conducted in Bijapur

to have a preliminary understanding of community perspectives on violence.

- ◆ The field data collection team was recruited and a week-long training was conducted on the ethical aspect of the GBV research and the quantitative data collection tool.

## 4 Reducing malnutrition among children, adolescent girls, and pregnant and lactating women in Koppal



### Objective

- ◆ Improving the consumption of nutritious food by the Primary Target Beneficiaries within family budgets through appropriate behavioural change communication (BCC)
- ◆ Improving linkages with existing nutrition-enhancing services implemented by another social sector program
- ◆ Improving the availability and accessibility of Fortified Blended Food (FBF) using local community structures
- Supplying FBF to the neediest target population



### Project Duration

2021- 2024



### Funder

HT Parekh Foundation



### Geography

Koppal,  
Karnataka



## Key Project Highlights

- ◆ Adolescent girls were identified in villages as the frontline worker for the distribution of Fortified Bended Food (FBF) and training of the beneficiaries.
- ◆ Established partnership with National Rural Livelihood Mission (NRLM) at the block level to jointly provide training and support to SHGs on social marketing of FBF as well as jointly establishing a support system for spirulina cultivation.
- ◆ All frontline workers at the village level were sensitized on project activities and village panchayat members were appraised about the project objectives.

## Thematic Updates

- ◆ KHPT launched a three-day virtual campaign from December 14- 16, 2021 on Freedom from Violence in collaboration with the Department of Rural Development and Panchayat Raj, the Department of Women and Child Welfare, and the Department of Education, Government of Karnataka. The aim of the campaign was to educate 20 lakh adolescents on Gender-based Violence and laws related to it, as well as to empower them in the fight against injustice that affects them.
- ◆ A dipstick study on the impact of COVID on adolescents and also the attitude, beliefs, and perceptions of the different stakeholders including parents, boys and the community on adolescent issues was conducted in October 2021. The quantitative study was completed through a survey in 40 villages through 20 research investigators in eight days covering 800 adolescents.
- ◆ Dr Maithreyi Ravikumar, Strategic Lead, Adolescent Health presented the intervention programmes by Adolescent Health (AH) thematic at a round table organised by the NITI Aayog in November. She presented on some of the AH projects, including the Samata, Sphoorthi and Sahaj. The presentation was a brief on AH project models and the kind of work that is done in the thematic area.
- ◆ Kavya, a 16-year-old Sphoorthi girl from Budhgumpa village, Koppal district, addressed people during the launch of 'Video on Wheels,' in Koppal. 'Video on Wheels,' is a statewide mobile van campaign to raise awareness and prevent child marriages. This initiative was launched by the Department of Women and Child Development, in collaboration with the Department of Rural Development and Panchayat Raj and the Department of Information and Broadcasting, Government of Karnataka.

- ◆ The Adolescent Health Thematic participated in a media round table on 16 March held in New Delhi. Ms Maithreyi Ravikumar, Strategic Lead, Adolescent Health Thematic, made a presentation on the Sphoorthi project that aims at empowering adolescent girls. She also detailed the vulnerability mapping exercise for adolescent girls across India. Two adolescent girls, Suma and Nikita from Koppal shared their journey of empowerment and how they became champions of change.
- ◆ KHPT hosted a virtual Voices from Ground Meet on the 15th of July 2021. The webinar was titled “Reimagining working with adolescents, and convened by PRIA and Dasra. The objective of this learning circle was to bring organizations together to have a deeper discussion on some of the issues and challenges faced by adolescents.
- ◆ Karnataka Health Promotion Trust, KHPT in collaboration with DASRA and Love Matters India organized an online youth consultation (South India- Karnataka) on 31 August 2021. The key objective of the Youth Consultation was to hear from young adults about their challenges and coping mechanism during COVID-19. It was also an opportunity to hear their recommendations and demands to the government during this difficult time. The online session saw participation from 4 organizations and representation from the districts of Kolar, Dakshina Kannada, Bangalore, Chitradurga and Kalburgi. 38 adolescents participated in this webinar (4 from Naz Foundation, 3 from 51AH, 6 from the Samvad Baduku organization) and around 25 girls participated from KHPT Koppal.
- ◆ The AH thematic submitted a proposal to the Ashraya Hasta Trust titled Girl Leads Girl: Adolescent Girl Role Model Project for Social Transformation (Sphoorthi). The project aims to implement a multi-layered, field-tested intervention model which aims to change gender norms by training rural adolescent girls to champion changes related to their education, health, and marriage using a role model approach. The project also proposes to train 3402 Role Model Girls (RMGs) and their parents in two blocks of Yadgir district through life skills education (LSE), to develop their self-esteem, agency and abilities for decision making.



T

Tuberculosis

We work in collaboration with the National Tuberculosis Elimination Programme (NTEP) to develop community based, person-centric models aimed at improving health seeking behaviour,

access to healthcare services, TB notification and treatment outcomes as well as stigma mitigation among vulnerable populations.

## Thematic goal

To achieve a rapid decline in burden of TB, morbidity and mortality while working towards elimination of TB by 2025

### 1 Breaking the Barriers

## Key projects



### Objective

Breaking the Barriers (BTB) is a four-year project, supported by the United States Agency for International Development (USAID), which aims to develop innovative and effective behaviour change operational models that improve coverage of specific populations vulnerable to TB, such as the urban poor, tribal communities, migrants, and mining and industrial workers, for increased case notification and successful TB treatment outcomes.



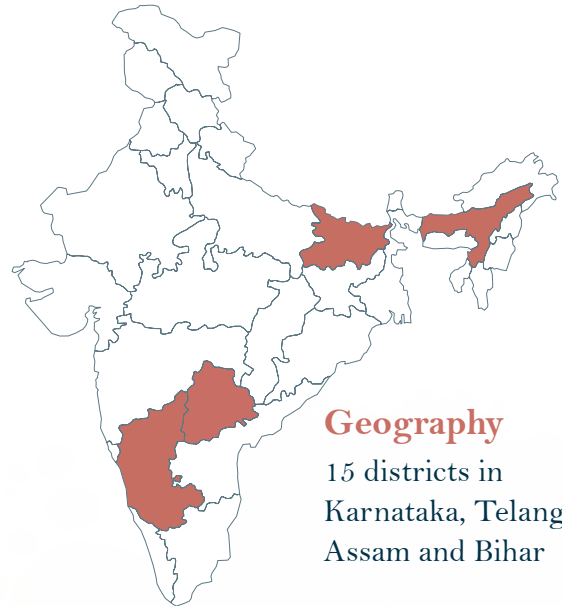
### Project Duration

2020-2024



### Funder

United States Agency for International Development (USAID)



### Geography

15 districts in Karnataka, Telangana, Assam and Bihar



## Key Project Highlights

- ◆ At a national level TB Mukt Bharat partners' meet on June 24, Dr Harsh Vardhan, former Minister for Health and Family Welfare, Government of India commended KHPT on its work with community structures. "To train **3395** leaders from the community is the correct approach...if we train even one community leader, we can reach many more with the messaging for behaviour change. I wish KHPT the very best," he said, after a presentation of partners' initiatives.
- ◆ The NTEP on May 27 launched the Community Engagement Toolkit developed by KHPT under the USAID-funded Tuberculosis Health Action Learning Initiative project with a foreword from Dr. Nishant Kumar, then Joint Director, (Public Health), NTEP.
- ◆ KHPT co-hosted a satellite session titled 'The Policymaker's Roundtable: Addressing gender and stigma barriers to TB care' with the Global Coalition Against TB (GCAT) on October 21 at the virtual UNION World Lung Health Conference. The co-chairs for the session were Dr Sudarshan Mandal, Deputy Director General, NTEP, and Dr Dalbir Singh, President, GCAT. The speakers included Mr Mohan HL, CEO, KHPT; Ms Sangita Patel, Director-Health Office, USAID India; Dr Rajeev Gowda, Ex-Parliamentarian and Former Chair, Centre for Public Policy, Indian Institute of Management, Bangalore; Dr Kirit P Solanki, Member of Parliament and Mr Bhubaneswar Kalita, Member of Parliament. The 90-minute session was attended by 130 participants from all over the world.
- ◆ Dr Prarthana, Strategic Lead-TB, KHPT was a speaker at a symposium held on October 21 at the World Lung Health Conference titled 'TB and mental health: integrating mental health into TB services for person-centred care'. She shared the efforts and experiences of the TB Careline in providing telephonic psychosocial support to patients on TB treatment in the private health sector. Dr Rajaram S, Deputy Director-Research, KHPT, presented a poster titled 'Exploring the effect of Patient support group (PSG) meetings on improving TB treatment outcomes in selected districts of South India'
- ◆ KHPT collaborated with The Pioneer, a leading national media house, to present a five-part series of impactful articles covering the critical work undertaken by KHPT in TB through the Breaking the Barriers project
- ◆ KHPT organized a media roundtable in New Delhi on March 16, to apprise representatives of leading publications on the interventions implemented by KHPT across the states under

three thematic areas - TB, Adolescent Health, and Maternal and Child Health - with a focus on community - based approaches and unique learnings for impact. A press release issued by KHPT was carried by over 80 publications, and articles on the event were carried by Indian Pharma Post and ET Health World by the Economic Times. Dr Rajendra Joshi, Deputy Director General, NTEP; Mr H L Mohan, CEO, KHPT; and Dr Dalbir Singh, Advisor to KHPT and President, Global Coalition Against TB, were key speakers.

- ◆ The BTB team in Assam conducted a two-day State-level Workshop on TB Elimination and Behaviour Change in Guwahati on December 21 and 22, in association with the State NTEP. The main objective of the workshop was to unpack the Central TB Division's

(CTD) Guidance Document on Community Engagement, orient the teams on KHPT's community engagement models, including Community Structures and Patient Support Groups, and discuss an Assam-specific plan.

- ◆ KHPT was invited to exhibit at the World TB Day event organized by the NTEP at Vigyan Bhawan, New Delhi, on March 24 and 25, to showcase behaviour change solutions developed to encourage health seeking behaviour among vulnerable populations, as well as IEC materials including posters, films, project briefs, and infographics. A five-minute documentary produced by KHPT in collaboration with the NTEP on the key milestones of the NTEP was launched by Ms. Anandiben Patel, Governor, Uttar Pradesh, and screened at the event.

## 2 Joint Effort for Elimination of Tuberculosis (JEET)



- Objective**
- ◆ Develop an insight into private sector by conducting mapping & prioritization of private sector healthcare providers
  - ◆ Facilitate access to NTEP-approved affordable TB diagnostics for patients seeking care in the private sector through public and private lab network for increased notifications and quality diagnosis
  - ◆ Facilitate access to early, appropriate and free treatment initiation, public health actions and adherence support systems for patients seeking care in the private sector.



## Project Duration

2018-2021



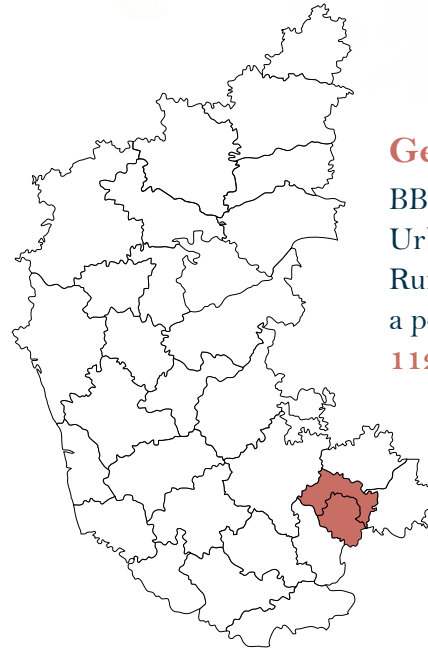
## Funder

Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM)



## Key Project Highlights

- ◆ The lockdown situation in Karnataka restricted TB patients' access to healthcare providers. JEET organized two sessions on Google Hangouts for persons with TB entitled 'Ask Your Doubts' on June 5 and 19. The first meeting was coordinated by Dr Anil from the STO office and on June 19 by Dr Suma, a pulmonologist from Excel Care Hospital. They clarified questions on their treatment, COVID and vaccinations. A total of 101 persons with TB benefited from these interactions.
- ◆ Treatment Coordinators (TCs) counselled **57** persons with TB who had developed COVID-10 and were admitted in private hospitals across Bengaluru City, Bengaluru Urban and Bengaluru Rural districts. Hub Agents shared a COVID-TB



## Geography

BBMP, Bengaluru Urban, Bengaluru Rural, covering a population of **112** lakhs.

bidirectional testing brochure (developed by JEET) to nearly **1500** facilities in the three districts.

- ◆ COVID patients are believed to be more at risk for developing TB. JEET supported BBMP in tracking **25193** post-COVID patients for an active case finding of TB symptomatics. The team tracked **20539** patients based on the availability of the contact number of the patients. The patients who consented were also linked to COVID counselling. **40** samples were sent for testing and 3 persons were found to be TB-positive.



## Impact

- ◆ As the JEET-PPSA program came to an end in December 2021, the JEET team planned a state-level meeting with the State TB Office on November 23 to take measures to continue private sector notifications. Dr Ramesh Chandra Reddy, State TB Officer chaired the meeting, which was attended by representatives of the State TB Office, District TB office and NGO partners. It was decided that PPSA activities would be transitioned from JEET to the NTEP. A workshop was organised for all TU staff of the three districts on December

14-15. The JEET team shared experiences and strategies in a Standard Operating Procedures document for continuing private sector engagement through different approaches for facilities, laboratories and pharmacies.

- ◆ The number of private hospitals notifying persons with TB in 2017 were less than 300 and this increased to **1161** by the end of 2021
- ◆ Notifications increased from **3830** in 2017 to **10,320** by the end of 2021

### 3 JEET 2.0



#### Objective

- ◆ To provide TB Preventive Therapy to the household contacts of persons with pulmonary TB



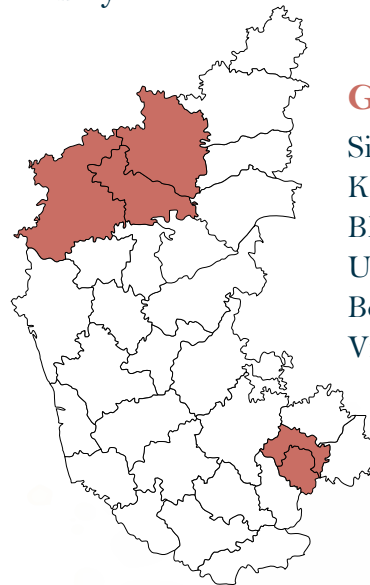
#### Project Duration

2021-2024



#### Funder

Global Fund to Fight AIDS, Tuberculosis and Malaria



#### Geography

Six districts in Karnataka, namely BBMP, Bengaluru Urban, Bengaluru Rural, Belagavi, Bagalkot and Vijayapura



## Key Project Updates

- ◆ The JEET team initiated ‘TPT Family Support Groups’ involving Index TB Patients and their family members at Primary Health Centres and Community Health Centres to discuss their issues with taking

TPT. The meetings were planned to improve treatment adherence and address adverse drug reactions. Seven such programmes were organized in which more than 220 family members participated.

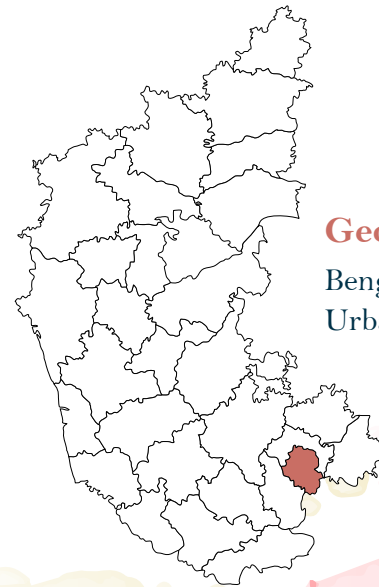
## Impact

- ◆ The Latent TB Infection (LTBI) intervention was made fully functional in all the six operational districts from January 2022. A total of **5,863** index patients were visited and **20,280** contacts were enrolled for screening. Out of **20,280** contacts, **16,896** were screened to rule out TB and **6,765** were initiated on TB Preventive Therapy (TPT).
- ◆ **685** contacts gave their samples for IGRA tests through the Test and Treat model implemented in Bagalkot district. Results were received for **597** contacts. Out of the **597,170** tested positive for TB infection. **150** of them were initiated on TPT.

## 4 Catalyst Project



**Objective** The Catalyst TB project, aims to establish Kshaya Muktha Karnataka Kendras for TB elimination in selected private health facilities in Bengaluru Urban through the engagement of trained medical graduates who will serve as Catalysts for TB Mukta Bharat. The project identifies facilities with presumptive TB patients, work with the management to establish notification systems, and capacitate the Catalysts to establish Cough corners/TB cells/ DR TB centres, as well as conduct CMEs in-house.



**Geography**  
Bengaluru  
Urban district



**Project Duration** 2022-2023



**Funder** Johnson & Johnson



### Key Project Updates

- ◆ KHPT spoke with **21** nodal officers on TB from medical colleges in Bengaluru on February 4 to orient them on the project, discuss the next steps in their engagement, and request them to share

a list of doctors to undergo training. The team conducted a training for **25** doctors from 10 medical colleges on February 24 on updates to NTEP, PMDT and PMTPT guidelines.

## 5 Jilla Samudaya Vedike (JSV)-TB



**Objective** To strengthen the TB response through rights-based, people-centred approaches by establishing community-led monitoring forums in three high-prevalence districts of Karnataka



**Project Duration** 11 months  
(2021-2022)

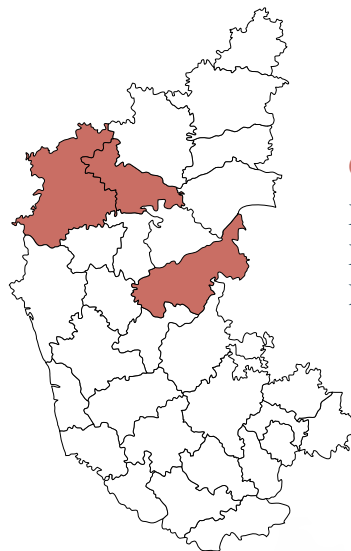


**Funder** Stop TB Partnership



### Key Project Updates

- ◆ The KHPT team introduced the JSV project to the District Legal Services Authority in Ballari on March 15 to discuss a potential collaboration with the project for human rights awareness and human rights violations due to stigma among persons with TB. The team also met with District Level



### Geography

Belagavi, Bagalkot,  
Ballari districts,  
Karnataka

Network of People Living with HIV (PLHIV) to understand the Community Service Centre (CSC) program for PLHIV and discuss how to collaborate on activities which can improve the TB responses among PLHIV.

## OVERALL IMPACT



No. of household  
contacts of index  
patients put on TPT

**8,381**



No. of people  
identified with TB

**2,179**



No. of household  
contacts who  
successfully  
completed TPT  
treatment

**7,054**



No. of people  
screened through  
KHPT's TB  
initiatives

**23,35,256**



No. of people  
tested

**20,523**

A large, bold, green serif letter 'M' is centered on the page. The background features abstract watercolor splashes in shades of teal, yellow, and red. The letter 'M' is solid green and stands out against the lighter, textured background.

M

Maternal Neonatal  
and Child Health

Our approach focuses on improving availability, accessibility, quality, utilization, and coverage of critical MNCH interventions among the rural poor through Facility, Community, Health Systems, and Technology. It includes strengthening of health

care providers' knowledge and skills to threshold levels to deliver quality MNCH services in district-level public health care facilities. Our focus is on prioritizing the integration of respectful maternity care principles and practices

## Thematic goal

Improved overall health and wellbeing of mothers and children

## Thematic Highlights

### New projects

- ◆ The Global Alliance for Improved Nutrition (GAIN) awarded KHPT a grant for a project titled “Scaling up fortification of edible oil, milk and wheat flour in select geographies of India”. The project is proposed to be implemented over two years in 18 states/UTs of India, including Madhya Pradesh, Gujarat, Rajasthan, Maharashtra, Andhra Pradesh, Telangana, Karnataka, Tamil Nadu, Uttar Pradesh, Punjab, Haryana, Odisha, Chattisgarh, Bihar, Tripura, Himachal Pradesh, Kerala, and the Andaman & Nicobar Islands. The project aims to increase the availability of fortified staple food in the open market and make fortified staples available to the most vulnerable populations through government social safety net food supply programs in all implementation states.
- ◆ KHPT received a grant from Healthium Medtech for a two-year project to design and develop innovative strategies and intervention packages aimed at improving Early Childhood Care and Development (ECCD) indicators in Kunigal block, Tumkur district. KHPT will develop a comprehensive convergence-based intervention model based on a life cycle approach from the pre-conception period to early childhood, going up to six years. The project will harness resources available through government and at the community level, and adopt an evidence-based programming approach from its inception.
- ◆ KHPT was awarded a grant of Rs 25 lakh from the HCL Foundation as runners-up for its novel concept of preconception nutrition for newly married women. KHPT progressed from one of 9395 registered organizations applying for grants in health, environment and education to 30 shortlisted at sub-jury level and finally to three public health organizations at the jury level. Our initiative will also be included

in a Roli Books compendium of finalist organizations.

- ◆ KHPT in September signed an MoU in with Wipro Cares, the community initiative arm of the Wipro Foundation, to develop an Urban Comprehensive Primary Health Care model to deliver Universal Health Coverage, with a special focus on maternal and child health in marginalized and vulnerable communities. This three-year project will be implemented in Singasandra Urban Primary Health Centre (UPHC), Bengaluru, as per the Ayushman Bharat guidelines framed by Government of India.

## Research

- ◆ A research paper based on a KHPT's study to investigate the impact of gender-based violence on ASHAs, who act as a critical link between the village community and health systems, was published in the Journal of Global Health Reports in June. The paper, titled "Investigating violence against Accredited Social Health Activists (ASHAs): A mixed methods study from rural North Karnataka, India", draws from KHPT's experience of engaging with ASHAs in Koppal and Bagalkot districts. It throws light on the multiple forms and experiences of violence among the ASHAs and the need for a multilevel approach to safeguard their rights.

## Capacity Building

- ◆ KHPT was invited by the National Health Systems Resource Centre (NHSRC) to take a session during a virtual national-level training on "Constitution of Jan Arogya Samitis (JAS)" on March 26 for the key officials of all the states. This session was presented by Ms. Prathibha Rai, Manager, Community Interventions, and was titled "Community level
- ◆ Campaign for Constitution of JAS - Lessons from past interventions". KHPT presented its experience in implementing "Hamaara Tyohaar/Our Festival", a community-level campaign to constitute Village Health Sanitation and Nutrition Committees and explained how this intervention could be used in constituting JAS.

# Key projects

## 1 Addressing micronutrient deficiencies through edible oil, milk and wheat flour fortification



**Objective** KHPT works to catalyze, coordinate and implement the scale-up of large-scale staple food fortification across through effective government and other stakeholder engagement



**Project Duration** 2017-2021

**Geography** 13 states



**Funder** Global Alliance for Improved Nutrition (GAIN)



### Key Project Updates

- ◆ The Department of Food, Civil Supplies and Consumer Affairs, Himachal Pradesh (HP), organized an event in collaboration with technical support partners GAIN-KHPT to celebrate its achievements in providing fortified wheat flour to all its beneficiaries through social safety net programs such as the Public Distribution System (PDS), reaching about **18,00,000** families under different ration card categories.
- ◆ KHPT-GAIN has been recognized as the technical support agency to the Food Safety Administration, Madhya Pradesh to provide technical assistance on large scale food fortification, to build capacities of food safety officials, to ensure quality assurance
- ◆ Practices and to support strengthening the state food labs to align with NABL standards through gap audits and knowledge and skill development of laboratory staff.



- ◆ The KHPT team developed a Standard Operating Procedures (SOP) document entitled “Effective Safety Standards to be applied in Food Businesses during the COVID-19 pandemic” to sensitize industries on measures to keep their workers safe and prevent any avoidable disruption in operations.
- ◆ KHPT-GAIN developed a research brief on its study titled, “A Qualitative Assessment of Fortified Edible Oil Samples from the Open Market”, which identified locally produced fortified edible oil brands available in the open market in 8 states to establish whether they met fortification standards for Vitamin A and D as prescribed by the Food Safety and Standards Authority of India (FSSAI). 144 samples of fortified edible oil were collected from the local market and sent to a NABL accredited laboratory to test for Vitamin A and D, along with PV (Peroxide Value).
- ◆ The fortification team conceptualized and developed a process document in September, entitled “The industrial processes of edible oil fortification -an overview of technical requirements and variations adapted by the industry”. The document shares different technical requirements surrounding the edible oil fortification process with edible oil industries/manufacturers.
- ◆ KHPT and GAIN conducted a market fortification assessment during December 2020-April 2021 across eight states to identify locally produced fortified edible oil types and variants available in the open market and establish whether they meet fortification standards for Vitamin A and D as prescribed by the Food Safety and Standards Authority of India (FSSAI)

## 2 Strengthening the delivery of community outreach services through capacity building of frontline workers



### Objective

KHPT is implementing the CARE India-MNCH project in Bihar to strengthen the capacity of frontline workers to mentor ASHAs and improve critical MNCH outcomes



### Project Duration

2020-2021



### Funder

CARE India



## Geography

Bihar



## Key Project Updates

- ◆ The National Health Systems Resource Centre (NHSRC) is developing a module to train Gram Panchayats (GPs) and Urban Local Bodies (ULBs) on matters of health. KHPT staff reviewed the first chapter on understanding health and its determinants and the role of GPs and ULBs. The team guided the session framework and re-wrote parts of the training process to make it a more participatory one, using adult learning principles that would make it easier for illiterate or semi-literate participants to understand concepts

### 3 Evaluating the long-term efficacy of daily consumption of indigenously developed extruded micronutrient fortified rice



**Objective** To scientifically evaluate the long-term efficacy (two years) of daily consumption of indigenously developed extruded micronutrient fortified rice in improving iron stores as the main outcome in school going children (6-12 years)



**Project Duration** September 2019–October 2022



**Funder** Department of Biotechnology, Government of India



## Geography

Koppal district, Karnataka



## Key Project Updates

- As part of the, around 200 primary school children were identified post screening for the study in Koppal in February 2020. Due to the pandemic, the study could not be continued and required a re-evaluation of blood biochemistry of the selected children to begin the study in February 2021. As a result of the lockdown, non-availability of mid-day meals in school

and food insecurity, the prevalence of anemia and iron deficiency anemia almost doubled in these children, although the prevalence of iron deficiency did not increase. The prevalence of thinness as measured by the body mass index for age was also found to have increased. This strongly emphasises the need for social safety net programs to maintain nutritional status of children apart from the need for household level food security interventions.

## 4 Developing a Comprehensive Primary Health Care model to deliver Universal Health Coverage, with a special focus on RMNCH+A in Bengaluru



### Objective

- Identifying vulnerable groups and assessing gaps in critical service delivery to these groups.
- Improving access, strengthening referrals, linkages and follow-up of RMNCH+A services among vulnerable populations in the UPHC area.



### Project Duration

August 2021-September 2023



### Funder

Wipro Cares



### Geography

Singasandra,  
Bengaluru



## Key Project Updates

- ◆ The KHPT team organized a three-day Training of Trainers program from March 13-15 for the Community Health Workers (CHWs) of the project to capacitate them on Experiential Learning Interactive Theatre (ELIT). It engages the audience and encourages them to think and reflect critically on issues put forth by the play. The most important feature of ELIT is that the actors are not trained professionals; they are the persons who experience the issues in the play, and thus are best positioned to talk about them.
- ◆ A two-day training for the ASHAs was held on March 28 and 29 to capacitate the ASHAs
- ◆ on using the ELIT techniques to enhance their Behaviour Change Communication (BCC) activities at the community level
- ◆ To increase the community's confidence in ASHAs, and encourage them to access services at the Singasandra UPHC, the KHPT team organized Arogya Habba, a one-day health festival at Koodlu Gate slum quarters on March 30 of a health screening camp supported by Singasandra UPHC staff, and a cultural theatre performance by ASHAs on their roles and responsibilities, using the ELIT techniques they had learned.

### Thematic-level impact

**13,091** women of reproductive age reached



**640** pregnant women reached



**145** lactating mothers reached



**9007** children aged 6-60 months reached



A large, bold, red serif letter 'G' is the central focus. The background is white with several watercolor-style splashes in shades of teal, yellow, and pink. The letter 'G' is positioned in the upper half of the page, with its top curve overlapping a teal splash and its bottom curve overlapping a yellow splash.

Gram Panchayat  
Interventions

Gram Panchayats are the centres of village administration, development, and health and family welfare, with immense potential to provide decentralized services that can improve the health and well-being of their communities. They have the unique ability to gauge the public health requirements of rural areas, expand access to healthcare services, and leverage community networks to meet the needs of the most vulnerable and unreached populations.

KHPT is supporting the Government of Karnataka, namely the Departments of Rural Development and Panchayat Raj (RDPR) and

Health and Family Welfare to implement the Graama Panchayath Arogya Amrutha Abhiyaana, a first-of-its-kind initiative which aims to enhance the capacities of Gram Panchayats to proactively address issues of public health - such as COVID-19, Non-Communicable Diseases, Tuberculosis, mental health and child marriage - though the provision of point-of-care testing devices and capacity building. The GPAAA is a novel initiative that will help create a decentralised convergence model for health at the lowest level between both the demand and supply sides for the health of grassroot communities.

## 1 The Graama Panchayat Arogya Amrutha Abhiyaana



### Objective

To take services to the doorstep of every poor household in rural Karnataka through the close collaboration of Panchayat functionaries such as the Panchayat Development Officer, members of the newly-established Gram Panchayat Task Force, and health services staff from Health and Wellness Centres such as the ASHA, Middle-level Health Practitioner (MLHP), and Primary Health Care Officer.



### Project Duration

August 2021 onwards

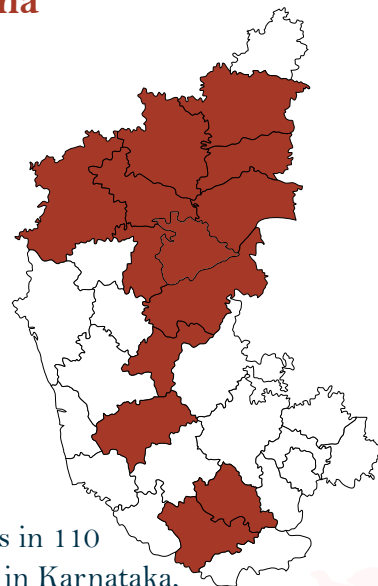


### Funder

United States Agency for International Development (USAID)

### Geography

2816 Gram Panchayats in 110 talukas of 14 districts in Karnataka, namely Bagalkot, Ballari, Belagavi, Chamarajanagara, Davanagere, Gadag, Kalaburgi, Koppala, Mandya, Mysure, Raichuru, Vijayanagara, Vijayapura, Yadgir





## Key Project Updates

- ◆ The GPAAA was launched by Shri K S Eshwarappa, Minister, RDPR at Suvarna Soudha in Belagavi on August 30. Shri K S Eshwarappa handed over the Gram Panchayat health management kit to four Gram Panchayat groups and released the IEC materials with dignitaries on the dais. The event was attended by 32 CEOs of Zilla Panchayaths across the state, as well as senior officials of the Government of Karnataka, including Shri L K Atheeq, Principal Secretary, RDPR.
- ◆ KHPT facilitated a satellite training broadcast to 14 districts in Karnataka on November 10, with resource persons from the RDPR and public health experts from KHPT to orient the Gram Panchayat Task Force members on GPAAA, the basics of TB and COVID, the use of the health management and COVID Care kits, and most importantly, their role in ensuring that healthcare services reach the most vulnerable in the communities. The training was broadcast with the support of Abdul Nazeer Sab State Institute of Rural Development & Panchayat Raj (ANSSIRD & PR), Mysuru, and the broadcast station at the Panchayat Commissionerate, Bengaluru.
- ◆ KHPT has set up 3 counselling centres in Bengaluru, Mysore and Dharwad with 36 counsellors under the Sahita Careline mental health telecounselling initiative. The telecounsellors underwent an intensive training process with knowledge and skills to equip them to provide mental health support to COVID patients.

## Impact

**41,734** GPTF members trained on using health management kit, their roles and responsibilities



**1,69,871** people screened for Non-Communicable Diseases through



**4514** camps



**19167 (11.3%)** referred



**3,86,394** people screened for TB (verbal)



**5831 (1.5%)** referred for testing



**58073** people screened with mental health checklist



**1409** people with mental health issues counselled



**199** people referred for further management of mental illness





Comprehensive Primary  
Health Care



Comprehensive Primary Health Care (CPHC) is a holistic approach to health and well-being that encompasses all services and is delivered in

partnership by an interdisciplinary team through a range of services and programs that are accessible, equitable, culturally appropriate and effective.

## Thematic goal

To design, implement and sustain the need-based Urban Comprehensive Primary Health Care (CPHC) model to achieve Universal Health Coverage in select cities in India.

### **1** An incentive-based community health worker-led outreach model to improve patient-centric care in an urban PHC area in Mysuru, Karnataka

#### Key projects implemented



**Objective** The primary objective is to test the feasibility of a contractual, incentive-based community health worker model, embedded and sustained within the existing urban health system, aimed to achieve improved Non-Communicable Diseases (NCDs- Diabetes and Hypertension) outcomes for a minimum of 60% of the population with a focus on the underserved using a patient-centric approach.



**Project Duration** August 2017-  
December 2022



**Funder** Medtronic Foundation  
and Medtronic Lab



#### Geography

Kumbarakoppalu  
Urban Primary Health  
Centre area, Mysuru  
Karnataka



## Key Project Updates

- ◆ A three-day refresher training for 17 Community Health Workers (CHWs) and four CHW Coordinators was conducted in February 2022 in Mysuru. The objective of the refresher was to re-orient the CHWs on the NCD project, its objectives and goals and revisit all the key components of the three training modules in which CHWs had been trained last year.
- ◆ In the wake of World Diabetes Day, observed on November 14 2021, 60 persons with diabetes and 20 Community Health Workers came together for a rally in Kumbarakoppalu, Mysuru to raise awareness on early diagnosis for better diabetes management.

## Impact and Reach

KHPT engaged with 1800 persons with diabetes and hypertension during this period

- ◆ Between enrolment to the last round of the clinical visits, while 17.5%(N=777) of diabetes patients showed improvement of more than 1%Hba1c level, 18% (N=964) of hypertension patients showed clinical improvement of  $\geq 10$ mmhg systolic/ $\geq 5$ mmhg diastolic.
- ◆ Among the same patients, 44.4%(N=777) of diabetic and 38%(N=964) of hypertensive patients showed any clinical improvement.

## 2 Implementation Research on developing a Comprehensive Primary Health Care Model for Mysuru City



**Objective** To design, develop, implement and evaluate a model of Urban Comprehensive Primary Health Care in Mysuru city



**Project Duration** January 2021- 2025



**Funder** Access Health International



**Geography**  
Mysuru City



## Key Project Updates

- ◆ KHPT commenced preparing for its one-year formative research study to assess CPHC in Mysuru. The study aimed to describe the current status of the urban CPHC system in Mysuru, identify and analyse barriers and facilitators to CPHC, and develop design options to strengthen urban primary health care.
- ◆ KHPT in collaboration with Grassroots Research and Advocacy Movement (GRAAM) conducted four Public Engagement (PE) workshops with private doctors, government health officials, Mysuru corporation officials, and non-profit organisations. The PE was a part of a larger formative research study funded by HSTP and Access Health that aims to design, develop, implement, and evaluate an Urban Comprehensive Primary Health Care model in Mysuru city.

## Thematic Updates

- ◆ KHPT's abstracts titled "An Innovative Public-Private Partnership based Community Health Worker Model for Patient-Centric NCD Care Continuum in Urban Mysuru, South India" by Dr Swaroop N and "A 'Changed and Holistic' Patient-Centered Care Pathway: Experiences from an NCD Care Continuum Model during COVID wave-I in Urban Mysuru, India" by Dr Manoj Kumar Pati were accepted for poster presentation and oral presentation respectively at the Seventh Global Symposium on Health Systems Research 2022 at Bogota, Colombia.
- ◆ Karnataka Health Promotion Trust (KHPT) bagged the Best NGO award under the Upliftment of Diabetes Care in Resource-Limited areas (Tribal, slums, etc) category at the 1st International Conference on 'Innovations by NGO's in Diabetes Care.' The virtual conference held in Ahmedabad from 12-14 of August 2021, witnessed participants from 31 countries, 249 cities of India, and 687 NGOs across the world.

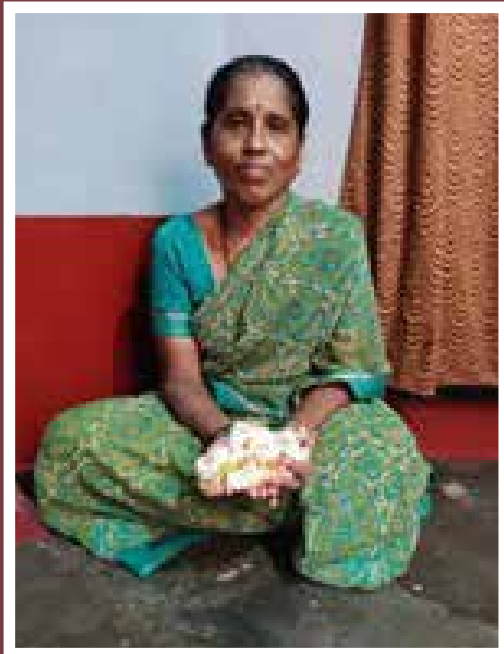
## Voices/ Stories from the field

Leelavathi's home is located on a narrow street in the Kumbarakoppalu area of Mysuru city. The 56-year-old eagerly awaited a basket of flowers from a merchant. She strings them for a living and a kilo of garland will fetch her 80 rupees. Besides the money, flower stringing keeps her occupied, making her forget about the ongoing family issues, and helping her control and maintain her diabetes levels.

During a visit to her sister eight years ago, Leelavathi was diagnosed with diabetes. As her head swirled, she was rushed to the hospital. The doctor confirmed diabetes after a few tests. "I was scared and did not know what to do," recounts Leela. Eventually, she was able to manage her diabetes levels with the help of her family members.

As a result of mounting debts, being abandoned by her son, and her daughter's two suicide attempts, she was diagnosed with diabetes. Sleepless nights were also caused by constant worries and sadness. But her life changed when Bhoomika, one of our Community Health Workers started visiting her home. Although Leela was taking medicines for diabetes, personal touch of care and understanding was missing. Bhoomika advised Leelavathi to follow a diabetic-friendly diet and counselled her, which helped her to worry less and be more productive.

"Bhoomika's talk comforted me and I feel much better now," she says. Leelavathi's spouse takes good care of her, from getting her prescription drugs to driving her to the hospital to giving her a pep talk. "We should not be scared of diabetes. We should do all we can to manage it better," she says with a wide smile on her.



# Financials

## KARNATAKA HEALTH PROMOTION TRUST

No.1-4, IT Park, Behind KSSIDC Admin. Office, Rajajinagar Industrial Area, Rajajinagar, Bangalore - 560 044

### Statement of Income and Expenditure - Consolidated

Particulars	Note	For the year ended 31st March, 2022 (Rupees)	For the year ended 31st March, 2021 (Rupees)
<b>Income</b>			
Grants Received - Utilized	3	40,43,57,137	28,16,91,796
Interest Income	8	80,33,832	1,19,77,467
Donations Others		6,79,658	1,72,670
Sale of Assets		-	83,250
Exchange Difference		8,118	-
Misc Income		7,840	-
Award income from APU		-	25,000
<b>Total</b>		<b>41,30,86,585</b>	<b>29,39,50,183</b>
<b>Expenditure</b>			
Programme Expenses	9	-	4,73,44,188
- Grants to NGO's		-	4,73,44,188
- Implementation Expenses		33,69,43,031	18,07,74,958
- Implementation Equipments		1,04,47,671	-
- Training and Capacity Building Expenses		75,35,110	59,80,972
Administrative Expenses		-	-
- Personnel Expenses	10	3,19,40,502	2,93,37,659
- Administrative and other expenses	11	1,86,73,255	1,83,37,605
- Interest Earned-Refunded		3,95,113	-
<b>Total</b>		<b>40,59,34,682</b>	<b>28,17,95,382</b>
<b>Excess of Income over Expenditure transferred to General Reserve</b>		<b>71,51,903</b>	<b>1,21,54,801</b>

For Karnataka Health Promotion Trust

  
Mohan H L  
Chief Executive Officer

  
Nanjundappa G.M  
Director Finance

Place: Bangalore  
Date: 15-Sep-2022



As per our audit report of even date attached  
For R V K S And Associates  
Chartered Accountants  
Firm No. 0085725

  
R. Mohan  
Partner  
Membership No. 203911



## KARNATAKA HEALTH PROMOTION TRUST

No.1-4, IT Park, Behind KSSIDC Admin. Office, Rajajinagar Industrial Area, Rajajinagar, Bangalore - 560 044

Balance sheet - Consolidated

Particulars	Note	As at 31st March, 2022 (Rupees)	As at 31st March, 2021 (Rupees)
<b>I Sources of Funds</b>			
<b>1 Reserves</b>			
Corpus fund	1	10,000	10,000
General Reserve	2	17,29,66,950	16,58,15,046
Grant Received in Advance	3	5,82,77,760	4,71,45,012
<b>Total</b>		<b>23,12,54,709</b>	<b>21,29,70,059</b>
<b>II Application of Funds</b>			
<b>1 Current Assets, Loans and Advances</b>			
Cash and Bank Balances	4	16,23,44,220	20,11,93,981
Loans and advances	5	1,09,26,142	1,61,80,522
Grant Receivable	3	6,26,35,790	-
<b>Total</b>		<b>23,59,06,152</b>	<b>21,73,74,503</b>
<b>2 Less : Current liabilities and provisions</b>			
Current Liabilities	6	36,18,758	34,69,790
Provisions	7	10,32,685	9,34,654
<b>Total</b>		<b>46,51,443</b>	<b>44,04,444</b>
<b>Net current assets</b>		<b>23,12,54,709</b>	<b>21,29,70,059</b>
<b>Total</b>		<b>23,12,54,709</b>	<b>21,29,70,059</b>

For Karnataka Health Promotion Trust

  
Mohan H L  
Chief Executive Officer

  
Nanjundappa G.M  
Director Finance

Place: Bangalore  
Date : 15-Sep-2022



As per our audit report of even date attached  
For R V K S And Associates  
Chartered Accountants  
Firm No. 008572S

  
R. Mohan  
Partner  
Membership No. 203911



## KARNATAKA HEALTH PROMOTION TRUST

No.1-4, IT Park, Behind KSSIDC Admin. Office, Rajajinagar Industrial Area, Rajajinagar, Bangalore - 560 044

Notes forming part of the accounts - Consolidated	As at 31st March, 2022 (Rupees)	As at 31st March, 2021 (Rupees)
<b>Note 1: Corpus Fund</b>		
Opening balance	10,000	10,000
	10,000	10,000
<b>Note 2: General Reserve</b>		
Opening balance	16,58,15,047	15,36,60,246
Add: Transferred from Income & Expenditure A/c	71,51,903	1,21,54,801
	17,29,66,950	16,58,15,047
<b>Note 3: Grant Received in Advance</b>		
Opening balance	4,71,45,012	1,69,28,250
<b>Grants Received during the year</b>		
The Cooperative for Assistance and Relief Everywhere Inc. CARE	6,06,015	59,33,172
United States Agency for International Development-OVC	19,74,86,575	11,57,93,205
Global Alliance for Improve Nutrition	2,96,19,543	2,61,17,699
Medtronic Global Health Foundation	-	3,39,80,719
Wellspring Philanthropic Fund	59,28,795	88,58,260
DASRA	77,10,082	-
ACCESS Health International Inc	28,85,066	-
JSI Research & Training Institute Inc	46,29,350	-
UNOPS-Stop TB	39,65,333	-
Karnataka State Aids Prevention Society - KSAPS	95,79,698	1,02,11,391
India HIV/AIDS Alliance	80,554	4,35,01,615
Karnataka State Rural Livelihood Promotion Society	-	30,69,247
Azim Premji Philanthropic Initiative	-	5,25,000
Indegene-TB-Care	-	12,40,018
MAC-ELCA Cosmetics Pvt Ltd	-	7,97,570
CBCI Society for Medical Education	48,51,385	47,52,614
Life style International Pvt Ltd	-	40,08,500
Sponsored Funds-OVC-Nutrition & Others	-	1,11,000
FIND India	3,29,87,423	2,21,49,583
Health Systems Transformation Platform	-	4,40,000
World Health Organisation	39,53,520	22,76,064
KALIKE	20,16,000	95,00,000
H T Parekh Foundation	2,88,09,428	1,22,90,572
Dhruvkumar Khaitan	-	50,00,100
District Health & Family Welfare Society, Koppal	10,85,922	6,19,755
Mangalore Chemicals & Fertilizers Limited	-	7,60,000
Wipro Cares	16,67,952	-
Johnson & Johnson Private Limited	44,44,610	-
HCL Foundation	25,00,000	-
Bosch	33,87,100	-
Cherian Dominic & Annie Dominic	36,000	-
	39,55,75,363	32,55,45,384



Add:

Interest Earned Refunded		
H T Parekh Foundation	82,545	-
India HIV/AIDS Alliance	17,287	-
FIND India	1,74,710	-
KSAPS-LWS Gadag	18,195	-
KSAPS-LWS Bagalkot	23,436	-
KSAPS-LWS Bijapur	20,825	-
KSAPS-LWS Belgaum	20,412	-
HCL Foundation	37,703	-
<b>Gross Totals</b>	<b>3,95,113</b>	<b>-</b>

Less:

Refund of Grants Funds		
CBCI Society for Medical Education	-	47,526
India HIV/AIDS Alliance	8,96,922	-
	<b>8,96,922</b>	<b>47,526</b>
Exchange Differences Income transferred	8,118	-
Grant Utilized transferred to Income & Expenditure Account	40,43,57,137	28,16,91,796
Grant Utilized transferred to Income & Expenditure Account - Dr	-49,33,671	-
	<b>39,94,31,584</b>	<b>28,16,91,796</b>
Grant Received in Advance	<b>-43,58,030</b>	<b>4,71,45,012</b>
Grant Payable	5,82,77,760	4,71,45,012
Grant Receivable	6,26,35,790	-
Total	<b>-43,58,030</b>	<b>4,71,45,012</b>





# KARNATAKA HEALTH PROMOTION TRUST

No.1-4, IT Park, Behind KSSIDC Admin. Office, Rajajinagar Industrial Area, Rajajinagar, Bangalore - 560 044

	As at 31st March, 2022 (Rupees)	As at 31st March, 2021 (Rupees)
Notes forming part of the accounts - Consolidated		
Note 4: Cash and bank balances		
Cash in Hand	94,370	95,251
Balance with Scheduled Banks in savings accounts in deposit accounts	16,20,78,850 1,71,000	3,09,27,730 17,01,71,000
	<u>16,23,44,220</u>	<u>20,11,93,981</u>
Note 5: Loans and advances		
Advances recoverable in cash or in kind or for value to be received	32,10,855	79,14,610
TDS receivable	28,26,792	44,14,624
Deposits	48,88,495	38,51,287
	<u>1,09,26,142</u>	<u>1,61,80,521</u>
Note 6 : Current liabilities		
TDS payable	18,34,855	15,58,761
Sundry creditors	8,09,655	6,54,631
Other liabilities	9,74,248	12,56,399
	<u>36,18,758</u>	<u>34,69,791</u>
Note 7 : Provisions		
Accruals - Payable	10,32,685	9,34,654
	<u>10,32,685</u>	<u>9,34,654</u>



## KARNATAKA HEALTH PROMOTION TRUST

No.14, IT Park, Behind KSSIDC Admin. Office, Rajajinagar Industrial Area, Rajajinagar, Bangalore - 560 044

	For the year ended 31st March, 2022 (Rupees)	For the year ended 31st March, 2021 (Rupees)
<b>Notes forming part of the accounts - Consolidated</b>		
<b>Note 8: Interest Income</b>		
From Savings Bank Accounts	51,68,969	18,36,714
From Fixed Deposits with Bank	27,14,325	85,80,988
Interest on IT Refund	1,50,538	15,59,765
	<b>80,33,832</b>	<b>1,19,77,467</b>
<b>Note 9 : Programme Expenses</b>		
Grants to NGO's	-	4,73,44,188
Programme Implementation Expenses	33,69,43,031	18,07,74,958
Programme Implementation Equipments	1,04,47,671	-
Training and Capacity Building Expenses	75,35,110	59,80,972
	<b>35,49,25,812</b>	<b>23,41,00,118</b>
<b>Note 10 : Personnel Expenses</b>		
Salaries	3,13,63,970	1,81,07,697
PF Employers' Share	-	12,243
Leave Encashment	-	95,534
Leave Travel Allowance	-	1,06,104
Consultancy Charges	-	1,01,89,159
Recruitment Expenses	2,478	64,342
Gratuity	-	2,28,674
Insurance-Staff	-	2,77,703
Ex-Gratia	5,00,000	1,68,326
Overtime Allowance	-	1,07,877
Relocation Charges-Joining	4,550	-
Special Allowance	69,504	-
	<b>3,19,40,502</b>	<b>2,93,57,659</b>



## KARNATAKA HEALTH PROMOTION TRUST

No.1-4, IT Park, Behind KSSIDC Admin. Office, Rajajinagar Industrial Area, Rajajinagar, Bangalore - 560 044

	For the year ended 31st March, 2022 (Rupees)	For the year ended 31st March, 2021 (Rupees)
<b>Note 11 : Administrative and other expenses</b>		
<b>Fixed Assets</b>		
Computers	-	21,05,867
Furniture & Equipments	-	27,06,691
<b>Communications</b>		
Courier Charges	1,24,394	80,159
Data Card Expenses	10,55,743	5,89,532
Internet Charges	3,05,747	2,68,214
Mobile Charges	6,36,958	6,87,050
Postage & Telegrams	2,003	-
Telephone Charges	1,82,995	1,76,762
Call Conferencing Charges	-	2,218
<b>Office Running Expenses</b>		
AMC for Equipments & Others	94,400	1,63,285
Bank Charges	28,358	34,814
Books & Periodicals	11,243	10,804
Computer Running Expenses	1,54,528	4,36,331
Electricity/Water /Maintenance Charges	10,17,367	10,23,458
Insurance - Assets	8,236	1,37,638
Insurance - Cash	-	10,846
Office Repairs and Maintenance	15,87,875	11,76,709
Printing & Stationery	5,38,002	3,14,754
Rent-Office	84,97,325	56,31,982
Rent - Others	11,73,529	5,45,237
Software Expenses	6,27,642	6,12,656
Staff Welfare-Tea/coffee/meal	1,95,864	1,36,075
Website Development & Maintenance	4,16,547	3,00,028
Registration Fees-Legal & Others	1,04,791	40,119
<b>Other Expenses</b>		
Interest Paid-Income Tax	-	9,134
Interest Paid-Professional Tax	2,500	-
<b>Travel Expenses-Staff &amp; Consultants</b>		
Local Conveyance	60,422	1,05,322
Travel Expenses-National-Accommodation	24,097	-
Travel Expenses-National-Air tickets	34,072	-
Travel Expenses-National-Others	17,211	-
Travel Expenses-National-Perdiem	38,055	-
Travel Expenses-National-Train/Bus	5,821	-
<b>Vehicle Expenses</b>		
Vehicle-Insurance	26,473	-
Vehicle-Repair & Maintenance	63,489	-
Vehicle Fuel Expenses	3,44,476	-
Vehicle Hire Charges	4,21,319	-
<b>Professional Charges-Audit Fees</b>		
Audit Fees-FY-2020-21	-	4,13,000
Audit Fees-FY-2021-22	4,74,950	-
<b>Professional Charges</b>		
Professional Fees	3,96,823	6,18,920
<b>Total</b>	<b>1,86,73,255</b>	<b>1,83,37,605</b>



# Our Donors and Partners

KHPT can implement its vision and strategic programming to move forward with the generous support and funding of our donors who share our belief in the possibility of a brighter future.



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**gain**  
Global Alliance for  
Improved Nutrition



**Medtronic**  
FOUNDATION



**Dhruv Kumar**  
**Khaitan**





## **KHPT**

IT Park, 5th Floor, 1-4, Rajajinagar  
Industrial Area, Behind KSSIDC  
Admin office, Rajajinagar,  
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