



# Annual Report

## 2022 - 2023

# ASHWINI



**(1st April 2022 TO 31st March 2023)**

The Vision of ASHWINI is “to have a Health System for the tribals of the Gudalur Valley that is accessible, acceptable, owned and managed by the community.” We believe that communities can be empowered by ownership of Institutions that cater to their own needs as well as that of the mainstream. ASHWINI was registered as a Charitable Society in 1990.



Post covid, activities at Gudalur adivasi hospital have normalised.

We are delighted to welcome Dr. Sarath Sistla, a distinguished Senior General Surgeon and former Professor of Surgery at JIPMER, Pondicherry, who joined us in September, addressing a crucial need within our organization. Dr. Queennie, hailing from St. John's Medical College, Bangalore, will be fulfilling her two-year commitment of service. Additionally, we are pleased to acknowledge the successful completion of the three-month rural fellowship program by Drs. Niranjana, Lenin, and Sheda Fatima. A noteworthy achievement is the graduation of Vinitha and Minisha, two talented tribal individuals, who have successfully completed their General Nursing training and have now transitioned into their roles as dedicated staff nurses at GAH. In a further enhancement of our capabilities, Ms. Kasturi, a skilled Physiotherapist, has recently joined our team, thus bolstering the services offered at the differently abled center. Our organization is proud to welcome two new postgraduates in social work, Suresh and Renuka, who have become integral members of our community health team.

We extend our heartfelt gratitude to the numerous volunteer doctors who generously contribute their time and expertise on a regular basis. Their dedication to providing specialized care, performing vital surgeries, and offering continuous teleconsultations have been unwavering, and we are pleased to observe a growing number of volunteers joining our ranks. Furthermore, through the Plenti project, dedicated volunteers have conducted training sessions for our nurses, nursing students, mental health team, and field staff, enriching our collective knowledge and Skills.

## Hospital Statistics

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**13415**

Tribal patients  
attended  
outpatient clinics

**14298**

Nontribal patients  
attended  
outpatient clinics

**521**

patients were  
treated in the  
dental department

**216**

patients were  
referred to higher  
centres

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**1046**

Tribal patients  
were treated as  
inpatients

**406**

Nontribal patients were  
treated as inpatients

**212**

Deliveries were  
conducted at GAH

**840**

840 underwent health  
education under HIV  
intervention

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**223**

Surgeries were  
performed at GAH

**1435**

X-Rays were done

**2583**

Ultrasound scan were  
done

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**118**

Endoscopies were  
done

**NIL**

HIV Positive clients  
identified

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## | Center for Individuals with Differently-Abled Abilities

Kasturi, alongside Priya, has displayed a strong commitment to enhancing the programs and offerings at the Center for Individuals with Differently-Abled Abilities. The center is evolving into a dynamic hub where young individuals across the diverse spectrum of disabilities gather for enjoyable activities, rehabilitation, and vocational skill development. To facilitate regular attendance, a dedicated vehicle service has been established. Regrettably, the anticipated visit from our mentor, Dr. Angela Harding, was missed.

A noteworthy one-day excursion was arranged for hearing-impaired children and their parents, facilitated by our dedicated staff and Dr. Ramesh, an ENT specialist and long-standing volunteer consultant. This experience provided valuable insights into the pivotal role parents play in driving positive change.

- 310 new-born hearing screenings were done out of which 232 were done at the hospital and 78 at the village
- 327 patients underwent physiotherapy
- 12 patients were seen by the ENT and 17 by neurologists.

## | Eye Care Initiatives

Through a fruitful collaboration with Sankara Eye Hospital in Coimbatore, seven eye camps were successfully organized. These camps facilitated eye screenings for **400** individuals at the village level, with **198** beneficiaries undergoing cataract surgeries at Sankara Hospital. We express our gratitude for this collaboration and eagerly anticipate its ongoing success.

## | Advancements in Research

The ongoing ICMR project titled 'Improving the Capacity of Health System and Community for Screening and Management of Noncommunicable Diseases among Scheduled Tribes: An Implementation Research in The Nilgiris district, Tamil Nadu' is in its final year. This initiative aims to elevate awareness of diabetes and hypertension within the study population, while promoting greater utilization of public health services.

## | Community programme

### | Mother & Child programme

The Village Antenatal (ANC) check-up initiative, initiated in response to the pandemic, has proven to be invaluable in ensuring comprehensive healthcare for expecting mothers. This initiative remains ongoing, consistently ensuring that every mother is attended to and guided towards hospital visits for crucial ultrasound scans.



Tragically, malnutrition continues to cast a shadow over the villages of Gudalur, affecting children under the age of 5 in various degrees of severity. In collaboration with the Anaha Trust-funded program, we have vigilantly followed up with a total of 1185 children. This diligent effort involves thorough screenings designed to identify any potential underlying medical conditions contributing to malnutrition. We have been able to distribute ready-to-eat nutritious food to these vulnerable children.

## Mother and child programme

**280**

Total  
deliveries

**95.71%**

Institutional  
deliveries

**90.5%**

Immunization

**95.5%**

ICDS  
enrolment rate

**1185**

No. of children whose  
growth was monitored

**627(52.91%)**

Normal  
weight

**342(28.86%)**

Moderate  
malnutrition

**216(18.23%)**

Severe  
malnutrition

**1**

Maternal  
mortality

**7**

Infant mortality

## *Mental Health, Suicide Prevention & Alcohol De-addiction Program*

Disturbingly, suicide has emerged as one of the top five leading causes of death within the Adivasi communities in our region. A significant number of these suicides have been linked to instances of alcohol consumption. In response to this pressing concern, The APPI-funded initiative is proving instrumental in tackling this complex issue. The program takes a multifaceted approach, focusing on active case identification, early diagnosis, and the provision of essential clinical and counselling services directly to individuals' doorsteps.





A key facet of our efforts involves the enrolment and counselling of individuals grappling with alcohol-related problems. For those struggling with addiction, effective pathways to recovery are provided through collaboration with the local chapter of Alcoholics Anonymous. Additionally, individuals find the support they need through admission to a nearby deaddiction center.

## Mental health & deaddiction

**391**

No. of MH patients  
under follow up  
and/or medication

**193**

No. of patients  
with severe  
mental disorders

**198**

No. of patients  
with common  
mental disorders

**13**

Suicide deaths

**10**

No. of people underwent  
Deaddiction

## | Health Outreach and Disease Screening

A systematic health outreach program is undertaken every Sunday, targeting villages based on their existing disease burden. Comprising a dedicated team of doctors, nurses, midwives, social workers, and health animators, this initiative aims to comprehensively screen for a spectrum of diseases—both communicable and non-communicable—in the heart of the villages. The ongoing newborn screening program for sickle cell disease remains an integral part of our efforts.

Throughout the year, our field staff diligently follows up with patients identified through these screenings on a monthly basis. This ensures that they receive the necessary medication and support, all while ensuring strict adherence to prescribed treatment regimens. **Two** training camps at the hospital with the attendance of around **80** health volunteers in each camp.

- **968** people were screened from **26 villages**, and **100 new Hypertension cases** were detected.

NCD patients on follow up and given medication (excluding : mental illnesses and Sickle Cell Disease)	768
No. of Sickle Cell Disease patients under treatment & follow up	: 367
No. of new patients detected with Sickle Cell Disease	: 17
No of patients newly diagnosed with TB on treatment	: 41
No. of sputum positive cases	: 16
No. of patients with Epilepsy	: 36



## *Training Programme*

Poristes Stiftung remains a steadfast supporter of our comprehensive training program. Over the past three years, a number of students with aspirations for higher education have received partial support from TAGUE TEC.

We are elated and proud to celebrate the 5th anniversary of ASHWINI Adivasi School of Nursing's service in September 2023. Since its inception, a total of **82** tribal and **36** non-tribal students have enrolled in the auxiliary nursing and midwifery (ANM) course. Of these, **80** female students have successfully completed the course, while the remaining **38** students are currently pursuing their studies. All of our graduates have been successfully placed in various hospitals, including the Gudalur Adivasi Hospital (GAH).

In the latest academic year, two promising young girls, Ramya and Sandya, joined the GNM course at Devamatha School of Nursing in Kothegiri. Additionally, Ashwini and Sumitra have embarked on their educational journey in the field of Diploma in Medical Laboratory Technology (DMLT) at Dr. Jayashekar Memorial Trust, Nagercoil.

Our institution has welcomed students from a diverse range of courses, including seven pursuing Master's in Public Health (MPH), two in Master's in Social Work (MSW), two studying Commerce at the Bachelor's level, and two aspiring medical students who completed internships with us. Furthermore, five medical students and twenty-five nursing students successfully fulfilled their elective placements by engaging in our rural development program.

## *Construction Progress Report*

We are pleased to inform, that we have obtained the necessary approval to commence the construction of a staff quarter, a dormitory, and a kitchen facility for nurses on the 2nd mile campus.

## *Additional Funding Sources*

Government funding for the Sickie Cell programme continues under NHM-TN. Government is reimbursing Rs.3000/patient for tribal inpatient care. We have also received funding from the JSK Foundation UK, TIHF USA, From Here to There UK, Vidyalay.org, USA, Nilgiri Adivasi Trust UK, Friends of Hope- UK, GIVE foundation, ARTMA Foundation, many individual donations directly and through Benevity platforms.

## Board member details

NAME	POSITION	NO.OF MEETINGS ATTENDED	REMUNERATION	
M.KETHAN	PRESIDENT	3	NIL	DR.NANDAKUMAR MENON HAD TRAVELLED TO NEW YORK,USA IN SEP 2022 TO UNDERGO SURGERY
K.T.SUBRAMANIAN	SECRETARY	3	NIL	
N.KUMARAN	TREASURER	3	NIL	

## Staffing

SALARY STAFF	MALE	FEMALE	TOTAL
<5000	0	0	0
5000-10000	2	31	33
10000-25000	15	44	59
>25000	4	15	19
TOTAL NO. OF STAFF	21	90	111

HIGHEST SALARY RS.100000 PER MONTH FOR SPECIALIST DOCTOR  
LOWEST SALARY RS.7500 PER MONTH FOR MULTIPURPOSE WORKER

Financial Statement for the year 2022 - 2023			
Receipts & Payments Account			
Receipts for the year ended on 31/03/2023		Payments for the year ended on 31-03-2023	
Opening Cash and Bank Balance	2512938	Hospital	
Self Generated Fund Hospital Operations/Interest from Bank/Community Fund	21968168	Salaries	13891136
Donation from Indian Individuals	2390900	Medicines & consumables	5337849
Grants from/APPI /Indian Trusts	10019713	Operational Cost	12814856
Grants from Government	4827646	Laboratory	1191937
Donation from International Individuals	5323664	Canteen	2402800
Grants from International agencies Poristes Stiftung/Hope/The Nilgiri Adivasi Trust/Give India/Harvard	14255808	Community Health Program	
Sale of Investments - FD matured	71181296	Salaries	8312345
Loans/Advances	21800277	Operational Cost	2055733
Other receipts	1392400	Training	
Sale of Assets	160000	Salaries	2082412
		Stipend/Food/Accommodation	4022379
		Operational Cost	1594553
		Other Program Expenses	1136510
		Capital Expenses	6732123
		Purchase of investments - FD	67680299
		Loans/Advances	18837200
		Early Intervention Centre	395251
		Research & Documentation	3442741
		<b>Total Payments</b>	<b>151930124</b>
		Closing cash and bank balance	<b>3902686</b>
<b>Total Receipts</b>	<b>155832809</b>	<b>Total</b>	<b>155832809</b>

Income & Expenditure Statement			
Income in Rs for the year ended on	31-03-2023	Expenditure for the year ended on	31-03-2023
		Opening Stock Medicine	1710839
Earned / Self generated income	13442610	Curative Care	977201
Donations from Indian Sources	12140613	Hospital Operations	12318655
Grants from Indian Sources	4865153	Training	8062500
Donations from International Sources	5341082	Administration	1614231
Grants from International Sources	14200883	Personal Costs	13289133
Other Income	3344558	Community Health Program	9730545
Closing stock of Medicine	1281501	Support Services	3770585
Excess of expenditure over Income	6814097	Research & Documentation	3408333
		Early Intervention Centre	429659
		Depreciation as per schedule	6118816
<b>Total Income</b>	<b>61430496</b>	<b>Total Expenditure</b>	<b>61430496</b>
<b>Excess of expenditure over Income</b>	<b>6814097</b>	<b>Transfer to Healthcare/Society Fund</b>	<b>1029687</b>

Balance Sheet	
Assets as on	March 2023
Fixed Assets	159320686
Investments	72381803
Loans and advances	26126374
Closing stock Medicine	1281501
Other current assets	2429006
Cash and Bank balances	3902686
<b>Total Assets</b>	<b>265442056</b>
Liabilities as on	March 2023
Society funds	154706847
General fund (unrestricted fund)	7855478
Corpus fund	16420403
Restricted / Earmarked funds	9402972
Current Liabilities and provisions	77056356
<b>Total Liabilities</b>	<b>265442056</b>

*Thank  
You*

## Contact Us



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