Annual Report 2022-2023



CONTACT INFORMATION

Vill. : Hanspukur-Kalagachia, P.O. : Joka,

P.S. : Thakurpukur , Kolkata- 700104.

8697505652 / 9432181375

hhumanity3@rediffmail.com

www.humanitytrust.org.in



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 low cost ready to eat nutritious food from locally available ingredients made by local women.

3. Provides 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 through supply of ration and providing curative, diagnostic and referral services and to run base Hospitals with Indoors and O.P.D.



HUMANITY HOSPITAL



Humanity Hospital is certified and registered as a hospital under the West Bengal Clinical Establishment Act, 2017, managed by Humanity Trust formed on 4th March 1993 under Trust Certificate Number 3163/93. The institution received FCRA registration in 1995. In 2000, in appreciation of their services to humanity and poor people in particular, both Subasini Mistry and Ajoy Kumar 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 infrastructure like ECG, USG, EEG, Digital X-Ray, PFT, holter, Colour Doppler including common pathological tests for poor, needy and general sections of the society as per our capacity, from nearby villages and far off. Apart from general beds, indoor in 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, equipped with knowledge and expertise for handling various types of medical cases. A team of medial, non-medical staffs 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. Physiotherapy department is also functioning regularly by experienced physiotherapist from whom people are getting benefitted.

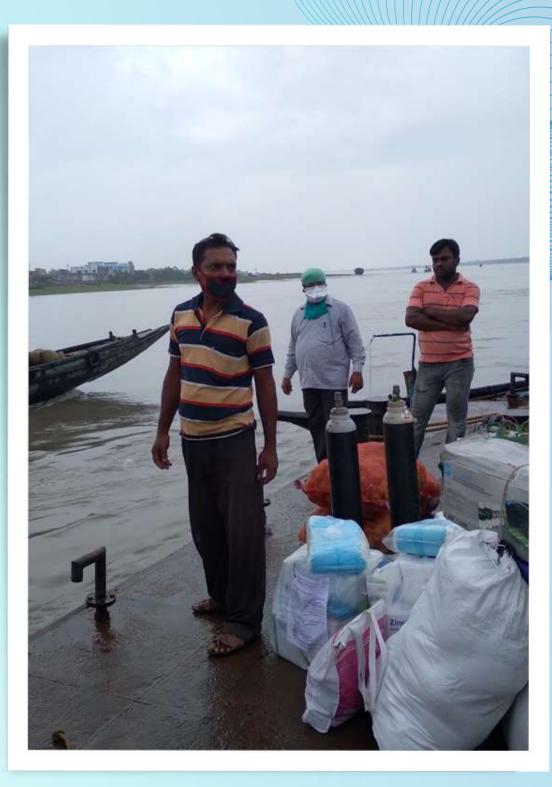
Top class diagnostic facilities like OPD, Ophthalmology, Cardiology, Diabetology, ENT are functioning smoothly as before.

HUMANITY HOSPITAL IN SUNDARBAN

The Hospital came into existence just after the natural calamity, devastating cyclone named AILA in the Gangetic Delta at Sundarban Biosphere at Bay of Bengal.

After the devastating storm AILA in Sundarban area in 2009, the Chairman of Humanity Trust had undertaken massive relief work at different places of Gosaba Block from May 2009. It was felt by Dr. Ajoy that the village, Santigachhi, Lahiripur in Gosaba Block, one of the remotest places in Sundarbans, needed the service for a prolonged period. Humanity Hospital continues to provide health care services at those places where population is more than 200,000. Humanity Hospital started providing various health services to the rural people of the area through community outreach program, from a temporary shelter. In order to strengthen the ongoing program by scaling up the existing program, they planned to upgrade the existing facility with required infrastructure and modern machineries, equipments and quality human resources. Their services benefitted scores of rural mass of the area, still there is urgent need to set up a system to reach all the far-island population of the area who has no access to quality health services. People of the area need to travel a long distance for any medical problem.

Ultimate aim of the project is to provide quality health services to all.



INSTITUTE OF COMMUNITY DEVELOPMENT (WOMEN EMPOWERMENT, HEALTH AND EDUCATION) GOVERNED BY: HUMANITY TRUST (Regd.No.3163/1993) **AT BANKURA**

Spukur - Kalagachia, P.O. : Joka, P.S. : Thakurpukur, Kolkata - 700 104 E-mail : hhumanity3@rediffmail.com

REACH HEALTH CLINIC

COVID-19 PANDEMIC

Y AWARENESS

: 6290404925 S: 9432181375



EXECUTIVE SUMMARY Continued....

The focus of this program is to improve access to and affordability for medical and health care services for the poor and under privileged people across the State of West Bengal.

Humanity Trust has been providing affordable primary Healthcare, education and women empowerment services to low-income, rural and underprivileged communities in Bankura district in West Bengal. Through out-patient Healthcare centre setup in densely populated areas with insufficient quality Healthcare facilities, we help the disadvantaged people to live a healthy life.

Our organization has been effectively working to counter the staggering inadequacies in Indian Healthcare sector. Our focus is on accessibility, availability and affordability. We have a unique and innovative service delivery model which is scalable and replicable. We have also adopted Sustainable Philanthropy to ensure continuous service towards our communities. Started with one Hub centre, (INSTITUTE OF COMMUNITY DEVELOPMENT) in Bankura District Sonamukhi Block, we have grown to have 5 primary Healthcare units covering General Medicine, Paediatric, Gynecology, etc.



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, 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. Ajoy Kumar 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, hand sanitizers in addition to food kits. Gave Nutritional foods to pregnant mothers and lactating children.





The Hospital extends hand to the underprivileged community in the society with:

MEDICAL SERVICE $\stackrel{\text{transform}}{\Rightarrow}$ Reaction: Must address imminent challenges and ensure clarity amongst the team and stakeholders.

Free treatment with medicines. All Treatment under Single roof. • 3 Units are running successfully.



more sustainable delivery model. emerging needs.

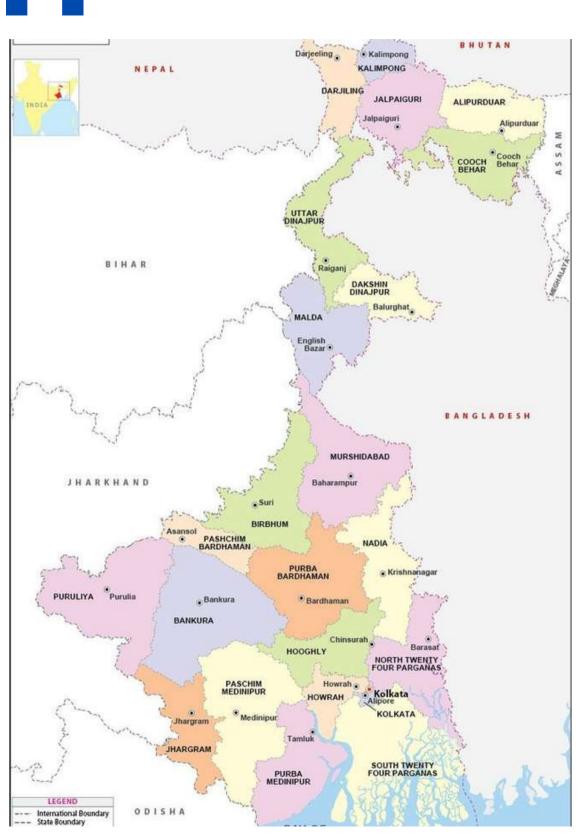
a scenario to deliver long term requirements. safety and adapting the customer experience. capacity.

- \therefore Resilience: Must work to restore disrupted initiatives and adopt a
- \therefore Recovery: Need to adapt projects and portfolios to align with new
- \therefore Recognize the New Reality: Must create more strategic options and
- \precsim Focus more on remote work, system automation, supply chain
- \cancel{x} Adapting to new reality has become one of the most important goals. To provide extra indoor facility for COVID at all Govt. Hospitals as well as all private Hospitals and Nursing homes with higher bed

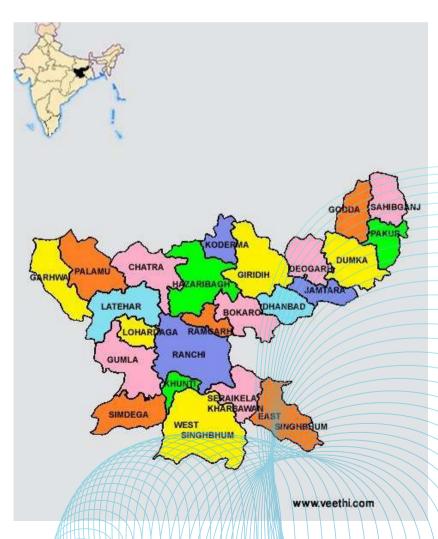
OUR REACH

West Bengal, Odisha and Jharkhand-Regions

- \cancel{x} 9 Districts/3 States
- \bigstar 674 villages and 18 No. Of Wards
- \bigstar 61318 Families
- \precsim 276676 Beneficiaries







RATION QUANTUM TABLE

ltem	Qty. (Kg/Ltr)		
Rice	110210 kg		
Red Lentil	11021 kg		
Soyabean	2204 kg		
Cooking Oil	5510 ltr		
Potato	44084 kg		
Onion	22042 kg		

MEDICINE DISTRIBUTED

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 (650 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

1. Bankura District, West Bengal

 \Rightarrow No. Of Villages 112 Villages.

☆ Per kit cost INR 664.00

 \therefore No.of ration kits distributed/families covered are 988 \cancel{x} 17884 patients to whom medical support is provided through medical camps.

1806 no.of Lactating women, children and pregnant mother are benefitted.

A High Rich Protein Food(NUTRIMIX) provided.

3 5305 no.of adolescent girls and women to whom Sanitary Napkin were provided. 3 Total no,of beneficiaries reached 29137.



 \cancel{k} No.of villages 91 villages.



2. Purulia District, West Bengal

☆ Per kit cost INR 664.00

2 No.of ration kits distributed/families covered 736 $\cancel{1}$ 16332 no.of patients to whom medical support is provided through medical camps.

2007 no.of lactating women, children and pregnant mothers are benefitted.

 \Rightarrow High Rich Protein Food(NUTRIMIX) is provided. 3 6306 no.of adolescent girls and women are provided with Sanitary Napkins.

 $\stackrel{\scriptstyle \leftarrow}{}$ Total no.of beneficiaries reached 27733.

3. Jhargram District, West Bengal

 \Rightarrow No. Of Villages 95 Villages.

 \Rightarrow Per kit cost INR 664.00

 \therefore No.of ration kits distributed/families covered are 1365.

18617 patients to whom medical support is provided through medical camps.

3166 no.of Lactating women, children and pregnant mother are benefitted.

A High Rich Protein Food(NUTRIMIX) provided.

 $\cancel{2}$ 7093 no.of adolescent girls and women to whom Sanitary Napkin were provided. $\cancel{2}$ Total no,of beneficiaries reached 34609.



4. Sundarban Coastal Area, West Bengal

 \cancel{x} No.of villages 101 villages.



☆ Per kit cost INR 664.00

 $\cancel{2}$ No.of ration kits distributed/families covered 296. $\cancel{12796}$ no.of patients to whom medical support is provided through medical camps.

2705 no.of lactating women, children and pregnant mothers are benefitted.

 \Rightarrow High Rich Protein Food(NUTRIMIX) is provided. \cancel{x} 2169 no.of adolescent girls and women are provided with Sanitary Napkins.

☆ Total no.of beneficiaries reached 16914.

5. Kolkata Slum & Red Light Area, West Bengal

 \therefore No. Of Wards 18.

☆ Per kit cost INR 664.00

 \approx No.of ration kits distributed/families covered are 912.

 \cancel{x} 13902 patients to whom medical support is provided through medical camps.

 \approx 2440 no.of Lactating women, children and pregnant mother are benefitted.

☆ High Rich Protein Food(NUTRIMIX) provided.

3 5119 no.of adolescent girls and women to whom Sanitary Napkin were provided.

 \Rightarrow Total no, of beneficiaries reached 25291.



6. Mayurbhanj District, Odisha

 \Rightarrow No.of villages 121 villages.

☆ Per kit cost INR 664.00

 $\cancel{2}$ No.of ration kits distributed/families covered 2166. 24385 no.of patients to whom medical support is provided through medical camps.

 \Rightarrow High Rich Protein Food(NUTRIMIX) is provided. $\cancel{1}$ 6106 no.of adolescent girls and women are provided with Sanitary Napkins.



2 4310 no.of lactating women, children and pregnant mothers are benefitted.

☆ Total no.of beneficiaries reached 43896.

7. Balasore District. Odisha

 $rac{1}{12}$ No. Of Villages 66 Villages.

 \Rightarrow Per kit cost INR 664.00

 \therefore No.of ration kits distributed/families covered are 1783.

 \cancel{x} 17323 patients to whom medical support is provided through medical camps.

 \Rightarrow 1922 no.of Lactating women, children and pregnant mother are benefitted.

☆ High Rich Protein Food(NUTRIMIX) provided.

3 5481 no.of adolescent girls and women to whom Sanitary Napkin were provided. 3 Total no,of beneficiaries reached 32211.



8. West Singhbhum District, Jharkhand

 \cancel{x} No.of villages 61 villages.

- ☆ Per kit cost INR 664.00
- $\cancel{2}$ No.of ration kits distributed/families covered 1590. 21732 no.of patients to whom medical support is provided through medical camps.
- 3532 no.of lactating women, children and pregnant mothers are benefitted.
- \Rightarrow High Rich Protein Food(NUTRIMIX) is provided.
- 3 5060 no.of adolescent girls and women are provided with Sanitary Napkins.



Total no.of beneficiaries reached 36661.

9. Simdega District, Jharkhand.

 $rac{1}{12}$ No. Of Villages 27 Villages.

 \Rightarrow Per kit cost INR 664.00

 \therefore No.of ration kits distributed/families covered are 1185.

 \Rightarrow 19516 patients to whom medical support is provided through medical camps.

 \approx 2131 no.of Lactating women, children and pregnant mother are benefitted.

☆ High Rich Protein Food(NUTRIMIX) provided.

3600 no.of adolescent girls and women to whom Sanitary Napkin were provided. 30224.







IMPLEMENTATION PROCESS

In Sundarban Coastal and 24 Parganas(North) in West Bengal, ration distribution as well as outreach Medical camps were conducted through 6 supervisors, 81 community Volunteers who selected the beneficiaries after visiting each and every household. In the district of Bankura and Purulia in West Bengal (Tribal area) ,ration distributions as well as outreach medical camps were conducted through 9 supervisors, 168 Community Volunteers who selected the beneficiaries after visiting each household.

In 18 Wards, Slum and Red Light Area in Kolkata, ration distributions as well as outreach medical camps were conducted through 3 supervisors, 26 Community Volunteers who selected the beneficiaries after visiting each place.

In the District of Mayurbhanj and Balasore in Odisha (Tribal area), ration distribution as well as outreach medical camps were conducted through 6 supervisors, 64 Community Volunteers who selected the beneficiaries after visiting each household.

In the District of West Singhbhum, Simdenga in Jharkhand (Tribal area) ration distribution as well as outreach medical camps were conducted through 4 supervisors, 41 community Volunteers who selected the beneficiaries after visiting each place.



PERMISSION FROM LOCAL GOVERNMENT:

Since Humanity Trust was awarded "PADMASHRI" award on 20th March 2018 for its Social Welfare work for socioeconomically backward classes people, Humanity Trust is approached by the different bodies from different remote corners of the various areas.

TOKEN SYSTEM:

Tokens were distributed by our Community Volunteers 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 Community Volunteers reached the ration for those who are unable to move

For Medical: Only those people could attend to the outreach medical camps on post COVID who were examined first by our trained Community Volunteers and declared as suspected and they need Community care.



RECORDING DATA:

All kits distributed were to be signed by mentioning all details of the beneficiary (name, age, no.of members in the family, contact details and signature) to avoid double counting. Our volunteers are 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 their earning member due to COVID, families infected and with disabilities.

Door to door visit, 28 Supervisors, 380 Community Volunteers and Local Body were engaged in the selection process.



THE IMPACT OF THE PROJECT

Food Security:

Distribution of dry rations to the poorest people in the most backward areas to whom no other kind of help (Govt/Private) is available, have ensured their survival. It assured that men, women and children do not have to 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.

West Bengal witnesses spike in number of adenovirus cases among children:

Adenovirus causes mild cold or flu-like illness which can affect people of all ages, according to US Centresfor Disease Control and Prevention (CDC)



West Bengal witnesses spike in number of adenovirus cases among children:

Continued.....

Symptoms:

Infected people may have relatively mild symptoms like cold or flu, a fever, and a sore throat, or acute bronchitis, pneumonia, conjunctivitis and acute gastroenteritis which is an inflammation of stomach. Adenovirus can cause mild and severe illness but the latter is relatively uncommon. People with weak immune system, existing respiratory or cardiac diseases are at higher risk of developing severe illness from Adenovirus.

Transmission:

The virus is usually transmitted by physical contact with an infected person, the United States Centers for Disease Control and Prevention said. It can also be spread through the air(via coughs and sneezes) or a patient's stool; for example: while changing diapers.



HEALTHCARE INFRASTRUCTURE NOT ADEQUATE TO MEET THE SURGE

Food Security:

The infection can affect any group, but younger children with comorbiditis like congenital heart disease, severe malnutrition, etc are at a higher risk requiring medical attention.

More than 5,200 Acute Respiratory Infection cases have been reported due to adenovirus. While the West Bengal government feels there is no evidence of a viral epidemic in the State at present but the pediatric Wards across most government and private hospitals are overflowing with patients getting admitted with various complications arising out of the adenovirus. It ranges from severe Conjunctivitis, temporary loss of vision, acute respiratory distress and severe form of viral pneumonia.

While some of these are reversible with strong medicines including steroids, for some children the damage, particularly to the lungs, is more long term and permanent, Senior health experts said.



DENGUE AWARENESS

What is Dengue?

Dengue is caused by a virus that is mostly transmitted by the bite of female mosquitoes of the species Aedes aegypti. Dengue symptoms range from none to serious flu-like symptoms. A small proportion of people develop severe Dengue, which can be fatal.

There are four closely related Dengue viruses, which are called Dengue serotypes. Although recovery from infection gives immunity from the same Dengue serotype, it also increases the risk of severe Dengue if people are later infected by a different serotype.



What are current treatments for Dengue?

There are no specific antiviral drugs to treat dengue infection. Acetaminophen or Paracetamol can be taken to control muscle aches and fever. Non-steroidal anti-inflammatory drugs such as ibuprofen and aspirin should be avoided. Hospitalized dengue patients must be closely observed and their fluid intake carefully managed, according to strict guidelines. In countries where early detection and such medical care is available, the fatality rate from dengue has dropped to below 1%.

The current available vaccine is limited to people aged 9-45 years old who have had at least one previous episode of dengue virus infection. Several additional dengue vaccine candidates are under evaluation. The lack of treatment options increases the risk of people developing severe dengue, which is potentially fatal.



DENGUE AWARENESS Continued.....

What new treatments for dengue needed?

Dengue-specific treatments are needed to treat the disease at different stages and to reduce the risk of an infection progressing to severe disease.

How do you get Dengue?

Insect bites: the virus that causes dengue can be transmitted by the bite of infected female mosquitoes of the species Aedes aegypti and, to a lesser extent, the species Aedes albopictus.

Mother to child: possible transmission from mother to child during pregnancy or child birth.

Rare cases of transmission via blood products, organ donation and transfusions.



WHAT ARE THE SYMPTOMS OF DENGUE?

Dengue?

Dengue can have no symptoms or cause only mild illness, but it can also cause flulike symptoms such as:

- \Rightarrow High fever
- \therefore Severe headache
- \therefore Pain behind the eyes

- \Rightarrow Swollen glands
- ☆ Rash

 $\stackrel{\scriptstyle <}{\scriptstyle \sim}$ Muscle, joint, or bone pains so severe that dengue is sometimes referred to as 'breakbone fever'.

Severe Dengue?

Severe Dengue happens when blood vessels become damaged and leaky, and the number of platelets (cells which form clots) drops. As a result, severe dengue can cause shock, internal bleeding, bleeding gums or nose, organ failure and death. The symptoms of severe dengue include: \cancel{x} Severe abdominal pain $\cancel{2}$ Persistent vomiting \cancel{x} Rapid breathing \cancel{a} Bleeding gums or nose

- $\stackrel{\wedge}{\simeq}$ Lever enlargement
- \cancel{x} Blood in vomit or stool
- \Rightarrow Potentially fatal

HOW IS DENGUE DIAGNOSED?

Dengue infection can be diagnosed in several ways, all of which require a blood sample. Reverse transcriptasepolymerase chain reaction detects the virus directly and is the gold standard; it can be used in the first days after infection. Rapid diagnostic tests are also available, which test for a protein produced by the virus called NSI. Serological methods can be used to confirm recent (within the previous 3 months) or past infection.





BUDGET UTILIZATION

Dry Ration

Particulars	Amount (INR)		
Bankura (988 family)	6,48,728.00		
Purulia (736 family)	4,82,728.00		
Sundarban Costal Area (296 family)	1,87,248.00		
Kolkata Slum & Red Light area (912 family)	5,86,976.00		
Jhargram (1365 family)	8,96,400.00		
Mayurbhanj (2166 family)	14,36,232.00		
Balaswar (1783 family)	11,63,992.00		
West Singhbhum (1590 Family)	10,47,128.00		
Simdega (1185 family)	7,78,872.00		

Particulars	Amount (INR)		
Bankura (17884 Patient)	8,58,432.00		
Purulia (16332 Patient)	7,83,936.00		
Sundarban Costal Area (12796 Patient)	6,14,208.00		
Kolkata Slum & Red Light area (13902 Patient)	6,67,296.00		
Jhargram (18617 Patient)	8,93,616.00		
Mayurbhanj (24385 Patient)	11,70,480.00		
Balaswar (17323 Patient)	8,31,504.00		
West Singhbhum (21732 Patient)	10,43,136.00		
Simdega (19516 Patient)	9,36,768.00		



Medical (Outreach Camp)

BUDGET UTILIZATION

NUTRIMIX

Sanitary Napkins

Particulars	Amount (INR)		
Bankura (1806 Lactating Women & Children)	1,40,868.00		
Purulia (2007 Lactating Women & Children)	1,56,546.00		
Sundarban Costal Area (705 Lactating Women & Children)	54,990.00		
Kolkata Slum & Red Light area (2440 Lactating Women & Children)	1,90,320.00		
Jhargram (3166 Lactating Women & Children)	2,46,948.00		
Mayurbhanj (4310 Lactating Women & Children)	3,36,180.00		
Balaswar (1992 Lactating Women & Children)	1,55,376.00		
West Singhbhum (3532 Lactating Women & Children)	2,75,496.00		
Simdega (2131 Lactating Women & Children)	1,66,218.00		

Bankura (5305 Girls
Purulia (6306 Girls &
Sundarban Costal Ar
Kolkata Slum & Red Women)
Jhargram (7093 Girls
Mayurbhanj (6106 C
Balaswar (5481 Girls
West Singhbhum (50
Simdega (3600 Girls



Particulars	Amount (INR)
s & Women)	1,82,556.00
& Women)	2,05,546.00
rea (2169 Girls & Women)	84,711.00
d Light area (5119 Girls &	1,48,500.00
s & Women)	2,30,274.00
Girls & Women)	1,83,656.00
s & Women)	1,62,635.00
060 Girls & Women)	1,30,405.00
s & Women)	82,445.00

TOTAL CARE AND OVERALL DEVELOPMENT OF CHILDREN FROM CATEGORIES LIKE ORPHANS, STREET CHILDREN, **ABANDONED CHILDREN IN BANKURA, PURULIA AND** 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 uncredited, including elderly and shelter less.
- Humanity Trust provides all opportunities for education and overall child development in loving and caring atmosphere for girls and boys from early age of 5 till their higher education ie university level graduation and/or employability programs.

MISSION AND VISSION

Our mission id to provide a 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 round care theese children can fully realize their potential as the next generation of changing India.

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

INTEGRATED MOTHER AND CHILD HEALTH PROGRAM

The proposed program will provide specialized attention to Tribal women and children from rural areas and nearly 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.

WELFARE DEVELOPMENT WORK

Humanity Trust initiated its activities in 1993 by providing health care to poor people from the tribal and rural villages of Jhargram, Bankura, Purulia, West Bengal, West Singhbhum, Simdenga in Jharkhand, Mayirbhanj and Balasore in Odisha 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 Healthcare. Over the last decade, the trust has developed into an integrated Healthcare 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



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, Odisha, Jharkhand and Chattisgarh. They suffer from malnutrition due to the lack of nutrient food and lack of subsidize of free ration available to all families for various reasons. Most Tribal families are too poor to get a square meal everyday, not to speak of nutrient food. As such they suffer from various ailments, chronic diseases, caused by Vitamin deficiency,etc. Humanity Trust will provide them 1800gms nutrient to a tribal child, for a tribal lactating women 2700gms and 3000gms 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 centre's to prepare NUTRIMIX locally. They will procure ingredients for the NUTRIMIX as well 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



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 with a free supply of sanitary pad. Increasing Awareness and Safe Sanitary Practice among Adolescent Girls in Tribal area of Bankura, Purulia, in West Bengal & West Singhbhum in Jharkhand, Beneficiary details from April 2021 to 15 Sept 2021.

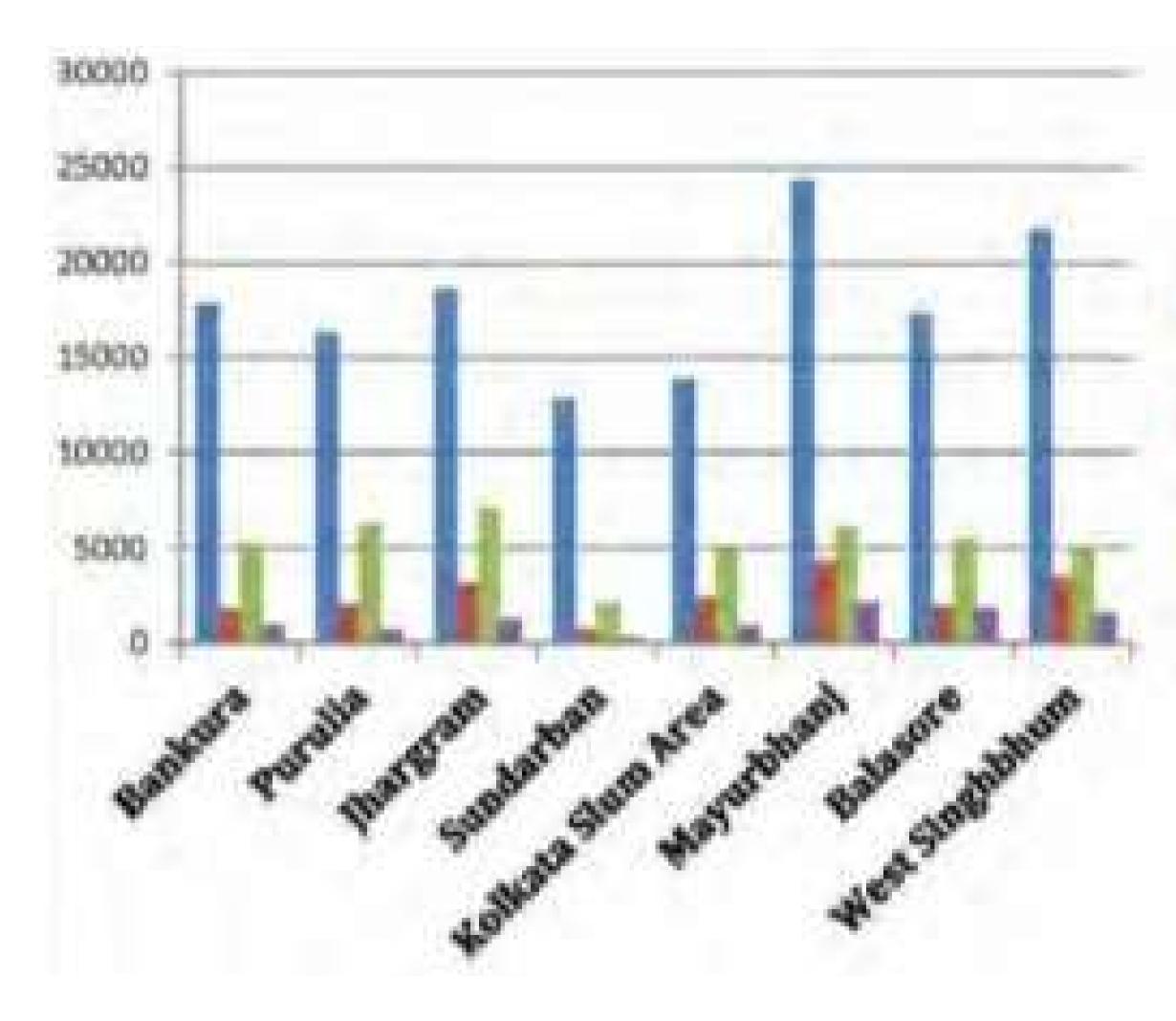
OLD ALIEN MONTHLY SUPPORT:

A large member of senior citizens are facing insurmountable obstacles to pass their daily life for want of the three primary needs: food, cloth and residence. Inspite of several Govt. Schemes for this class of people, 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 their food, cloth and remain unstained.



Humanity Trust has also provided Adult Diapers to bedridden/elderly patients on a regular basis. During this period over 24758 such destitute have availed the initiative taken by our organization.

SI. No.	Outreach Activities	Beneficiary of Bankura	Beneficiary of Purulia	Beneficiary of Jhargram	Beneficiary of Sundarban	Beneficiary of Kolkata Slum Area	Beneficiary of Mayurbhanj	of	Beneficiary of West Singhbhum
F	Medical Support	17884	16332	18617	12796	13902	24385	17323	21732
2	Nutrimix Protein Powder	1806	2007	3166	705	2440	4310	1922	3532
3	Sanitory Napkin	5305	6306	7093	2169	5119	6106	5481	5060
4	Dry Ration	988	736	1365	296	912	2166	1783	1590



I Beneficiary of Medical Support

- 2 Beneficiary of Nutrimix Protien Powder
- 3 Beneficiary of Sanitory Napkin
- **#4 Beneficiary of Dry Ration**