

# Annual report 2016-17



**ASHADEEP**  
*A Mental Health Society*



# ASHADEEP

**A Mental Health Society**

**Registered office:** Piya Apartments, Kanaklata Path, Lachitnagar, Guwahati-781007, Assam, India

**Phone:** 0361-2456837

**Email:** societyashadeep@yahoo.com

**Website:** www.ashadeepindia.org

- *Registered under Societies Registration Act No. **RS/KAM/240/C/385 of 1996-1997***
- *Registered under Foreign Contribution Regulation Act No. **020780056***
- *Registered under National Trust No. **AASH16515908695 dated 30/11/2016***
- *Accredited Member of Credibility Alliance*
- ***Donations exempted from Income tax Under Sections 12(A) & 80(G) of IT Act 1961***

## Contact Persons

1. MUKUL CHANDRA GOSWAMI, Secretary, Ph : +919435043308
2. DR. ANJANA GOSWAMI, Director, Ph : +919864077861

## Vision & Mission

*"Our vision is to achieve a life of better quality for persons with mental disorders and their families."*

*"Our mission is to initiate and strengthen Mental Health Interventions in the North Eastern states of India."*

## Name and Address of Bankers

1. State Bank of India, West Guwahati Branch, Bharalumukh, Guwahati
2. ICICI Bank, Bhangagarh, Guwahati
3. Axis Bank, Chibber House, G.S. Road, Guwahati
4. IDBI Bank Ltd., G.S. Road, Guwahati
5. Yes Bank, G.S Road, Ulubari, Guwahati
6. HDFC Bank, Beltola, Guwahati

## Name and Address of Auditor

### D. Purkayastha & Company

Police Bazar,  
Shillong – 793001, Meghalaya

## Name and Address of Internal Auditor

### Dhawan Pandey & Associates

101, Shivam Apartment, Opposite PIBCO Building  
Rukmini Gaon, Guwahati – 781022, Assam

# *From the Secretary's Desk*



The period from 2005 to the present has been the time when the pace of growth of Ashadeep's work was remarkable. Our work in addressing the needs of the homeless population with mental health problems and also our outreach initiatives in addressing the needs of the population in districts where mental health interventions were not available, has created a definite change in the mental health scenario of Assam. This was possible, primarily due to the holistic support from the Tata Trusts, Mumbai. But like all good things, this very valuable support ended in June'2017. I would like to place on record, Ashadeep's gratitude to the Tata Trusts for enabling us to help in creating change in the community.

On the other hand, the support received through 'Give India' has been consistent and the quantum is also gradually increasing. This support is not in project mode, so in our kind of work in dealing with people who would require help for longer periods, this kind of sponsorship is very useful.

The Hans Foundation, New Delhi, our major funder in the work with 'homeless men with mental disorders', has also contributed in developing vegetable farming and allied agricultural activity at our campus in Bamunigaon. This support would help us in becoming self sustaining in the future.

On the program front, we are excited by the progress shown in the functional levels of the long stay residents of Navachetana and Udayan projects for the homeless population. The independent living concept in mainstream 'shared homes' in both urban and rural settings has been initiated with technical and financial support from the Banyan, Chennai and GCC, Canada.

All our achievements have been made possible by the dedication and hard work put forth by each staff member and encouraging involvement of the members of Ashadeep's executive committee. I also extend thanks and gratitude to all our donors and well wishers who relentlessly supported us in our endeavor.

Guwahati  
7 September 2017

**Mukul Chandra Goswami**  
*Secretary*

**EXECUTIVE COMMITTEE MEMBERS w.e.f. 06/11/2016**

Sl	Name& Designation	Occupation	Address
1	Shri Anjan Bardoloye President	Retired Assam Government official	R.G. Baruah Road, Near Assam State Zoo, Guwahati Ph:9435304306
2	Shri Mukul Ch. Goswami Secretary	Retired Bank Employee	4th Floor In-Built Residency 9 Monalisa Path, Mother Teresa Road, Guwahati –781024 Ph: 9435043308
3	Shri Vijoy Patir Treasurer	Business	Near Anganbari, West Silpukhuri Road, Guwahati – 781003. Ph: 9864091783
4	Shri Bhaskar Barua Member	Retired Government official	House No. 3, 2 <sup>nd</sup> By Lane, S.K. Baruah Road, Rukmini Nagar, Guwahati – 781006. Ph: 9435011862
5	Shri Ronojoy Sen Member	Consultant Architect	4 <sup>th</sup> By Lane, Tarun Nagar, Guwahati-7. Ph: 9435107827
6	Shri Ashok Kumar Jhuria Member	Business	Garima Palace, H.B. Road, Kamarpatty, Guwahati – 781001 Ph : 0361-2514332
7	Shri Ajit Narayan Dev Kachari Member	Retired Central Government official	Sixth Mile, G.S. Road, Guwahati Ph:9435708864
8	Smt. Manjusri Baruah Member	Retired College Teacher	H.No. 30, Sanyogi By Lane, Bishnu Rabha Path, Guwahati Ph:9864038692

**EXECUTIVE COMMITTEE MEETINGS IN 2016-17**

Sl. No.	Meetings Held on	Members present
1	18/06/2016	5
2	20/09/2016	5
3	17/12/2016	6

## Major Grants received during 2016-17

Sl No	Agency	Purpose	Amount in ₹
1	Tata Trusts, Mumbai through Parivartan Trust, Satara	For Community Mental Health Programme at Boko, Kamrup(rural) district for an extended period of 6 months	10,12,080/-
2	The Hans Foundation, New Delhi	For Udayan – Rehabilitation home for homeless men with mental illness	48,95,007/-
3	Social Welfare Department, Government of Assam	For Rehabilitation home for homeless women with mental illness	22,33,770/-
4	Sitaram Jindal Trust, New Delhi	Towards General Fund	25,000/-
5	Grant from HDFC Bank through GiveIndia	For 'Navachetana' - home for rehabilitation of Homeless Women with Mental Illness for the period April to September 2017	14,30,199/-
6	Give India, Mumbai	Towards Rehabilitation expenses at Day Care Centre, General expenses, Corpus Fund, Food & Medicine Expenses of Navachetana residents and Ashadeep Shop	14,73,448/-
7	Samdasani Foundation, Hongkong	Towards General Fund	10,000/-
8	Donation from World Bank Staff Members	Towards General Fund	87,037/-
9	Milaap Social Ventures India (Non-FCRA & FCRA)	Towards General Fund	53,231/-
10	Donation from IAS Officers' Wives Association, Guwahati	Towards General Fund	51,000/-



## Overall Progress and Results Achieved in 2016-2017

Sl. No.	Project / Activity	Number of Beneficiaries in 2016-17	Progressive Total upto 31 <sup>st</sup> March, 2017	Supported by
1	<b>Day Rehabilitation Centre, Guwahati</b>	86	343	<ul style="list-style-type: none"> <li>• Self generated</li> <li>• Part sponsorship by Give India</li> </ul>
2	<b>Navachetana – Rehabilitation of Homeless women with mental illness, Guwahati &amp; Bamunigaon</b> Total admissions 38 Re-integrated with families 35	38 35	633 531	<ul style="list-style-type: none"> <li>• The Tata Trusts, Mumbai</li> <li>• Partly by Give India</li> <li>• Partly by Social Welfare Deptt, Govt. of Assam</li> </ul>
3	<b>Udayan Home for Rehabilitation of homeless Men with mental illness</b> Number of men admitted Number of men reintegrated	37 38	133 99	<ul style="list-style-type: none"> <li>• The Hans Foundation, New Delhi</li> <li>• Partly by Give India</li> </ul>
4	<b>Free Psychiatric Outdoor Clinic (OPD), Guwahati</b> New Cases Registered	78	1152	The Tata Trusts, Mumbai
5	<b>Resource Centre</b> Number of Interns who attended the facilities of Ashadeep		135	
6	<b>Community Mental Health Programme</b> Number of Patients Enrolled Number of Blocks Covered Number of Districts Covered Total Population covered		1906 3 3 3.26 lakhs	<ul style="list-style-type: none"> <li>• The Tata Trusts, Mumbai</li> </ul>
7	<b>'Home Again' – Shared Housing</b> Number of homes created Total residents		6 30	<ul style="list-style-type: none"> <li>• Grand Challenge Canada through The Banyan, Chennai</li> </ul>

## Projects / programmes

### DAY REHABILITATION CENTRE for persons with mental disorders

Ashadeep in its 21<sup>st</sup> year, has been continuing its journey in the rehabilitation of children and adults with developmental disability and associated disorder and persons recovering from mental illness. Its regular activities like special education, vocational therapy, music and yoga therapy along with special focus on sports activities through Special Olympics Bharat has transformed the lives of more than 300 children and adults till now. Meanwhile Ashadeep with its vast experience has instrumented some innovative methods of rehabilitation like job oriented data entry program for intellectually disabled adult community of Assam, inclusive program such as 'computer learning for all' where the centre's students, their parents along with students from regular schools learn computer together, unified sports event and unified painting events. Such approaches have helped to pave a way for a unified society. The Vocational Unit attached to this facility has provided livelihood opportunities to a number of women recovered from mental illness.

Through these years, some inspiring cases has emerged at the centre and has been rightly termed as '*success stories of the centre*'. The story of Jayanta, who was the first student of the centre is worth mentioning. Being diagnosed with moderate retardation with speech impairment, Jayanta was admitted at the centre at the age of eight years. He was very restless, weak and could not even hold a pencil during the initial years. With proper training and care he started to develop communication and social skills. He also learned to take care of himself. Jayanta had a natural inclination towards music and the tabla. Accordingly he was trained in both the skills. Gradually he developed the unique ability to memorize any song played to him within minutes thus enhancing his singing ability. Currently, Jayanta is the singing star of the centre, in fact he has shown his talent in many cultural shows and local level competitions. His solo and duet performances were also telecasted in Doordarshan and local TV channels. He had also competed in Sanskrit Sloka competitions, competing with normal children. His entire family who had supported him in every step

is happy and satisfied with Jayanta. Jayanta in his own way has created a name and fame for himself and has become a source of inspiration for many individuals and families like him- 'A boy who could not speak nor stand can now sing joyfully in front of 100 of audiences.' !!!!

Another truly inspiring story is that of Rohan Ho who became a part of Ashadeep Day Rehabilitation Centre in 2012 at the age of 12 years. Rohan was diagnosed with Moderate Intellectual Disability with Attention Deficit Hyperactive Disorder. Though his self-help skills were moderate, his speech was highly limited. He was able to utter one or two sounds but couldn't continue further, and neither could he initiate conversations, Rohan's all-round behavioral enhancement was focused, and with continual assessment and planning, focused objectives were set and worked upon. It was seen that Rohan was a born sports man and was addicted to it. In fact, his behavioral problems were reduced to a great extent through sports. His journey in the field of competitive sports started with his inclusion in Special Olympics Bharat where he was given training in various sports to further enhance his skills. From that point he had won numerous medals in state and national level. Recently his talent was noticed by everyone at Special Olympics's National Football championship where he had taken his team Assam to first position by striking some key goals.



Rohan Ho, gold medal winner, World Winter Games 2017 held in Austria being felicitated by Hon'ble CM of Assam Shri Sarbananda Sonowal



However with so much talent and dreams Rohan was a victim of abuse and stigma from the society. The turning point came when Rohan was a part of Indian subcontinent in World Winter Games 2017 of Special Olympics at Austria. On 25<sup>th</sup> March 2017, he along with his team won a gold medal in Floor Ball for India by defeating China. Now, Rohan with his gold medal has become an inspiration for individuals like him thus keeping the candle of hope burning for him, his parents and also for Ashadeep.

Similar is the story of Supriya Sudha Khound, a national awardee as a dancer from The President of India under the category of "Outstanding creative person with Disability". With constant support from her father and Ashadeep, Supriya had broken the misconception and myth about disability. Being a motherless child Supriya had to face extra challenges in every step of her life. However her passion for dance had fuelled her ability to do something extraordinary !!

Ashadeep Day Rehabilitation as an organization itself has achieved some milestones like being one of the few centers of North East India with a full fledged vocational unit to cater to the adults with intellectually disability and mental illness. The centre has students ranging from the age group of 5 years to 60+ years. For students like Dhiraj, Souvik, Chandana and Mitali, Ashadeep has become an integral part of their day to day lives. Moreover, six students viz, Rinku Kalita, Kaushik Borkotoky, Rohan Sharma, Pronoy, Devdeep and Rishi are employed in different avenues including Ashadeep. Programme like Young Athletes program running in 5 districts of Assam was implemented for the first time in North East by Ashadeep in collaboration with Special Olympics Bharat in the year 2016. The program caters to young children with Intellectual Disability within the age group of 2-7 years. It aims to develop young children with disability in sports through fun games. This program has also included regular student to add the essence of unified theme. The newly formed family health forum by the parents fraternity of Ashadeep is designed to engage and support families of those with Intellectual disability and offer an environment where parents can gain direct access to health information and resources. Moreover regular counseling and caregivers training are given to the parents of the centre. With

more than two decades of working in the disability sector Ashadeep Day Rehabilitation Centre has tried to include all the stakeholders involved for the development of children and adults with intellectual disability. In addition some of the key event and achievements of Ashadeep Day Rehabilitation centre are :

- The international Yoga Day on 21<sup>st</sup> June was celebrated with full fervor and enthusiasm at Ashadeep Day Rehabilitation Centre, Japorigog, Guwahati. The program was conducted with a unified theme, where Ashadeep's Students and regular students from 9 different educational institutions viz, Handique Girls College, Guwahati, Tezpur University, Tata Institute of Social Science (TISS), Guwahati, Amity University, New Delhi, Miranda House, New Delhi, Indraprastha College, New Delhi, Pragjyotish College, Guwahati, NERIM, Guwahati and Sikkim Manipal University took part. The Yoga sessions were conducted by renowned Yoga experts and volunteers of Ashadeep viz. Mr. Manas Kalita and Ms. Alice Banting in the presence of 200 participants.
- Students took part in various events such as Drama Festival organized by Seagull Guwahati, Talk Shows in local TV Channels, Special Olympics' coaching camps and many more.
- On 15<sup>th</sup> August 2016, the Indian oil Corporation Guwahati Refinery donated a School Bus to Ashadeep. The students of the centre showed their appreciation by performing a patriotic dance item in a function organised by Guwahati Refinery to mark the celebration of Independence Day.
- On 10<sup>th</sup> September 2016, Health & nutrition workshop was held at Vivekananda Kendra organised by the Family Forum of Ashadeep in collaboration with UNICEF and Lions Club. The event highlighted the Health & Nutrition aspects for Children With Special Needs (CWSN). The Workshop was facilitated by Dr. Sameer Pawar, Nutrition Specialist, UNICEF, Ms. Manisha Choudhury, UNICEF Supported Consulted and Dr. Shantonu Kr. Das, CEO Project Child. Around 100 parents of various institutes dealing with disability participated in the program.
- From 16<sup>th</sup> -19<sup>th</sup> November 2016, Special Olympics



Bharat, Assam Chapter in Collaboration with Ashadeep organized a National Football Championship for the intellectually disabled persons for the first time in Assam. A total of 17 States with 200 Special Athletes from all over India including Assam participated in the program. The competitions were conducted by the Volunteers from Assam Police, sports personnel from Department of Sports of Assam

and Coaches & Volunteers of Special Olympics Bharat Assam Chapter. The home team Assam won the championship.

- Throughout the year, the students of the centre celebrated various festivals like Bihu, Christmas, Republic Day and Saraswati puja with full gaiety along with some of the celebrities from the music and film world.



*Sports Day 2016 at Day Rehabilitation Centre Celebration of international Yoga Day 2016 at Day Rehabilitation Centre*



*Students presenting a patriotic dance program at Music session with the pre-primary group in Guwahati Refinery ground on Independence Day the Day Rehabilitation Centre*

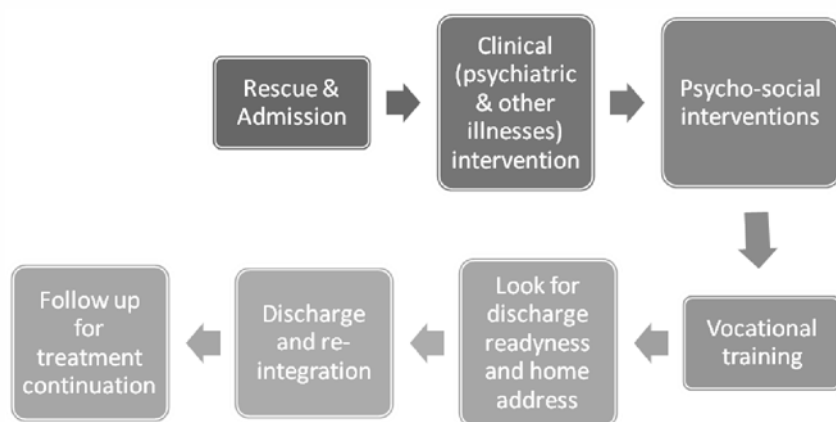


## NAVACHETANA – Residential Rehabilitation program for homeless women with mental illnesses.

The 'Navachetana' homes, initiated in 2005 with an aim, not only to provide a shelter to homeless mentally ill women wandering on the streets and eating from garbage, but also to provide them with holistic care that will encourage them towards recovery. Our main objective for the women who until recently had no place to live in and nothing to call their own, is to rehabilitate and re-integrate them back into the society. 626 women have been rescued/admitted till March 2017 and out of them, 576 women have been re-integrated with their family or other shelter homes.

**Total number of women intervened during the year = 86 (new admission 38)**

**Flow diagram of Rehabilitation Process -**



### \* Admission by Police Stations

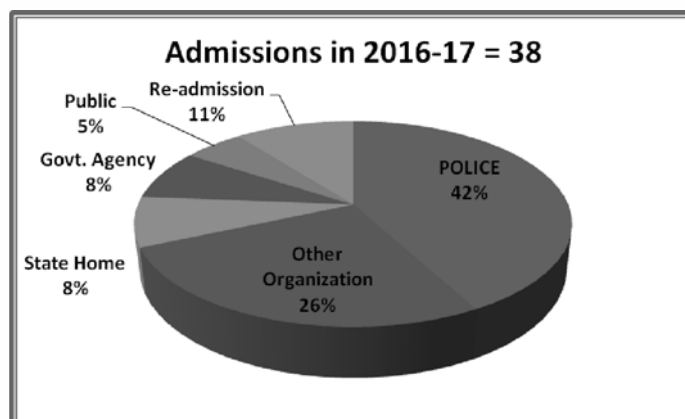
Basistha	3
Dispur	1
Gorchuk	2
Latacil	1
Chandmari	2
Chaygaon	1
Simlaguri	1
Basbari	1
Balapara	1
Simla	1
Boko	1
Jallandhar, Punjab	1

### RESCUE & ADMISSION

**Involvement of different stakeholders for Admission of women**

POLICE*	Other Organization	State Home	Govt. Agency	Public	Re-admission	Admissions in 2016-17	Overall Admissions
16	10	3	3	2	4	38	633

It is worth mentioning here that not a single admission was carried out by Ashadeep which indicates the active role of various stakeholders especially the Police of the city especially the Police, towards the rehabilitation of mentally ill homeless population.



## RE-INTEGRATION

35 women had been discharged / re-integrated during the year. The places of re-integration are as follows:

Assam	23
Bihar	3
Rajasthan	2
Uttar Pradesh	1
West Bengal	2
Jharkhand	1
Absconded	3

The interventions towards the homeless women with mental illness were carried out from the two residential facilities viz. Navachetana (Transit Care) located at Bilpaar Road, Rehabari, Guwahati and Navachetana (Rehab) located at P.L. Home Campus, Bamunigaon, near Boko. From January 2017, due to fund and other constraints, the facility located at Rehabari within Guwahati city has become non-operational and we are presently maintaining just one Rehabilitation home at Bamunigaon with a capacity of 30 beds. The six independent homes created under the new 'Home Again' program caters to another 30 residents.

## CASE STUDY – Bodhuni, Basia, Soniya

*Soniya, aged 25 years, was rescued by the Noonmati police on 27<sup>th</sup> August, 2015 from Birkuchi Tiniali when she was abnormally loitering around the area, and couldn't give any substantial or meaningful information about herself. Observing the irregularity in her behavior and speech, the police admitted her to Navachetana (Transit Care) with chief complaints of being ill kempt, disoriented, impaired judgment and social skills, and active auditory hallucinations.*

*Immediately after admission, her hygiene and personal grooming was ensured. Given that her self-help skills were intact, with initial guidance she could take care of her hygiene habits without supervision. Though her capacities of attention and concentration were satisfactory, she found difficulty in executing the information provided in a task- and would often be found day dreaming or disoriented. She was therefore engaged in play activities that required attending and executing information and was also entertaining so that she doesn't lose interest. In the beginning, Soniya had no insight into her illness, and her memory of past illnesses was also faint. Over the course of insight development sessions whereby she gradually proceeded from Grade I to IV, she began to understand her symptoms, the reasons behind medication, and the importance of continuing the same.*

*After about six months, Soniya was shifted to Navachetana (Rehab) Home at Bamunigaon for engagement in vocational activities. She was trained in jute braiding and doormat stitching but was mostly interested in doing household chores. With continuous incentives for behavior engagement, she*

*came forward to willingly participate in vocational activities and undertook them meticulously.*

*Soniya's home was traced to be in a small village in Aurangabad, Bihar, and as time passed by she continually expressed her willingness to go back home to her daughter. Once a recommendation for discharge was received from the psychiatrist and her psychosocial status was assessed to be adequately functional, her discharge plan was initiated and eventually the journey to reintegrate her commenced on 18<sup>th</sup> of April, 2016. It wasn't however the first time that Soniya was being brought home by an organization, it had happened twice already. The illness had started after her marriage due to repeated physical and mental harassment by her husband and in-laws. But due to their poor financial conditions and lack of resources in the remote area, they couldn't afford to seek any help.*

*Soniya is being followed up over phone by our Social Workers to ensure continuation of treatment to check relapses.*

*Bodhuni Gorai, aged about 25 years was a resident of 'Gold' - a Rehabilitation home for trafficked women. As per Gold's record, Bodhuni was rescued from Sitamari, Bihar by a local organization and resided in their home for more than one year. As she was found to be from Assam, she was shifted to 'Gold' and she stayed there for more than six months. During her stay at 'Gold', the staff members noticed her abnormal behavior but were not sure if those were signs of mental illness. Then, one day Bodhuni attempted to commit suicide by trying to jump from the terrace after having some heated arguments with*



a co-resident. Upon noticing such high risk behavior, she was immediately brought to Navachetana (Transit Care) and was given admission on 15/10/2016.

Bodhuni responded to the treatment very quickly and within two weeks she showed her willingness to go back to her family at Rajabari village, Simaluguri in Sivasagar district. During the counseling sessions, she informed that her parents died during her childhood and she was brought up by her maternal uncle. As she was able to take care of herself and was fully functional, Bodhuni was taken back to her uncle's family on 01/11/2016 who welcomed her with open arms.

**B**asia, aged about 60 years who was rescued from a city street of Guwahati in March 2005 is not as fortunate as Soniya and Bodhuni. She was roaming around with very dirty clothes and used to talk to herself and keeps calling 'Babua' (most probably her son). She speaks a Bhojpuri dialect and hallucinates constantly. Basia has been diagnosed as Schizophrenia and has been receiving treatment and rehabilitation interventions but her improvement is very poor. She has not been able to provide her home address and hence has been living in Navachetana (Rehab) for the past 11 years. She keeps herself busy in jute braiding. In February 2017, Basia has been shifted to 'Home Again' – shared housing facility, the new project of Ashadeep.

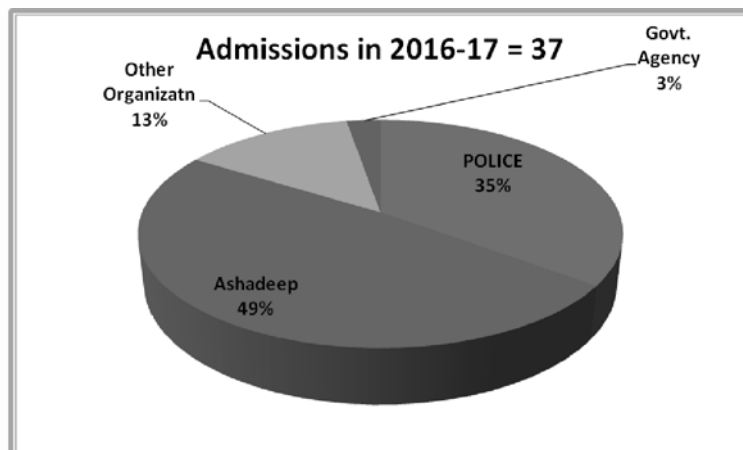
## UDAYAN – Residential rehabilitation program for homeless men with mental illnesses

'Udayan' - the 40 bedded Rehabilitation facility for homeless men with mental illness, located at the P L Home complex, Bamunigaon was initiated in 2013. This initiative based on the 'Navachetana' model developed by Ashadeep for homeless women with mental illness has been able to admit 133 men so far. Also similar to the women program 99 of the residents have been reintegrated back into the community, thus being able to re-unite 75% of the men admitted, with their families.

Presently 'The Hans Foundation', New Delhi is providing the major funding support for this initiative. The land and infrastructure development cost was provided by the Social Welfare department, Government of Assam.

### RESCUE and ADMISSION in the current year

POLICE*	Ashadeep	Other Organization	Govt. Agency	Admissions in 2016-17	Overall admissions
13	18	5	1	37	133



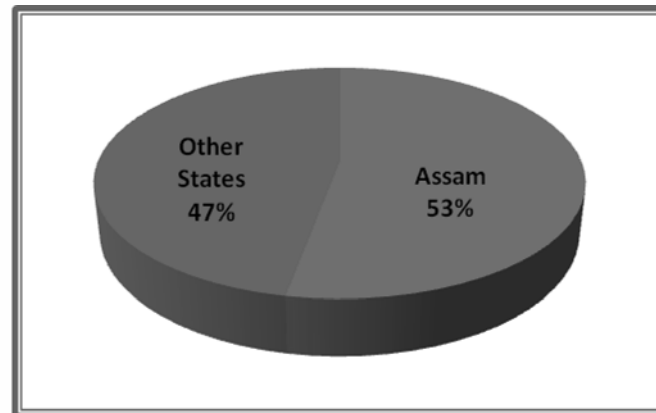
#### \* Admission by Police Stations

Basistha	1
Gorchuk	2
Paltan Bazar	1
Jalukbari	1
Noonmati	1
Pandu River P.S.	1
Gobardhan	1
Sarbhog	1
Sualkuchi	1
Baksa (Bashbari, Salbari, Jalah)	3

## RE-INTEGRATION

38 men had been discharged / re-integrated during the year. The places of re-integration are as follows:

Assam	18
Meghalaya	2
Bihar	3
Uttar Pradesh	1
West Bengal	4
Jharkhand	2
Maharashtra	3
Nepal	1
Absconded	3
Expired	1



## VEGETABLE / HORTICULTURE / LIVESTOCK FARMING AT BAMUNIGAON, BOKO

The Bamunigaon complex which accommodates the Navachetana, Udayan and three independent 'shared homes' has a vacant plot of land of about eight bighas, which provides enough space to undertake farming activities in a professional manner. Growing seasonal vegetables such as Okra, Brinjal, Chillies, Cabbage, Cauliflower, Spinach and other leafy vegetables are a regular practice at Udayan. This activity helps in engaging the recovered residents as part of vocational activity. The vegetables thus grown are consumed at the home itself. However, to supplement the vegetable expenses during a whole year, vegetable farming has been taken up in a more systematic and scientific way.

Plants of various fruits such as Guava, Mango, Jack

fruit, Banana, Papaya and some varieties of local fruits have been planted along the boundary of the entire campus. Dairy and Goat farming is also a part of this project

As most of the residents are from rural background, most of them take a lot of interest in the farming activities. These activities provide therapeutic values in the rehabilitation process of the residents and ensure early recovery. The residents engaged in these activities are paid an incentive which they keep as a saving for them to take back home.

The support for this initiative from the Hans Foundation will definitely help us to become self sustaining.





## Case Study of Bholu Mukhiya, 45 yrs, Diagnosis : Schizophrenia

*Bholu Mukhiya was found loitering in a suspicious manner in Udiyaguri Village of Baksa District, Assam. Local people suspected him to be a kidnapper, had beaten him injuring his head and handed him over to police. Police observed his abnormal behavior and a medical examination revealed that he is suffering from mental illness. He was then produced at Barpeta Court and a reception order was issued to admit him in Ashadeep's rehabilitation home for care, treatment and rehabilitation interventions. He was admitted at Udayan on 9<sup>th</sup> June 2016 with symptoms of self-neglect, suspiciousness, Irrelevant Speech and disorientation.*

*After admission at Udayan, Bholu Mukhiya was given a bath and a hair cut. This was followed by physical and psychiatric examination along with psychosocial assessments that helped in gathering more details about his mental status. Bholu Mukhiya was disoriented about the surrounding and his speech was not clear enough to understand. He functioned cognitively well, but was not interested in engaging in activities assigned to him. Due to language problem sometimes he had difficulties in coping with the other residents. Therefore, he was imparted with group therapy. He was also given some responsibilities of kitchen and gardening work and gradually he started*

*participating in the activities assigned to him under supervision of the staff members.*

*Simultaneously one-to-one counseling sessions were carried out and Psychological evaluation were done on a regular basis to understand his mental status. During counselling sessions he revealed his address and family details, and when his symptoms were under control his reintegration was planned. Eventually on 2<sup>nd</sup> November 2016 he was reintegrated with his family at Haripur in Sansari district of Nepal.*

*Bholu's family members informed that he had been suffering from mental illness for last 15 years. About 10 years back he was treated in Bihar for 2 years but he discontinued his medicines and his illness relapsed. He is a fisherman and his whole family members involve in fishing. Bholu was married and has 3 Sons and 3 daughters. He was missing from his home for last 7 years and his family was in search for him desperately. On many occasions they feared that he might have died, but did not give up hope. News of Bholu's home coming had spread across the village within minutes and the entire community gathered at his residence to welcome him. The family members too expressed their happiness at his return and consented to continue his treatment.*

## HOME AGAIN – Independent Shared Housing in the community for residents of Navachetana and Udayan.

### Location of the Homes

**Home 1 & 2: Bilpaar Road, Rehabari, Guwahati**

**Home 3: Karbi Naamghar Road, Japorigog, Guwahati**

**Home 4, 5 & 6 : P.L. Home Campus, Bamunigaon**

Ashadeep has been providing institutional care to homeless persons with mental illness for more than a decade. Although the recovered patients are taken back home to re-unite with their families, about 10% of the residents cannot be re-integrated for various reasons. Till now, such women and men were living under the institutional care in spite of recovering sufficiently and becoming functional. Since January 2017, Ashadeep initiated the 'shared Housing' program by doing away with the Navachetana (Rehab) facility and setting up 6 independent homes by paving way from the institutional pattern of rehabilitation to a more inclusive community setting. Each 'shared home' accommodating 5 residents together with a 'health worker', five for women and one for men, three each in rural and urban settings.

The residents in these homes do not have any restrictions in movement or interactions, they decide on what to eat, wear and many of them are employed in different settings. By the end of first five months, we have seen tremendous changes in the functional level of most of the residents. Both amongst those whose disability levels are higher and the more functional ones and also between those who seem to be long stay cases and the ones who would in all probability go home soon.

This project is a pilot study and Ashadeep is a local institutional care partner on the Project 'Home Again: shared housing with supportive services for homeless people with mental illness experiencing long term care needs' supported by funding from Grand Challenges Canada to The Banyan. Though the first review result is yet to come out, intermittent reports indicate the efficacy of the 'shared housing' concept. Economic independence is important for all people, more for those who are not with their families. Presently the different Ashadeep facilities - the Day Rehab centre, the urban and rural livelihood generation centres, the office, OPD all employ the home residents, a few are employed outside also.

#### Process:

- A baseline survey was conducted for the selected group of resident who was eligible for HA programme. (These groups includes: resident who have been in the institutional care for a long period of time, who's addresses can't be traced, unaccepted by the family members and who do not want to go back home and needs long term care).
- A survey was done with the community people, nearby houses of each shared housing to

understand their perception of mental illness and to make them aware about the concept of shared housing.

- Selection and shifting from institutional care to Home Again programme depend upon their choices and preferences.
- After being consented by them, they have been shifted to the Homes.
- Each home is occupied by 4-5 residents and one health care worker.
- Residents are imparted with medical and psycho social care which they used to receive during their stay in Navachetana/Udayan homes.

The major **outcomes** observed in these few months are

- Residents' interpersonal and social skills has developed and increased the level of functionality for example communication and work.
- They developed a good bonding among themselves (sister's relation) and also started visiting neighbours and maintain a good relation with the community people.
- Their psychological health and the quality of life is much better than before.
- They take part in household work and a few of them started cooking in the respective homes.
- A few residents who never go out of the campus has starting working outside.
- Some residents are employed internally and started earning.
- Out of 30 residents, two has been successfully reintegrated with family.



*Residents of Rehabari shared home visiting the The kitchen in a Bamunigaon 'sharedhome' Japorigog'shared home'*



Rural 'Shared Homes' in Bamunigaon

## Case Study - Shekharpran Goswami, Age 30 yrs, Diagnosis Schizophrenia

A group of public members from Nabin Nagar area visited Ashadeep Day Care Rehabilitation Centre, requesting for rescuing a homeless man who is been in there locality from last few days. Rescue team rushed to the spot and found Shekhar lying on the footpath covering with blankets. As our Social Workers were convinced that he is mentally ill, Shekhar was rescued with the help of the public and admitted at Udayan on 8<sup>th</sup> February 2016. Symptoms present at the time of rescue were Auditory hallucinations, suspiciousness, irrelevant speech, self smiling etc. Initially, he could not walk properly as he needs help, we thought that he may have some internal injuries. After completing the necessary investigations as advised by our Doctors, it was found that his inability to walk was due to his paranoid symptoms.

He responded to treatment very well and recovered from his symptoms very soon. Within weeks he became functional and started taking part in household activities. During the counseling sessions, Shekhar revealed that he lost both his parents when he was very young and he was brought up by his maternal uncle in Tezpur. He expressed his willingness to go back to his uncle's home but was apprehensive to do so. After a number of interactive sessions by Social Workers, he gained confidence to return home.

On 9<sup>th</sup> August 2016, Shekhar was reintegrated with his uncle's family. Initially, they were hesitating to take Shekhar back, but the Social Worker somehow managed to convince them.

After a month, Shekhar visited our Psychiatric Outdoor Clinic at Guwahati for follow-up. He informed that he came back to Guwahati after a few days of his reintegration and staying in a rented place in Guwahati and have joined a Consultative Agency as a Placement Advisor. Since then he was regularly attending Outdoor Clinic. After few months, he joined a Call Centre based in Guwahati, but he was unable to manage the night schedules and lost his job. After a month, he had to vacate his room, as he was unable to give the rent.

One morning he called us over phone, enquiring whether he can come and stay at Udayan as he had no place stay. Our Social Workers allowed him to come and on 5<sup>th</sup> April 2017, Shekhar was re-admitted at Udayan. The Social Workers observed that Shekhar was showing signs of relapse and needed immediate intervention. After few days, as his symptoms were controlled, Shekhar was shifted to 'Home Again' - Shared Housing facility at Bamunigaon where the residents who have recovered are encouraged to live independently. Presently, Shekhar has become a prime member of his home; he is engaged in cooking meals for all the five members of the Home. He is looking forward to get employed outside Ashadeep and live independently. He is encouraged to do so, but has been advised that he needs to get an employment first and till then he can continue to stay at Ashadeep's home.



## COMMUNITY MENTAL HEALTH PROGRAMME (CMHP) in Sipajhar, Morigaon and Boko through the Government primary health services

### *Fighting Every Odd, Evening Out every Pain – a case study from Morigaon CMHP*

*Sujit Deb (name changed) was hale and hearty almost 20-25 years ago, and engaged himself in simple trading activities. Though he couldn't climb the ladder of formal education beyond 10<sup>th</sup> grade, he earned sustainably enough through his business and life was uncomplicated. But the serenity didn't sustain long enough and he was soon hit and robbed by dacoits at midnight while he was returning from another village. His friend managed to escape, but the dacoits didn't let him loose until they robbed him off of all that he had- including the stability of his mind. They had hit his head hard but nothing unexpected was seen in his behavior until then. Few months later when he traversed through that same road where he was robbed, he got extremely anxious and cried in panic. Situations never settled to normalcy after that. He would throw away things of the house, wander around in an apathetic mood, continuously mutter to self, hoard things that others have discarded and spend days and nights sleeplessly. Thinking that some evil spirits have cast their spell on him, his family members resorted to faith healing. But as they saw him deteriorating further, in 2003 his siblings came together and took him to LGBRIMH, Tezpur. In the meantime, someone suggested to his mother that if he could be married, maybe the illness would cure itself! Accordingly, Sujit was married to Parul Bala 16 years back, and as she reports, she knew nothing about his mental status.*

*On their first night, Sujit inappropriately danced around in the room naked.*

*A scared and traumatized Parul sat there, shocked at what life had suddenly come to.*

*Rest of the years continued with Parul's struggle with her in-laws' family whom she accused of deceiving her into the marriage, their refusal to let her go to her maternal home fearing she would not come back and in the*

#### Implemented in:

- i) Mayong block of Morigaon district : Partner NGO Morigaon Mahila Mehfil
- ii) Sipajhar block of Darrang district : Partner NGO SATRA
- iii) Boko block of Kamrup (Rural) district
  - Total population covered in the 3 blocks – 3.26 lakhs
  - Total patients intervened - 1956
  - Training imparted to :
    - Medical officers – 43
    - ASHAs Workers (Boko) – 170
    - Anganwadi Workers (Boko) – 307
    - Training given to ASHAs, Anganwadi workers, MPWs in Sipajhar & Mayong) -289
    - Caregivers (Sipajhar & Mayong) – 1369
  - Awareness meetings – 40 with total participants – 1431
  - Disability Certificates issued in Boko- 48
  - Restoration of patients to previous occupations (Boko) – 158
  - Livelihood support to recovered patients (Sipajhar & Mayong) – 175
  - Formation of Caregiver support groups – 6 in Morigaon (3 groups opened bank a/c), 12 in Sipajhar (2 groups opened bank a/c), 1 in Boko



midst, the fluctuating status of Sujit. His treatment was continued sometimes from LGBRIMH, and sometimes from GMCH, Guwahati. But due to inconsistency of medications and poor compliance, the symptoms have persisted. Over time the economic conditions took a toll, and due to his often unmanageable state that caused difficulties for other family members, they were separated out of the main household.

Parul stood as the head of her family, fighting through her husband's illness every day and raising two sons whom she hopes shall someday make everything seem worth it. Her elder son stays at her maternal home currently and she works as a cook at a local primary school and runs the family with whatever little she earns. After being enrolled with CMHP, her financial burden of continuing her husband's treatment has eased to great extents, and with supportive care from the field worker, Parul today has someone to share her emotional pain with. In order to enhance Sujit's behavioural activation, in the form of livelihood support, he was provided with ducks which he could look after and make profit out of selling their eggs. The same has been continuing successfully.

### **Light of the Dawn: Deba Kanta (name changed) - a case study from Sipajhar CMHP**

43 years old Deba Kanta was enrolled with CMHP Sipajhar after having suffered mental illness for almost 20 years with symptoms of excessive and irrelevant talking, sleeplessness, inappropriate social behavior and increased irritability. The eldest among three siblings, Reba had no family history of psychiatric illness and for his parents; these symptoms were far beyond their idea of sickness and health.

In his early 20s when Deba was pursuing graduation, he fell for a woman in his neighborhood and as the love bloomed into commitment, they married one another and stepped into the realities of life. In the meantime Deba started teaching in a school and their conjugal life blessed them with a son. The happiness remained short-lived however. Deba's marriage suddenly hit a rough patch following some family issues and soon thereafter his wife started living in her maternal home with their son. The shock and pain of separation led Deba to spend hours continuously brooding over the situations, and he left his job. Eventually a range of psychiatric symptoms, as mentioned above, started showing up. His parents

sought faith healing initially, but seeing no drastic improvement, they took him to LGBRIMH, Tezpur. He continued medication for 2 years and seeing substantial improvement, discontinued the drugs. For the next 10 years, he remained off medications, with the symptoms infrequently resurfacing and sometimes being difficult to manage.

As the CMHP intervention started, the accessibility of doctors and continuous availability and intake of medicines soon helped raising the lost spirits in Deba Kanta. Through awareness programmes in the villages and caregiver's training, Deba's family and immediate society was taken into the team of providing him care through all possible magnitude- medically, socially and emotionally. His mother, brother and sister-in-law provide him with constant care and share the responsibilities accordingly. However, a sustainable intervention plan also needed behavioral activation and financial stability, and for the same, Deba was provided with desks, benches, and blackboard and chalks so that he could tutor students at home and earns a decent and respectful living. For Deba, this is another beginning. Pain, hope and happiness are a share of everyone's tale- some fight battles for life; some however see the light of the dawn.

### **When there is a will, there is a way - a case study from Boko CMHP (called as JMSP- Jan Man Swasthya Programme)**

Mother of a patient, Badeng Sangm (name changed), male, aged 22 years from village Gohalkona bordering Meghalaya had visited the Psychiatric OPD at Boko CHC/PHC. She looked very hesitant as she had come alone without the patient. It was impossible for the mother to bring her son to the OPD who was a severe and chronic patient of Schizophrenia. The doctor prescribed medicines considering the symptoms narrated by the mother and was advised to come for review after two weeks. As per the project norms, the Community Health Worker (CHW) assigned for that area made a home visit to Badeng and found that he locks himself in a room for days together without any food and does not maintain hygiene. The mother came back to the OPD after two weeks and reported that her son did not take a single tablet. Our Psychiatrist then prescribed an injection and instructed the CMHP team to give the injection (if required, forcibly) at home. Accordingly the team took a para-medical

*staff of Ashadeep's Rehabilitation home for homeless men with mental illness located at Bamunigaon to Badeng's house. They did not face much of a resistance from Badeng while giving him the injection. The mother managed to give the second injection after one month. During this period, the CHWs visited them on a regular basis and imparted psycho-education to the mother. She was explained in detail, the nature of her son's illness, importance of medications and the coping skills. On the third month, to every one's surprise, Badeng came to the OPD with his mother very well groomed and dressed. The mother told the JMSP team that they have done miracle with Badeng—she had lost all hopes that her son will come out of his room one day and behave like a human being. The doctor started prescribing medicines in place of injections thereafter. The mother is so grateful to the Psychiatrist and the JMS Programme that she did not have words to express and had tears in her eyes. Badeng is attending OPD regularly as per his follow up advices and is adhering to the treatment very well. He now helps his mother by looking after the cows at home, goes to the forest for plucking pine apples and oranges during its season and most importantly takes the medicines by himself on time. As a mark of gratitude to the Psychiatrist and the JMSP team, Badeng's mother always brings something or the other with her in the follow up visits like homemade snacks, pine apple, orange etc.*

The project term of Tata Trusts for the Community Mental Health Programmes got over in December 2016. JMSP in the Boko block was extended for six months upto June 2017 as a phase out period while the CMHP at Sipajhar and Mayong had been concluded. This Pilot programme of Community Mental Health has been very successful in terms of community involvement, awareness generation, change in community attitude towards the mentally ill. Though the time span was very short (about three years), the programme could change the health seeking behavior of the communities in all the blocks. Following are some impacts of Community Mental Health Programme:

- Association with the Health and Family Welfare Department has been very encouraging while implementing this pilot programme. The clinical interventions were carried out from government PHC and CHCs on specific days. Official orders

from the Joint Director of Health Services were obtained for this purpose.

**The community mental health programme of Ashadeep focusing on early interventions has commenced well within a short span of time. The survey and the interviews held with important stakeholders has been a successful endeavour arriving at significant findings on the knowledge, attitude and practice of the community with regard to mental illness, and also arriving at a conclusion of what changes have been implemented after the baseline phase.**

**- Excerpt from Endline Survey Report by Assam Don Bosco University, Guwahati**

- In the Mayong block of Morigaon District (DMHP), the Psychiatrist from Morigaon Civil Hospital had made visits at the NakholaPHC on specific days for clinical interventions.
- Government Supply of psychotropic medicines had been initiated at the PHC/CHC in all the three blocks. Though the supply was erratic and the compositions limited, but the quantity provided had been good enough.
- By the end of the project term, Psychiatrist had been posted in Sipajhar block giving a great relief of the patients. This has been an outcome of the advocacy by SATRA (our partner NGO at Sipajhar for implementing the project) with the district health authorities. Similarly, one Psychiatrist has been deputed at Boko CHC/PHC w.e.f. January 2017 who will visit once in every month.
- In Mayong, the patients have been diverted to Morigaon Civil Hospital for clinical intervention as well as for medicines which has been made available in abundance by the Government.
- The Care Givers group formed in Sipajhar and Mayong blocks along with the partner NGOs



are acting as pressure groups with the Health Departments for regular supply of Psychotropic medicines at the PHC/CHC.

- The programme has helped in creating human resource on mental health in all the blocks. The Field Workers engaged from the local communities (6 in Morigaon, 11 in Sipajhar and 8 in Boko) had received extensive trainings on psycho education, counseling, relapse prevention and treatment adherence. Apart from them, the ASHA and Anganwadi workers, MPWs, caregivers also received training on identification of illness, the need of psychiatric treatment, early warning signs and about the referral services. Workshops were conducted in Schools and Colleges for maintaining positive mental health amongst student communities.

Status at each block after completion of the programme activity :-

**Sipajhar** - Psychiatrist had been posted in the Government CHC at Sipajhar SATRA, our partner NGO have been arranging medicines and livelihood options for those enrolled in the program through private donations and CSR support..

**Mayong** - Patients are attending Morigaon Civil Hospital for clinical intervention as well as for medicines. Our partner NGO Morigaon Mahila Mehfil is now associated with District Mental Health Programme of the Government to carry out awareness campaigns and other community engagements programmes.

**Boko**-The Government Health Services has taken stock of the situation after the completion of Ashadeep's project period and deputed a Psychiatrist from the District Headquarters to attend to the patients at Boko, CHC once a month. In addition, supply of Psychiatric medicines has also been assured.

## **FREE PSYCHIATRIC OUTDOOR CLINIC (OPD) at Ulubari, Guwahati**

Providing access to mental health care since 2006 for marginalized population has been the prime objective of the Free Psychiatric Outdoor Clinic

located at Ulubari, near the Guwahati Railway Station. Apart from serving the needs of lower economic groups and mentally ill residents of different shelter homes, this clinic is providing follow up services to the Navachetana / Udayan residents who have been reintegrated with their families.

During 2016-17, 78 new patients were registered in the OPD and 687 reviews were done for old patients. 113 ex-residents of Navachetana continued their treatment through the OPD during the year.

## **MENTAL HEALTH RESOURCE CENTRE**

In the past few years, the different facilities of Ashadeep has become a centre of learning for the students pursuing various courses towards a career in the development sector. Mostly, the students come here for their Internship programmes as part of their curriculum. This year the internship program at Ashadeep had registered 135 students from colleges and universities all over India viz. Assam Don Bosco University (Azara), Banyan Academy of Leadership in Mental Health (Chennai), Delhi University, Bangalore University, Tezpur Central University, Dibrugarh University, Assam University (Silchar), NEF College (Guwahati), NERIM (Guwahati), IGNOU, Composite Regional Centre (Guwahati), USTM (Meghalaya), Tata Institute of Social Science (Guwahati and Mumbai), Cotton College State University (Guwahati), Guwahati University, Handique Girl's College (Guwahati), Assam Down Town University (Guwahati), Army Nursing Institute (Guwahati), IIT Kerala, Amity University (Noida), Calcutta University (Kolkata) and many more.

During 2016-17 some major contributions made by the interns :

- Conducted counseling and case studies on the residents of Udayan, Navachetana and Group Homes and the students of Ashadeep Day Rehabilitation Centre.
- Conducted survey and data collection for Home Again Project.
- Beautification of all the Centres of Ashadeep.
- Assisted the vocational team during exhibitions, sale events on various occasions.

- Conducted awareness programmes on Mental Health Issues under Youth Activation Program in collaboration with Special Olympics Bharat.
- Conducted sessions on Sex Education and dance and drama and sports activities for the students of Ashadeep Day Rehabilitation Centre.
- Some of the groups organized cultural evenings and recreational activities for the residents of Navachetana and Udayan homes.

## **‘ABILITY’ – THE VOCATIONAL UNIT**

Going against the trend of de-institutionalization of the treatment of persons with major mental illnesses – our experience of the concept of the ‘Sheltered Workshop’ in providing gainful

occupational activity has been very positive. The Ashadeep Shop is the sale outlet for various articles produced in the Sheltered Workshop of Ashadeep as well as the Navachetana & Udayan Homes. Articles produced and sold at this Shop are - block printed mekhelachadar sets, seminar file covers, jute handicraft items, handloom dress material, various utility bags, decorative candles etc. Thus, this unit of Ashadeep is an amalgamation of all such livelihood generating activities for individuals recovering from various mental disorders.

The sale value of various products during the year was ₹3,95,990/-. The major part of the sale had been Seminar File Covers to Administrative Staff College, NIPCCD, O/o Labour Commissioner and ADP College Nagaon.



Glass Gel candle

Dupatta

Big File Cover

Sling Bag



Mini File Cover

Money Purse

Tiffin bag



Silk Sling Bag

Dress Material

Patchwork Doormat

Star Gel Candle



# FINANCIAL INFORMATION

## Abridged Balance Sheet As On 31<sup>st</sup> March 2017

Assets	Current Financial year		Previous Financial year	
	AMOUNT	%	AMOUNT	%
Fixed Assets	255391.11	2%	309154.11	2%
Investment	3783180.96	34%	3861450.00	30%
Deposits and Advances	244939.92	2%	204142.00	2%
Current Assets	6738807.20	61%	8305683.49	66%
Income and Expenditure A/c Balance				
<b>Total</b>	<b>11022319.19</b>	<b>100%</b>	<b>12680429.60</b>	<b>100%</b>
Liabilities				
Corpus/Endowment Funds(s)	7680670.34	70%	5694710.70	45%
Capital Reserve		0%		0%
Earmarked Funds	2018578.55	18%	6290804.90	50%
Loans / Borrowings		0%		0%
Current liabilities and provisions	1323070.30	12%	694914.00	5%
<b>Total</b>	<b>11022319.19</b>	<b>100%</b>	<b>12680429.60</b>	<b>100%</b>

## Abridged Income and Expenditure Account As On 31<sup>st</sup> March 2017

Particulars	Current Financial year		Previous Financial year	
	AMOUNT	%	AMOUNT	%
<b>Income</b>				
Self generated funds	1610316.13	10%	1604278.09	9%
Indian sources	10793970.80	64%	14852904.72	80%
International sources	4373531.74	26%	2087063.88	11%
<b>Total</b>	<b>16777818.67</b>	<b>100%</b>	<b>18544246.69</b>	<b>100%</b>
<b>Expenditure</b>				
Programme expenditure	16318274.62	98%	17277457.53	96%
Management expenditure	351089.92	2%	645111.62	4%
Other expenditure	66894.81	0%	71403.09	0%
<b>Total</b>	<b>16736259.35</b>	<b>100%</b>	<b>17993972.24</b>	<b>100%</b>
<b>Surplus/ (Deficit)</b>	<b>41559.32</b>		<b>550274.45</b>	

## Abridged Receipt and Payments Account for the year ended 31<sup>st</sup> March 2017

Receipts	Current Financial year		Previous Financial year	
	AMOUNT	%	AMOUNT	%
Opening Balance : Cash and Bank	8145045.92	32%	3742614.04	12.74%
Self generated funds	1378450.00	5.34%	1734311.30	5.90%
Indian sources	10635508.66	41.22%	21117195.75	71.89%
International sources	5164336.94	20.02%	2317135.88	7.89%
Secured loans		0.00%		0.00%
Other receipts	477282.50	1.85%	465007.00	1.58%
<b>Total</b>	<b>25800624.02</b>	<b>100%</b>	<b>29376263.97</b>	<b>100%</b>
<b>Payments</b>				
Programme Expenditure	15217052.50	58.98%	16180269.50	55.08%
Management Expenditure	503654.92	1.95%	459156.55	1.56%
Other Expenditure	25585.00	0.10%	53532.00	0.18%
Fixed Assets purchased	719987.00	2.79%	279998.00	0.95%
Loan repaid		0.00%		0.00%
Investments	3000000.00	11.63%	4200000.00	14.30%
Advance to staff	8000.00	0.03%	129500.00	0.44%
Closing Balance : Cash and Bank	6326344.60	24.52%	8073807.92	27.48%
<b>Total</b>	<b>25800624.02</b>	<b>100%</b>	<b>29376263.97</b>	<b>100%</b>

**Diksha Purkayastha**  
Chartered Accountant  
Membership No. 307881  
FRN : 0326761E

**Anjan Bordoloye**  
President

**Mukul Ch. Goswami**  
Secretary

Place : Guwahati  
Date : June 19, 2017

Place: Guwahati  
Date: June 19, 2017

## STAFF STRENGTH

Type of Staff	Male	Female	Total
<b>Paid Full Time</b>	4	2	6
<b>Paid Part Time</b>	2	0	2
<b>Paid Contract Staff</b>	35	40	75
<b>Paid Consultant</b>	4	1	5
<b>TOTAL</b>	<b>45</b>	<b>43</b>	<b>88</b>
<b>Unpaid Volunteers</b>	2	2	4

## Distribution of Staff According To Salary Levels (for all full time/part time/contract/consultant/other staff)

Slab of gross monthly salary (in ₹) plus benefits paid to staff	Male Staff	Female Staff	Total Staff
<5000	11	19	30
5001-10000	22	16	38
10001-25000	9	5	14
25001-50000	3	3	6
<b>TOTAL STAFF</b>	<b>45</b>	<b>43</b>	<b>88</b>

## The salary and benefits of the NGO Head, the highest paid staff member and the lowest paid staff member in 2016-17

<b>Head of the Organisation</b> : Mukul Chandra Goswami, Secretary /Director (Programme)	₹ 4,65,000
<b>Highest paid</b> : Dr. Anjana Goswami, Director Resource Centre & Project Head	₹ 5,40,000
<b>Lowest paid</b> : Shri Pankaj Das Part Time Yoga Teacher	₹ 33,600

## Remuneration paid to Executive Committee Members in the year 2016-17:

SL	NAME & DESIGNATION	AMOUNT (₹)
1	ShriAnjanBordoloye, <i>President</i>	ZERO
2	ShriMukul Chandra Goswami, <i>Secretary</i>	₹4,65,000/-
3	ShriVijoyPatir, <i>Treasurer</i>	ZERO
5	ShriBhaskarBarua, <i>Member</i>	ZERO
5	ShriRonojoySen, <i>Member</i>	ZERO
6	Shri Ashok Jhuria, <i>Member</i>	ZERO
7	ShriAjit Narayan DevKachari, <i>Member</i>	ZERO
8	Smt. ManjusriBaruah, <i>Member</i>	ZERO

**NOTE:** Remunerations paid to ShriMukul Chandra Goswami towards his full time involvement as Director (Programme).

## Amount Reimbursed to Board Members in the year 2016-17 for the following items:

1	International Travel	nil
2	Domestic Travel	nil
3	Local Conveyance	nil
4	Entertainment Expenses	nil
5	Others	nil

## Travel in the year 2016-17

Total cost of national travel by all Staff and Board Members	₹ 14240/-
Total cost of international travel by all Staff and Board Members	Nil

# ***Acknowledgements***

**The Ashadeep family is grateful to the following individuals and organisations for their support to the cause of Ashadeep:**

1. Department of Social Welfare, Government of Assam
2. Department of Health, Government of Assam
3. The Tata Trusts, Mumbai
4. GiveIndia, Mumbai
5. The Hans Foundation, New Delhi
6. HDFC Bank
7. Sitaram Jindal Foundation, New Delhi
8. 'Prerana', I.A.S Officers' Wives Association, Guwahati
9. Shamdasani Trust, Hong Kong
10. Members of Staff, World Bank, New Delhi
11. Shradhha Foundation, Mumbai
12. The Deputy Superintendent and Staff of Boko PHC/CHC/FRU
13. The Banyan , Chennai
14. Grand Challenges Canada
15. Parivartan Trust, Satara, Maharashtra
16. MahilaMehfil, Morigaon
17. 'SATRA', Sipajhar
18. 'Seneh', A home for destitute elderly women
19. St. Stephen's School, Guwahati.
20. Assam Don Bosco University, Azara, Guwahati
21. Special Olympics Bharat (Assam Chapter)
22. Mr.& Mrs. BaradaCharanSarma, USA
23. Mr. Jaswinder Pal Singh, Vadodara, Gujarat
24. Mr. R.C. Borthakur, Digboi
25. Mr. ParthasarathyChoudhury, Shillong
26. MrMaqbul Ahmed, Guwahati
27. All other individual donors who have made contributions towards the organization during the year.
28. Members of the Print & Audio-Visual Media.