



# HUMANITY TRUST

ANNUAL REPORT  
2021-22



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"It is our darkest moments that we must focus to see the light."  
- Aristotle.

Living in the pandemic for the past two years has left us all in utter disbelief. None of us could have imagined a virus creating havoc in our lives in such a destructive and brutal way, both economically and socially. As Tagore wrote in his Play titled Bishorjon, "the clouds are short-lived, while the sun is forever".

In this trying situation, support from Crypto Relief Fund acted like sunlight that could carry us out of these dark times and lead us into the future that we envision. The Crypto Relief Project was initiated by Humanity Trust in November 21 till February 22 to mitigate the problem of hunger and availing health needs.

The future of our world remains full of optimism though. Despite what looks like a massive step in achieving pre-pandemic normalcy, the reality is a far cry from it. People from low income backgrounds have gone through enormous economic pressure to run their families. Many lost their jobs, while others tried to do two because of reduced earnings.

Thanks are due to the local officials, the local GPs and Urban local bodies for helping us identify beneficiaries. We take this opportunity to thank the local people for their support and extending their helping hand to carry out our activities without glitch. Lastly my thanks goes to our staff who gave their best for the successful implementation of the task at hand.



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## A Brief on Humanity Trust :

Humanity Trust is a non-profit, non-religious and a non-political trust registered in West Bengal in the year 1993. The activities of the trust are: 1. Running integrated mother and child health program in tribal areas 2. Improving nutritional status of children through awareness on infant and child feeding and providing lowcost ready to eat nutritious food from locally available ingredients made by local women 3. Provide nutrition supplements to pregnant and lactating women 4. Hold medical camps in difficult and hard to reach areas for treatment and awareness generation on health and nutrition issues 5. Creating awareness on menstrual hygiene to adolescent girls and women 6. Carry out relief operations during COVID 19 through supply of ration and providing curative, diagnostic and referral services and to run base Hospitals with Indoor and O.P.D

**HUMANITY HOSPITAL** is certified and registered as a Hospital under the West Bengal Clinical Establishment Act, 1950, managed by Humanity Trust formed on 4th March 1993 under trust certificate no. 3163/93. The institution received FCRA registration in 1995. In the 2000, in appreciation of their service to humanity and poor people in particular, both Subasini Mistry and Ajoy Mistry was honored and named as the prestigious PAULHARRISFELLOW by Rotary International.





## ACTIVITIES OF THE HOSPITAL UNDER HUMANITY TRUST :

The Humanity Hospital at Hanspukur attracts attention from all over, particularly because of the great human story involved with its inception and functioning. The Hospital has almost all necessary infrastructures like ECG, USG, EEG, Digital Ex-Ray, PFT, Holter, Color Doppler, including common pathological tests are available for poor, needy and general sections of the society as per our capacity from nearby villages and far off. Apart from general beds, indoor is covered by Cabin, Special Bed, HDU and ICCU. We are also trying hard to procure other very essential instruments to provide quality diagnostic services promptly at Hanspukur.

In addition to regular general physicians, we are happy to get a team of highly reputed doctors on board, including specialists are equipped with the knowledge and expertise for handling various types of medical cases. A team of medical staff, non-medical staff and experienced clinical technicians work round-the-clock to offer various services to hundreds of poor and general patients from the rural vicinity. Cataract and other surgeries have been started with successful results. Orthopedic department is functioning smoothly with an eminent specialist of orthopedic surgery. Physiotherapy department is also functioning regularly by experienced physiotherapists from whom people are drawing benefit to restore and improve motion to achieve long-term quality of life.

Top class diagnostic facilities like Opd, Ophthalmology, Cardiology, Diabetology, ENT are functioning smoothly as before. Departments like Sonology, Obesity, Pain Management, Physical Medicine, Neurology Clinic has already started.

The Hospital also has facilities for a full range of treatments like General Surgery, Medical Surgery, Gynaecology and Obstetrics, Urology, Gastroenterology among others.

## THIS HOSPITAL EXTEND HANDS TO THE UNDERPRIVILEGED COMMUNITY IN THE SOCIETY WITH

### MEDICAL SERVICE :

- Free Treatment with Medicines.
- All Treatment under Single Roof.
- Both Units are Running Successfully.



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## PROJECT GOALS :

- ★ Reaction : Must address imminent challenges and ensure clarity amongst the team and stakeholders
- ★ Resilience : Must work to restore disrupted initiatives and adopt a more sustainable delivery model.
- ★ Recovery : Need to adapt projects and portfolios to align with new emerging needs.
- ★ Recognize the new Reality : Must create more strategic options and a scenario to deliver long term requirements
- ★ Execute high impact , high visibility initiatives : Time to focus more on remote work , system automation , supply chain safety and adapting the customer experience and climate change are among the trends driving the further long term changes.
- ★ Adapt to remote workforce realities : Post pandemic it will be essential to increase automation , address supply chain gaps and improve customer experience.
- ★ Adjusting to the new reality has become one of the most important new goals .To provide extra indoor facility for COVID at all Govt. Hospitals as well as all Private Hospitals, more Nursing Homes with higher bed capacities.
- ★ 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 to 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.



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## THE PROBLEM :

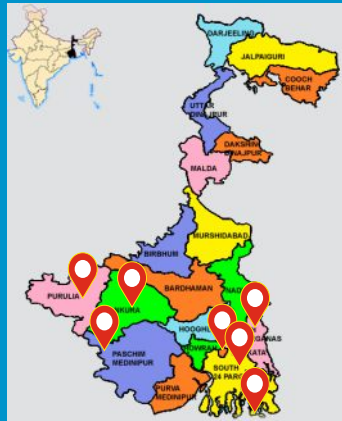
From its devastating economic impact and the migrant crisis to the startling death toll, the COVID-19 pandemic in India unfurled one crisis after the other. The four essential systems that were massively hit by the pandemic were education, healthcare, finance, and citizen entitlements. When the pandemic was raging, all people wanted was food and rations, a device to access online education for their children, the ability to talk to a doctor or health worker to learn how to keep themselves safe, and to make some money to meet their daily needs from the confines of their homes. Yet as we physically distanced ourselves from one another amid this avalanche of bad news, people have come together in the most extraordinary ways to go the extra mile and lend a helping hand to the needy. And it is here that the Humanity Trust team under the leadership of Dr Ajay Mistry came forward and started its relief work by providing Dry Ration to most needy families. All of them were in complete distress as Covid -19 pandemic has led to a dramatic loss of human life and presented an unprecedented challenge to public health, the food system and the world of work. We also provided these people with masks, health sanitizers in addition to food kits. Gave Nutritional foods to pregnant mothers and lactating children.



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## West Bengal, Odisha and Jharkhand Regions



Odisha



Jharkhand

### REACH

- ★ 8 Districts / 3 States
- ★ 482 villages and 16 no. of Ward
- ★ 85873 family
- ★ 386601 Beneficiaries

West Bengal



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## RATION QUANTUM TABLES

Item	Quantity (Kg/Ltr)
Rice	22000 kg
Red Lentil	22000 kg
Soyabean	9000kg
Cooking Oil	11000 ltr
Potato	90000 kg
Onion	42000 kg



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## Medicine Distributed (Outreach Medical Camp)

Item	Quantity
Tab - Scavita-12 / IVERMECTIN-12 mg	39000
Tablet - VITAMIN C 500 mg	272000
Tab - Zinc Sulphate 50	97900
Tablet - Multivitamin / Zincovit	349750
Cap - Vizylac / Darolac / Bifilac	102000
Tab - PCM (650mg)	227992
Tab-Montelukast Sodium(10MG) & Levocetirizine(5MG)	117222
Tab - Coamoxiclav (625 mg)	177382
Tab - Pantaprazole (40mg) & Domperidom (10mg)	127121
Cap - DV 60K (Cholecalciferol)	59622
Tab - Teniva (20mg)	182721
Tab - Gluconorm SR (1000mg)	52293
Tab - Amlodipine (5mg)	81725
Tab - Ecosprin (75mg)	35230





## PROJECT ACTIVITY BREAKUP STATE & DISTRICT WISE

### 1. Bankura District, West Bengal

- No. of Villages 109 Villages
- Per Kit cost INR 677.00
- No. of Ration Kits distributed/Families covered 3564
- 24801 no of patients to whom medical support provided from Medical camps.
- 1279 No of Lactating Women , Children & Pregnant Mother to whom
- High Reach Protein Food ( NUTRIMIX ) provided.
- 3097 No of Adolescent Girls & women to whom provided Sanitary Napkin.
- Total no. of Beneficiaries reached 44850.

### 2. Purulia District, West Bengal

- No. of Villages 42 Villages
- Per Kit cost INR 677.00
- No. of Ration Kits distributed/Families covered 2365
- 15586 no of patients to whom medical support provided from Medical camps.
- 1626 No of Lactating Women , Children & Pregnant Mother to whom
- High Reach Protein Food ( NUTRIMIX ) provided.
- 3183 No of Adolescent Girls & women to whom provided Sanitary Napkin.
- Total no. of Beneficiaries reached 31032



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## PROJECT ACTIVITY BREAKUP STATE & DISTRICT WISE

### 3. Jhargram District, West Bengal

- No. of Villages 39 Villages
- Per Kit cost INR 677.00
- No. of Ration Kits distributed/Families covered 551
- 19626 no of patients to whom medical support provided from Medical camps.
- 1047 No of Lactating Women , Children & Pregnant Mother to whom
- High Reach Protein Food ( NUTRIMIX ) provided.
- 1320 No of Adolescent Girls & women to whom provided Sanitary Napkin.
- Total no. of Beneficiaries reached 24362

### 4. South 24 Parganas District, West Bengal

- No. of Villages 61 Villages
- Per Kit cost INR 677.00
- No. of Ration Kits distributed/Families covered 3029
- 10857 no of patients to whom medical support provided from Medical camps.
- 281 No of Lactating Women , Children & Pregnant Mother to whom
- High Reach Protein Food ( NUTRIMIX ) provided
- Total no. of Beneficiaries reached 24765



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## PROJECT ACTIVITY BREAKUP STATE & DISTRICT WISE

### 5. North 24 Parganas District, West Bengal

- No. of Villages 62 Villages
- Per Kit cost INR 677.00
- No. of Ration Kits distributed/Families covered 2424
- 14049 no of patients to whom medical support provided from Medical camps
- Total no. of Beneficiaries reached 24472

### Sundarban Costal Area, West Bengal

- No. of Villages 61 Villages
- Per Kit cost INR 677.00
- No. of Ration Kits distributed/Families covered 3561
- 18962 no of patients to whom medical support provided from Medical camps.
- 281 No of Lactating Women , Children & Pregnant Mother to whom
- High Reach Protein Food ( NUTRIMIX ) provided
- 1210 No of Adolescent Girls & women to whom provided Sanitary Napkin.
- Total no. of Beneficiaries reached 36155



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## PROJECT ACTIVITY BREAKUP STATE & DISTRICT WISE

### Kolkata Slum & Red light area, West Bengal

- No. of wards 16
- Per Kit cost INR 677.00
- No. of Ration Kits distributed/Families covered 4042
- 13602 no of patients to whom medical support provided from Medical camps.
- 1157 No of Lactating Women , Children & Pregnant Mother to whom
- High Reach Protein Food ( NUTRIMIX ) provided.
- 2272 No of Adolescent Girls & women to whom provided Sanitary Napkin
- Total no. of Beneficiaries reached 35229

### 6. Mayurbhanj District, Odisha

- No. of Villages 62 Villages
- Per Kit cost INR 677.00
- No. of Ration Kits distributed/ Families covered 594
- 17769 no of patients to whom medical support provided from Medical camps
- 1382 No of Lactating Women , Children & Pregnant Mother to whom
- High Reach Protein Food ( NUTRIMIX ) provided.
- 1190 No of Adolescent Girls & women to whom provided Sanitary Napkin.
- Total no. of Beneficiaries reached 23014



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## PROJECT ACTIVITY BREAKUP STATE & DISTRICT WISE

### 7. Balasore District, Odisha

- No. of Villages 27 Villages
- Per Kit cost INR 677.00
- No. of Ration Kits distributed/ Families covered 267
- 17137 no of patients to whom medical support provided from Medical camps
- 1212 No of Lactating Women , Children & Pregnant Mother to whom
- High Reach Protein Food ( NUTRIMIX ) provided.
- 721 No of Adolescent Girls & women to whom provided Sanitary Napkin.
- Total no. of Beneficiaries reached 20244

### 8. West Singhbhum District, Jharkhand

- No. of Villages 37 Villages
- 3571 no. of Lactating Women , Children & Pregnant Mother to whom
- High Reach Protein Food ( NUTRIMIX ) provided.
- 1086 no. of Adolescent Girls & women to whom provided Sanitary Napkin.
- Total no. of Beneficiaries reached 4657
- \* No of COVID Symptomatic & Asymptomatic Cases Tested = 4095
- \* No of COVID Symptomatic & Asymptomatic Cases Tested Positive = 1785



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## 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 and Purulia (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.

In 16 wards, Slum and Red Light area in Kolkata Ration distribution as well as outreach Medical camp on Covid were conducted through 3 supervisors, 16 Community Volunteers who selected the beneficiaries after visiting each place.





## PERMISSION FROM LOCAL GOVERNMENT :

Since Humanity Trust (HT) was awarded “Padmashri “award 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.

## TOKEN SYSTEM :

Tokens were distributed by our community volunteers (CV) when they visited different houses of a particular backward area where main source of income is by way of day labour.

## INDIVIDUAL REPRESENTATION :

Only one person from the household was allowed to come and collect the kit to avoid confusion and our CV reached the Ration those who are unable to move. -

For Medical : Only those people could attend to the Out Reach Medical Camp on covid who were examined first by our trained CV and declared as suspected and need comorbidity care. Of them who are suspected and need comorbidity care.



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## 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 project selected beneficiaries who had no means with poor livelihood status, 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, 26 no. of Supervisors, 464 no. Of Community Volunteers (CV) and Local Body were engaged in the selection process.



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## DISTRIBUTION PROTOCOL - WEST BENGAL :

### COVID-19 norms adhered to :

In both Rationing and outreach medical camp on covid, the COVID protocols were followed during the distribution process and outreach camp. Our CV are controlling total system to avoid people gathered for the same.

### Individual distribution :

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

### Token distribution :

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

### Diligent documentation :

Registration forms duly filled up and signed by the beneficiaries were collected in each case and thus normal documentation systems were perfectly followed up.



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## THE IMPACT OF THE PROJECT

### 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 go hungry. Besides having required 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 :

Our Community Volunteers paid regular door to door visit to detect persons having covid symptoms, such persons were instructed told to go the nearest Temporary Medical Camp where our team of doctors examined and instructed them to do the needful supplying them necessary masks ,sanitizer and obviously medicine. Following this systems, early detection of Covid patients were possible. At the same time treatment cost were less expensive

### 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 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(Post Covid) the current program should continue till September 2022. This will help us in tackling hunger, malnutrition and COVID related ailments which in some cases may be fatal.



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## Budget Utilisation

### Dry Ration

Particulars	Amount (INR)
Bankura (3564 family)	24,12,828
Purulia (2365 family)	16,01,105
Sundarban Costal Area (3561 family)	24,10,797
South 24 Parganas (3029 family)	20,50,633
North 24 Parganas (2424 family)	16,41,048
Kolkata Slum & Red Light area (4042 family)	27,36,434
Jhargram (551 family)	3,73,027
Mayurbhanj (594 family)	4,02,138
Balaswar (267 family)	1,80,759

### Medical (Outreach Camp)

Particulars	Amount (INR)
Bankura (24801 Patient)	17,36,070
Purulia (15586 Patient)	10,91,020
Sundarban Costal Area (18962 Patient)	11,37,720
South 24 Parganas (10857 Patient)	5,75,421
North 24 Parganas (14049 Patient)	7,02,450
Kolkata Slum & Red Light area (13602 Patient)	5,44,080
Jhargram (9626 Patient)	9,81,300
Mayurbhanj (17769 Patient)	1058000
Balaswar (17137 Patient)	1079000



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## TOTAL CARE AND OVERALL DEVELOPMENT OF CHILDREN FROM CATEGORIES LIKE ORPHANS, STREET CHILDREN, ABANDONED CHILDREN IN BANKURA, PURULIA & JHARKHAND

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.

### 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.



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## Integrated Mother and Child Health program

The proposed project will provide specialized attention to Tribal women and children from rural areas and nearby urban slumps. It is a unique, one of its kind project in the area, which will improve access to health care for women and children from Tribal villages. The project is based on the core strength of Humanity Trust as an integrated health service provider and community mobilizer and will add to its overall goal of developing a healthy Tribal society.

## A brief description of the development/ welfare work done by the Trust since its Inception :

Humanity Trust initiated its activities in 1993 by providing charitable health care to poor people from the Tribal and rural villages of Bankura, Purulia in West Bengal, West Singhbhum in Jharkhand and Bilashpur in Chhattisgarh. In 1995, Humanity Hospital became the flagship project of the Trust offering free and affordable quality medical care to poor people from the area, who did not have access to health care. Over last one decade, the Trust has developed into an integrated health care provider and social development organization, mobilizing local poor families into small groups, providing education and mainstreaming them to improve the standards of their lives by improving health conditions in general and providing social and economic opportunities to the poorest of the poor.

## 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, chronic 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.



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

Menstrual hygiene continues to be amongst the most challenging development issues today. Not only do deep-rooted taboos, myths and misinformation create the illusion that menstruation is inherently shameful, gross and weird, but in countries like India, women and girls often lack access to hygienic sanitary materials and basic facilities. Sanitary Pads necessary for good menstrual hygiene management. "Sanitary Protection: Every Woman's Health Right" a study by AC Nielsen reveals only 12% of India's 355 million women use sanitary napkins. Over 88% of women resort to shocking alternatives like un-sanitized cloth, ashes and husk sand. Incidents of Reproductive Tract Infection are 70% more common among these women. The biggest barrier to using a Sanitary Napkin is affordability. Around 70% of women in India say their family can't afford to buy them, 88% of women use old fabric, rags or sand to manage their flow. This tells the immense entrepreneurial opportunities in the segment. A recent study anticipates the industry to grow to INR 45.9 billion by 2017. The only need to work in this direction is the reduction in cost of production.

The immediate objective of the project is to enhance knowledge, attitude and practice towards menstrual hygiene among the adolescent girls in Tribal areas. To spread health education and for achieving the said object to establish, maintain, run, develop and improve workshop and institution for the promotion of health education. The main strategy of the project is Behavior Change Communication to leverage capacity creation among communities via training of facilitators and a prior-to-prior model. Through the orientation sessions in schools, the girls in the 12-15 year age group shall be updated on the traditional and modern methods of managing menstruation as a whole.

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.



## OLD ALIEN 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 fulfil 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. children.

## Launching Project for the Senior Citizen :

24 hours Ambulance facility at Hanspukur Unit. In Hanspukur some new medical services started and old services are also extended.







No. of beneficiaries for the period : 01/04/2021 to 31/03/2022 are as follow :-

Activity	Services are provided among 513 no. of villages of West Bengal, Odisha and Jharkhand.				
	Total No. of Beneficiaries	Free services	Concessions	Percentage (%)	Details of charges
1) OPD & Emergency of Hanspukur & Sunderban Unit. (April,21- March,22)	95736	91922	3814	96 %	25 - 75
2) Pathological Test at Hanspukur & Sunderban Unit. (April,21 -March,22)	20301	12592	7709	62%	Variable
3) Indoor patient of Hanspukur & Sunderban Unit. (April,21 - March,22)	1265	778	487	62%	Variable
4) Medical Camp on COVID 19 (Total Free of Cost)	152389	152389	0	100%	Free
5) Oldage Home at Hanspukur (April,21 to March,22)	3	0	3	0	5000-10000
6) Integrated Mother and Child Health program in Tribal area.	14696	14696	0	100%	Free
7) Increasing Awareness and Safe Sanitary Practice among Adolescent Girls in Tribal area	12632	12632	0	100%	Free
8) Total care and overall development of children from categories like orphans, street children, abandoned children, Tribal Children.	21	21	0	100%	Free
9) Welfare drive for COVID 19, Free Supply of FOOD KITS (Rice, Dal, Potato, Onion, Shattu, Flower, Cooking Oil etc.)	87707	87707	0	100%	Free
10) Welfare drive for Super Cyclone, YEASH Free Supply of FOOD KITS & Tarpaulin.	1823 Family Received Tarpaulin & Food Kits	1823 Family Received Tarpaulin & Food Kits	0	100%	Free
11) Old Alien Monthly Support	28	28	0	100%	Free
<b>TOTAL</b>	<b>386601</b>	<b>374588</b>	<b>12013</b>		

