



HUMANITY TRUST

ACTIVITY REPORT (April 2021 to 15th Sept. 2021)



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ABOUT HUMANITY TRUST

Since the birth of this Trust in 1993 it has been our motto to alleviate human sufferings and do charitable works in public interest. The trust has extended its relentless service to the people whenever they are in distress and danger without caste and creed out of love and sympathy and not for any reward.





Importance of Dry Rations and Medical Outreach

The rural health care system in India is not adequate or prepared to contain COVID-19 transmission, especially in many densely populated Indian States because of the shortage of doctors, hospital beds, and equipment. The COVID-19 pandemic creates a special challenge due to the paucity of testing services, weak surveillance system and above all poor medical care. The impacts of this pandemic, and especially the lockdown strategy, are multi-dimensional. In view of this it is necessary to take immediate steps to control the spread and its aftereffects and to use this opportunity to strengthen and improve its primary health care system in rural India. It is particularly a threat to a country like India, where 65–68% of the populations live in rural areas that also have the highest overall burden of disease globally.

While the virus itself is deadly, a combination of hunger and malnutrition is making the situation much worse. The weakened immunity of the poor rural population is becoming a key factor in how the virus impacted society.

In view of the above we should continue the distribution of Dry Ration to the poorest people in the most Backward areas to whom no other kind of help (Govt/Private) is available to ensure their survival during the ongoing COVID pandemic. This support will ensure that men, women and children will not have to go hungry. Besides, having the required food on a daily





Importance of Dry Rations and Medical Outreach

basis, they will have access to balanced nourishment for their survival. This will have a long term effect to increase individual body immunity which is the best way to fight COVID.

Government has already predicted a third wave of COVID 19 hitting the country anytime between September & October and suggested ramping up vaccination drive significantly. The third wave of covid -19 is knocking at doorstep and the ongoing surge in cases in certain regions is of the Delta variant.

The most important symptoms for the earliest detection of covid-19 overall included loss of smell, chest pain, persistent cough, abdominal pain, blister on the feet, eye soreness, unusual muscle pain etc. On and an average it takes (5-6) days from when someone is infected with the virus for symptoms to show, however in certain cases it can take up to 14 days even .

The LUNGS are the organs most affected by COVID 19. Other organs like throat, difficulty in breathing etc are also an indication of COVID infection. Some of the complications seen in patients include deleterious effects on lungs, kidneys, heart and manifestation of black fungus, known as mucormycosis. Therefore a holistic approach is essential for follow up care and well being of post Covid recovering patients.

Since the third wave will attract mostly children who are future of the country, we should take





Importance of Dry Rations and Medical Outreach

all precautions to protect them from this dreaded Covid infection.

Home visit and testing in each case which confirms early detection, supplying required medicines on time are the best measures in COVID treatment. Regular checking of a large number of villagers specially children by doctors in the temporary medical camps which will be set up in all the remotest areas where currently no facilities are available. These steps will help in early detection of symptoms of COVID and result in early and inexpensive recovery.

Thanks to our previous experience, we undertook door to door survey by our 448 community volunteers who in turn reported to the Supervisors facilitating timely intervention by doctors in my considered opinion and as per field experience the current program should at least continue till November 2021. This will help us in tackling hunger, malnutrition and COVID related ailments which in some cases may be fatal.

If we follow as above, the following situations can be possibly avoided :

- * Avoid the distressed condition of under-privileged people as a whole for COVID Tsunami.*
- * To provide extra indoor facilities for COVID as all Govt. Hospitals and Private Hospital, Nursing Homes are all in 100 % occupancy.*





Importance of Dry Rations and Medical Outreach

** Avoid unwanted increase of patients for admission.*

** Uplift betterment of our Project people*

** Rural people have the least knowledge about Govt. website to know about bed availability in any Hospital.*

** As the Government hospital in the vicinity is ill-equipped and indifferent to the needs of the locals. Humanity Hospital having C.E Licence No. 34314985 is a very important savoir for the poor people in this dreaded period.*

It is a boon to the local people as non-availability of effective medical treatment in this situation is so critical.

** This is in contrast to the Government hospital where the treatment is usually delayed and insufficient. In Humanity Hospital the patients get prompt & free treatment.*

The people look forward to the Humanity Hospital in time of needs.

** Humanity Hospital (Run by Humanity Trust) covers 287 no of villages (Bankura , Purulia, South & North 24 Parganas & 11; no. of KMC Ward*

Treatment Term: Since Covid -19 Virus Does Not Kill Directly It kills By Immune Inflammation. Therefore treatment must Centre around the monitoring of Clinical and Biochemical Inflammatory Parameters.





Importance of Dry Rations and Medical Outreach

There are six stages of Covid Course: Of them Level 3 is the most critical stage. Our target should be to protect the patients from turning to level-3, from the very 1st day we should monitor the clinical (SpO₂, CRP, D-Dimer CBC, NLR) and treat the patients as per ICMR Protocol. In LEVEL-3 : Patients are managed with BiPAP, HFNC, Ventilation, High Dose Steroid, Antibiotics including LEVEL-1 & LEVEL-2 support.

Period: minimum: 5-10 days.

Since this Hospital is a Hospital with difference, treatment here is free of cost for the needy patients.





The Problem

Both lives and livelihoods are at risk from this pandemic. When people suffer from hunger or chronic undernourishment, it means that they are unable to meet their food requirements - consume enough calories to lead a normal, active life - over a prolonged period. This has long-term implications for their future, and continues to present a setback to global efforts to reach Zero Hunger. There is a serious concern that producers might not be able to plant this year, or not plant enough, as normally. If we do not help producers to plant this year, this will translate into a lack of food later this year and in 2022.

Due to undernourishment their health were at risk and were prone to attract by any disease. At the very outbreak of COVID 19 pandemic, Humanity Trust started its relief work by providing Dry Ration to the many (deserve) families. All these families were in complete distress as they lost their jobs due to prolongation of lockdown. They were also provided with masks, health sanitizers in addition to food kits. Nutritional food (Nutrimix) was also being supplied to pregnant mother and Lactating children. We catered to around 77820 no. Beneficiary were benefitted from 1st April '21 to 15th Sept. '21 by these relief work.





Project Goals

- *Urgent need to provide extra indoor facility for COVID as all Govt. & Private Hospitals, Nursing Home are fully occupied. Hospitals cannot operate at 100% occupancy, as spare bed capacity is needed to accommodate variations in demand and ensure patients can flow through the system*
- *Since Covid 19 Virus Does Not Kill Directly. It kills By Immune Inflammation. Therefore Treatment must Centre Around the monitoring of Clinical and Biochemical Inflammatory Parameters.*
- *There are six stages of Covid Course : Of them Level 3 is the most critical stage.*
- *Our target should be to protect the people not to turn the level-3,*
- *COVID-19 has exacerbated hunger and poverty worldwide, especially in India. The crisis highlights the importance of putting relief directly into the hands of vulnerable people. Solutions must address both immediate food insecurity and provide livelihood opportunities so as to break the cycle of hunger and poverty.*





West Bengal Regions





Increasing Awareness and Safe Sanitary Practice among Adolescent Girls in Tribal area of Bankura, Purulia in West Bengal & West Singhbhum in Jharkhand

Tribal girls facing their first menstrual situation do not know the benefits of using Sanitary Napkins. Women are also in the same position. They do not have the money power to purchase Sanitary Napkins. They are accustomed to the old fashion of using dirty clothes several times without sanitizing / cleaning them. This was very much harmful. This practice causes several diseases. To get rid of the women folk they will be provided with three sanitary napkins on each quarter of the year. Thereafter some prospective groups of women will be selected for different centres at different places for making sanitary napkins after they are trained by appropriate trainers.

Humanity Trust will provide them to free supply of sanitary pad.

Beneficiary details from April 2021 to 15 Sept 2021.

Name of the State	Name of the District	No of Adolescent Girls	No of Women
West Bengal	Bankura	388	117
	Purulia	281	151
Jharkhand	West Singhbhum	193	167





Malnutrition Support and Awareness

Integrated Mother and Child Health program

Project Mission :

To provide nutrient packets : It is well known fact that tribal people are the most underprivileged communities in India. For years, they have been living in parts of West Bengal, Jharkhand and Chattisgarh. They suffer from malnutrition due to the lack of nutrient food and lack of subsidise of free ration available to all family for various reason. Most tribal families are too poor to get a square meal every day, not to speak of nutrient food. As such they suffer from various ailments, chronis diseases, caused by Vitamins deficiency etc. Humanity Trust will provide them 1800gm (3 Packets each packet 500gm) nutrient to a tribal child, for a tribal Lactating women 2700gm (5 Packets each packet 500gm) and 3000gm (6 Packets each packet 500gm) for a tribal Pregnant women on each month of the year at the initial stage. Thereafter more groups will be formed to work in designated centres to prepare Nutrimix locally. They will procure ingredients for the Nutrimix as will be locally available. Rest will be supplied by us. In this way the tribal people will prepare Nutrimix themselves for their own use. Malnutrition will be eradicated in due course.





Malnutrition Support and Awareness

Integrated Mother and Child Health program

Location / area of operation Tribal :

The project head quarters is located in Humanity Trust, Kolkata – 700104, Project will be carried out in Tribal / Rural / Hilly area of West Bengal, Jharkhand and Chhattisgarh thus accessible to both Tribal and Rural poor.

NUTRIMIX Food Support to Pregnant Mother, Lactating Mother & Lactating Children in different Tribal Arias of West Bengal, Jharkhand & Chhattisgarh.

Name of State	Name of District	Pregnant Women	Lactating Women	Lactating Children
Jharkhand	West Singhbhum	262	44	242
Chhatisgarh	Bilashpur	424	105	167
West Bengal	Bankura, Purulia, South 24 Pgs (Sundarban Costal)	957	38	444





Project Details :

Total care and overall development of children from categories like orphans, street children, abandoned children.

Children are from :

All the Children are from Tribal/Rural/Hilly area of West Bengal, Jharkhand and Chhattisgarh thus accessible to both Tribal and Rural poor.

Mission and Vision :

Our mission is to provide a safe and loving environment where highly vulnerable children can grow and thrive. We believe that by providing education, exposure to the arts, healthy physical activity and all-around care, these children can fully realize their potential as the next generation of a changing India.

Our vision is to reach as many children as possible throughout India and, by changing the destinies of these children, change the destiny of India itself.

Humanity Trust has worked towards the total care and overall development of children who are highly vulnerable to exploitation, victimization and trafficking, including orphans, street children, abandoned children, and extremely impoverished children from tribal areas. It also conducts many more humanitarian activities for the destitute and uncared, including elderly and shelter less.

Humanity Trust provides all opportunities for education and overall child development in a loving and caring atmosphere for boys and girls from early age of 5 till their higher education – i.e. university level graduation and /or employability programs.





Old Aline Monthly Support

Launching Project for the Senior Citizen

A large member of senior citizen are facing insurmountable obstacle to pass their daily life for want of the three primary need-food, cloth and residence. In spite of several Govt. Schemes for these class of citizen, their members are on the increase day by day. It is not possible to fulfill all the three needs for the whole class but Humanity Trust has taken initiative to donate a certain sum of money by which they can collect the most primary need-food and cloth and remain unstarved. Those type of men and women can be found everywhere but mainly in rooky and unfertile district of Bankura, West Mednapur and South 24 Parganas of West Bengal.

Project shall start from Bankura.

Soliciting your opinion and help.





Timeline

- *1st April 2021 to 15th Sept 2021*

Reach

- *4 districts*
- *275 villages*
- *16 KMC Ward*
- *77820 people*





RATION QUANTUM TABLES

Item	Quantity (Kg/Ltr)
Rice	29200 kg
Red Lentil	2760 kg
Soyabean	1062 kg
Cooking Oil	1380 ltr
Potato	11950 kg
Onion	5520 kg

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HEALTH CLINICS, COMMUNITY
SPECIAL AWARENESS ON
COVID-19 PANDEMIC AND TO
DISTRIBUTE DRY RATION.**
Sundarban Coastal, Bankura, Kolkata &
S & N Districts, West Bengal, India
Supported by :- **Crypto Relief**

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Medicine Quantum Tables (Outreach Medical Camp)

Item	Quantity
Tab-Scavita-12 / IVERMECTIN-12 mg	27000
Tablet-VITAMIN C 500 mg	360000
Tab-Zinc Sulphate 50	54000
Tablet-Multivitamin / Zincovit	360000
Cap-Vizylac /Darolac/Bifilac	114700
Tab-PCM (650mg)	421000
Tab-Montelukast Sodium (10mg) & Levocetirizine (5mg)	56000
Tab-Coamoxiclav (625 mg)	109200
Tab-Pantaprazole (40mg) & Domperidom (10mg)	117000
Cap-DV 60K (Cholecalciferol)	60200
Tab-Teniva (20mg)	74000
Tab-Gluconorm SR (1000mg)	96800
Tab-Amlodipine (5mg)	212400
Tab-Ecosprin (75mg)	122400





Medicine Quantum Tables (Indoor)

Item	Quantity
Inj.Pantoprozole	52000
Inj-Maxilive (600mg)	13000
Inj.Zostum (1.5g)	78200
Inj.Enoxaparin Sodium (40mg/0.4ml)	1280
Inj-Solumedrol (125mg)	32760
Inj.Hydrocortisone (100mg)	252
Inj.Paracetamol	4000
Inj.Hun Insulin R	100
R/P Budecort	5630 Pack
R/P Duolin	13800 Pack
Oxygen Mask	3800
Oxygen Canula	3200
Nebulization Mask (Children)	1550
Nebulization Mask (Audalt)	6200





Indoor Project Activity Breakdown

Place	INP COVID	Isolation (Covid)	OPD Patient
Sundarban (Costal)	408	1236	7493
South 24 PGS	415	1487	8129
Kolkata Slum & Red light area	238	752	1142
Bankura	131	1037	1301





Out Reach Project Activity Breakdown

Place (District)	No of Villages	No. of Ration Kits distributed / Families covered	No. of Medical Support from Medical Camp	Total no. of People reached (Beneficiary)
Bankura	109	837	14486	18001
Sundarban Costal	43	618	7917	10512
South 24 PGS	61	529	7446	9667
North 24 PGS	62	363	5313	6837
Kolkata Slum & Red Light area	16	936	1123	5054





Implementation Process

In Sunderban Coastal and 24 Parganas (North) : Ration distribution as well as outreach Medical camp on Covid were conducted through 5 supervisors, 167 Community Volunteers who selected the beneficiaries after visiting each home.

In the District of Bankura (Tribal Area) Ration distribution as well as outreach Medical camp on Covid were conducted through 5 supervisors, 163 Community Volunteers who selected the beneficiaries after visiting each home.

In the District of 24 Parganas (South) Ration distribution as well as outreach Medical camp on Covid were conducted through 3 supervisors, 118 Community Volunteers who selected the beneficiaries after visiting each home.





Permission from Local Government

Since Humanity Trust (HT) was awarded “Padma Shree” award by Government of India on 20th March 2018 for its Social Welfare work for socioeconomically backward classes people, HT is approached by the different bodies from different remote corners of the various areas for support

Token System

Tokens were distributed by our community volunteers (CV) when they travelled to various villages to visit the houses,

Individual Representation

Only one person from the household was allowed to come and collect the kit to avoid any confusion. For those who are unable to move out due to illness or old age issues our CV arranged to have the items delivered to their respective houses. For Medical : Only those people may attend to the out reach medical camp on covid who are examined by our trained CV. Of them who are suspected and need comorbidity care.

Recording Data

All kits distributed were to be signed by mentioning all details of the beneficiary (Name, Age, Members in a family, Contact Details and Signature) to avoid double counting. Our volunteers were involved in the selection process.





West Bengal

The process adopted to identify beneficiaries : People who had no earnings for their livelihood, widows and separated women, families who lost the earning members due to COVID Pandemic, families infected with dreaded COVID and families with disabilities.

Door to door visit, 13 no. of Supervisors, 448 no. Of Community Volunteers (CV) and Local Body were engaged in the selection process.

Distribution protocol West Bengal

COVID-19 norms adhered to

In both Rationing and outreach medical camp on Covid, all COVID protocols were followed during the distribution process and outreach camp. Our CV were controlling total system to avoid any crowding.

Individual distribution

In most of the areas, the kits were distributed in Group, Some cases (Senior Citizen) our volunteers handed over the Ration kit to their House.

Token distribution

Tokens were distributed on the day of Dry Ration Distribution and ensured all proper protocols were maintained during the group distributions.





Diligent Documentation

All the documentation systems were completed and registration forms duly filled up and signed were received from the beneficiaries.

Food Security :

Distribution of Dry Ration to the poorest people in the most backward areas to whom no other kind of help (Govt/Private) was available, have ensured their survival during the COVID time. It assured that men, women and children don't have to go hungry. Besides, having acquired food on a daily basis, they had access to balanced nourishment for the time. This will have a long term effect to increase individual body immunity which can be the best way to fight COVID.

Early detection of Potential victims of COVID

Regular checking of a large number of villagers by doctors in the temporary medical camps which were set up in all areas selected by us, helped in early detection of symptoms of COVID and resulted in early and inexpensive recovery. Thanks to our previous experience, we undertook door to door survey by our 448 community volunteers who in turn reported to the Supervisors facilitating timely intervention by doctors.





Diligent Documentation

OTHER IMPACT :

For the first time, we felt that the villagers had become more aware, more self confident and free from daily worries of having next meal. This enabled them to engage themselves to work according to their regular occupation.

Finally I would like to add something else for your consideration, in Humanity Hospital, which is a COVID Hospital, now a new variety of

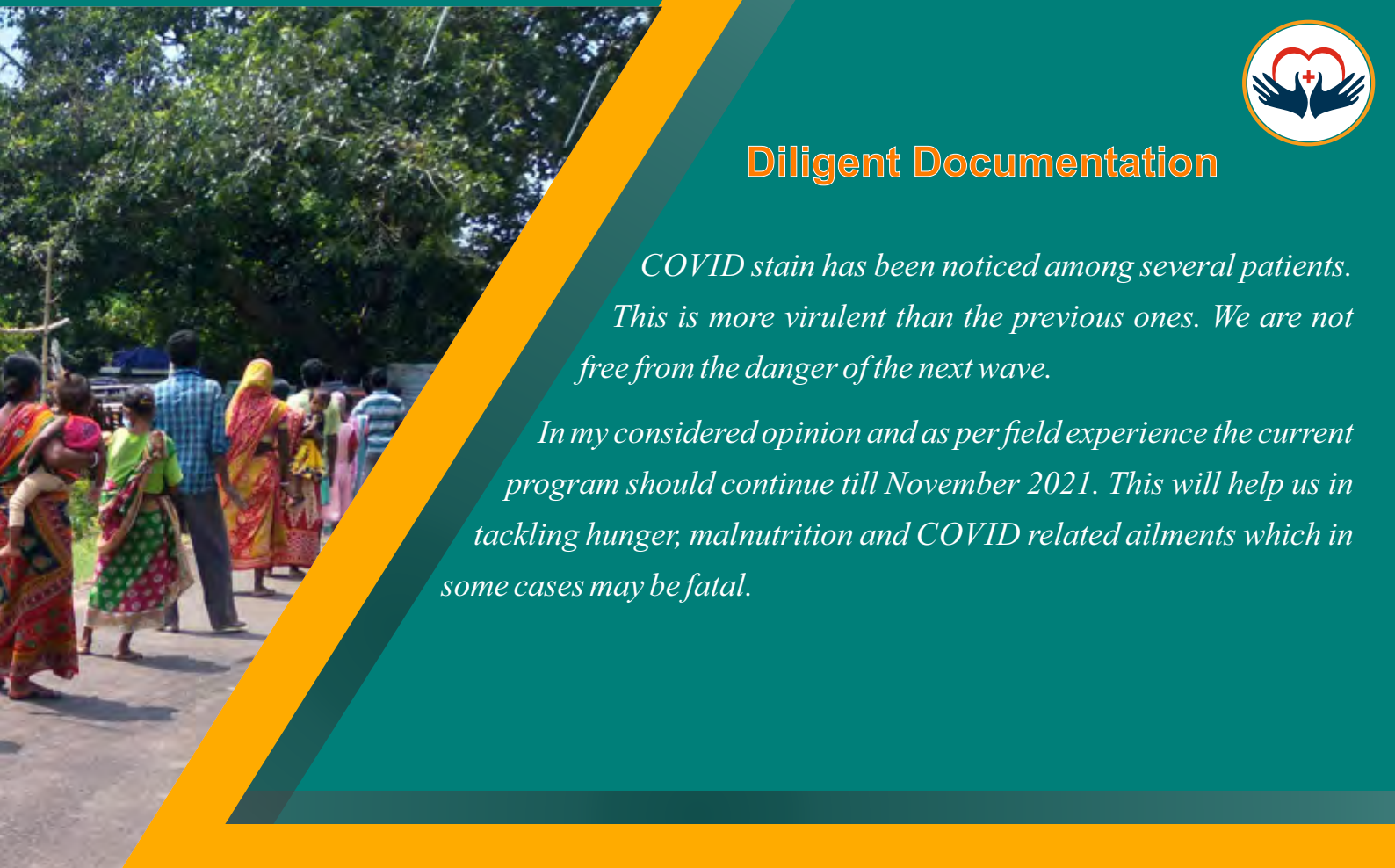




Diligent Documentation

COVID stain has been noticed among several patients. This is more virulent than the previous ones. We are not free from the danger of the next wave.

In my considered opinion and as per field experience the current program should continue till November 2021. This will help us in tackling hunger, malnutrition and COVID related ailments which in some cases may be fatal.



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MASK & SOAP



Case Stories

Tuhin Mandi,

BANKURA DISTRICT

Background

Tuhin Mandi about 25 year male resident at Shiber bandh village, Bankura lives with his wife Nebu Mandi and two children aged 4 and 2 years. He has a house made of mud and straw with a single room, kitchen and an outside toilet. He earns his living as a migrant labour earning about Rs.7000/- per month. Presently he has no source of income. Tuhin Mandi was examined on 26.7.2021 and was found no symptoms. To have the level of infection of COVID-19 of the area (as most of the people of this area are migrant lebourers) he was tested Nasopharyngeal Swab (RT PCR) on 26.7.2021 and it was found that he was infected as COVID (SARS) positive and treatment was started as per Protocol on and from 27.7.2021 providing all medicines as per protocol of ICMR and other protective items including food kits. Other family members were also subjected to the above test and found negative and thus they are saved from the dreaded COVID.

MIGRANT LABOUR, 25 years old





Case Stories

SUMITRA MONDAL, SUNDERBAN COSTAL (DISTRICT SOUTH 24 PARGANAS)

Background

Sumitra Mondal, aged about 27y/F, W/O late Panchu Mondal resident of village Santigachhi (Sunderban Costal)/ 24 Pgs(S) lives with five members. They live in a house with tiled roof and Kancha mud wall, with a kitchen, no inside toilet. She earns her living by collecting honey and catching crabs in the Sunder ban Costal area earning about Rs 4500/- per month. Presently she does not have any source of income. She is dependent for her family from the Governmental ration free of cost. Sumitra was examined having symptoms of dry cough, high fever and mild breathing difficulty for about three to four days while on a visit to her house on 10th July 2021. The other members of the family did not have these symptoms. She was brought to our hospital for testing and was found COVID positive. Other family members were also subjected to COVID Test and found negative. Our Community Volunteers meticulously followed her family members and immediate neighbours for symptoms of COVID and provide necessary support to the family in all respect. Other family members were provided prophylactic medicines and food kits also as Sumitra had. Sumitra was treated at our hospital as per the standard treatment guideline for COVID. After her symptoms subsided she was again tested for COVID. On testing negative and showing no other serious symptoms as well as infection she was discharged from our hospital on 25th July 2021.

DAILY WAGE EARNER, 27 years old

