



Aarohi

ANNUAL REPORT

2020 - 21





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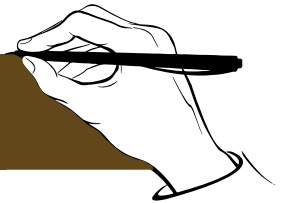
Village - Satoli, PO- Peora, District - Nainital, Uttarakhand - 263138
email - info@aarohi.org | www.aarohi.org | facebook - Aarohi.NGO | instagram - aarohi.ngo



"Laziness is verily the great enemy residing in our bodies. There is no friend like hard work, doing which one doesn't decline."



Message by Executive Director



The past year has been quite challenging for everyone, including Aarohi and the mountain communities. Aarohi family will continue to execute its duties with the hope of a return to normalcy. During the current crisis, the Aarohi family continued to provide services in the fields of education, health, and livelihood, while adhering to government requirements. With a vision to advance towards a nature-loving society, efforts are being undertaken to execute an on-ground, sustainable development model.

We feel proud that despite the aforementioned challenges, under the guidance of the Aarohi Management Committee and its Chairperson, our team has successfully worked in crucial sectors such as health and education, by discharging their responsibilities to reach maximum beneficiaries.

Even during the lockdown, the Aarohi Arogya Kendra, and the Community Health Team provided treatment and emergency services to a population of about 18 thousand population in remote and inaccessible areas.

They also played a crucial role in preventing the spread of infection around containment zones. Additionally, in partnership with the government, Covid-19 vaccinations for frontline health personnel and Covid-test camps were conducted frequently.

From November 2020 onwards, Aarohi launched a new mobile vehicle with state-of-the-art facilities, to benefit the community. A dedicated pathology lab was constructed and an STP plant was set up, to keep the entire campus pollution-free.

While most schools in the state were shut, Aarohi Bal Sansar initiated cluster teaching and home visits, in addition to providing online education to 150 students. To promote self-reliance and the use of natural resources, a Sustainable Rural Livelihood Program was initiated in 30 villages, to utilize local farming techniques and available resources for improving livelihood generation. Despite the adverse conditions nationwide, the livelihoods team toiled to maintain the trust of its producers, cultivators, and buyers.

The arrival of guests was restricted for a period, to prevent the spread of Covid-19. During this time, alternative employment channels such as the manufacturing of various fruits and spices products were introduced.

Aarohi expresses its gratitude to its well-wishers, donors, financial support organizations, government administration,

volunteers, and the community. We feel confident that in the coming years, with your cooperation and support, we will be able to establish a self-sustaining model; safeguarding nature and a promising future for subsequent generations.

Pankaj Tewari, PhD
Executive Director
Aarohi





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Welcome to Aarohi

Aarohi is leading in the development of rural communities in the remote and inaccessible hilly region of Kumaon, Uttarakhand, since 1992. The organisation was established in village Satoli by a young couple having exceptional experience and interest in development practice. Aarohi's journey started through mass planning by organizing the deprived community while keeping in mind the local needs and problems. In this long journey, Aarohi has made relentless efforts to solve the issues of the local population and improve standards of living through various interventions in areas like education, health, afforestation, drinking water and sanitation, and income enhancement, with a comprehensive understanding of the basic needs of this community. At present, we have 89 full-time workers and 272 members from within the country and abroad, associated with the organization. Our team is collectively working with a population of 1,76,500 from 353 villages.

Executive Summary of 2020-21

Aarohi, in the last three decades, has been working relentlessly to achieve its goals. This journey has been smooth because of the cooperation and dedication of the community. Conscious efforts, efficient management, and direction of fellow workers have inspired us to scale up our ongoing programs in remote areas. “Aarohi Bal Sansar”, a school run by Aarohi, having the vision of “holistic development of children”, is consciously making headway to achieve it. Last year, 150 children from

11 nearby villages received education from A.B.S. Continuous efforts are being made to contextualize the curriculum with farming and ecology.

The focus of the health program is community health; Aarohi’s Arogya project is serving a population of 55,727 in 105 revenue villages of Okhalkanda developmental block of Nainital district. The work is predominantly around health awareness focused on maternal and child

Last 3 Years Developments

Particulars	2018-19	2019-20	2020-21
No. of Aarohi intervention villages.	146	146	353
Beneficiary population	66,128	66,128	1,76,500
Total meetings arranged	296	186	231
Total attendance	7,639	5,175	4,107
Females	5,736	3,410	3,102
Males	1,903	1,765	1,005
Male-female Ratio	3:1	9:1	3:01
Total patients attended (Camps + Hospital)	11,823	8,254	5,828
Apricot/ Chuaroo and herb sale (In lacs)	49.45	47.57	32.63
Children studying in A.B.S	162	145	150
Aarohi members	288	270	200
Aarohi workers	104	91	89
Donations received and Income (In lacs)	359.43	28.701	249.54
Expenditure (In lacs)	308.70	354.65	215.78

health. The affirmative impact of our holistic efforts resulted in significant improvement in maternal and child health indicators in our intervention areas. 1,974 patients from Ramgarh and Okhalkanda block were provided health facilities through our Mobile Medical Unit in the year 2020-21.

Efforts are underway to enhance and better equip, Aaroahi Arogya Kendra, our cottage hospital, to provide quality healthcare services to the local population. This year 5828 patients have availed the hospital facilities at Aaroahi

Arogya Kendra. 76 patients were treated in 4 specialist-medical camps. Besides, uterine and obstetric surgeries, kidney stones, gallstones, hernia, hydrocele, and general surgeries were done in the periodic surgical camps arranged by Aaroahi.

This year despite of Covid pandemic, products worth Rs 33 lakh were sold by the Livelihoods unit, which resulted in an increased profit for the Livelihoods team and the local producers. Also, ceaseless efforts are being made to make the Livelihoods unit more profitable.





EDUCATION PROGRAM

Aarohi Bal Sansar

The main objective of the school is to provide quality education to the community. **A.B.S. education is intended towards the holistic development of the students to make them better human beings. Holistic development of students is achieved in a friendly environment through befitting curriculum, creative teaching methods and adequate resources in the school.**

Special attention is paid to the creativity and interests of the students. There are three playgrounds, music room, painting room, laboratory, library, and computer lab, on A.B.S. premises.

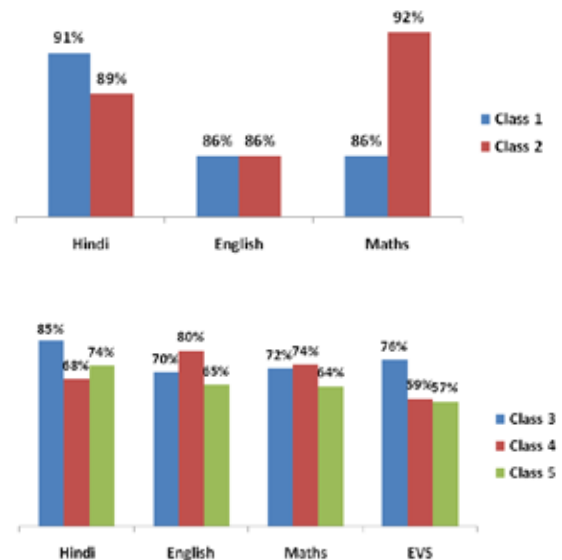
150 children from 11 villages (Kaphura, Simayal, Diyari, Kumati, Chhatola, Satkhol, Peora, Soon, Satoli, Nigrar, Quarab) are enrolled in school for the academic session 2020-21.

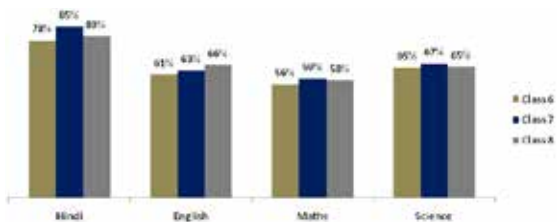
To make the school's teaching activities effective, a parent association of 11 members has been formed. Meetings are held regularly, and timely training, workshops, and educational tours are also organized for the capacity building of the ABS teachers.

- **Online assessment of students-** During

online teaching, timely assessments of students from class 1 to 8 was done. During the online teaching-learning process, we encountered many problems such as poor network connectivity. Simultaneously we realized the vast difference between online and in-school education and tried to bridge the gap, where possible.

Class-wise Annual Progress in each subject.





- **Details of workshops organized for teachers-**

A total of 5 workshops were organized this year, for the capacity building of teachers. These workshops were based on various aspects of learning and teaching through online education. The details of the workshops are as follows-

- **Story Writing Workshop** - The workshop was planned to learn the skills of story writing.
- **Personality Development Workshop** - The workshop was organized to create better self-awareness, one's strengths and weaknesses, and becoming a better person, regardless of the situation. Kindness in human actions was emphasized through different activities.
- **Information, Communication and Technology Workshop (I.C.T.)** - The main objective was to promote information and communication technology through audio-visual aids in distance education. 10 platforms were included in this workshop erg. Chatterpix, Screen Recorder, Google



Meet, Google Drive, Team Viewer, WhatsApp.

- **Life Skills Workshop** - Through the activities of this workshop, our teachers learnt to recognize each other's strengths. Smarter ways of living life, like decision-making and problem-solving skills, were explained in the workshop through case studies.
- **Hindi Language Teaching Workshop** - This workshop was arranged to sharpen teachers' Hindi-teaching skills through different activities that ultimately interest children and boost their enthusiasm to learn the language. The action points of the workshop were constructing sentences from the cards, composing words with the help of alphabets, counting of words, fill in the blanks, completing the story with punctuation symbols.

► **Workshop for Parents-**

The school team organized a one-day workshop with parents and witnessed an enthusiastic participation from the parents. This workshop was about online meetings, video conferencing, and all the essentials of online education.

- **Online survey for parents' feedback based on online learning** - A three-day workshop was organized with all concerned parents to understand the effectiveness of online teaching and relevant strategies. In this workshop, questions related to the evaluation of teaching were also discussed. The sample questions from the questionnaire are given-

How long does it take for their child to work online?

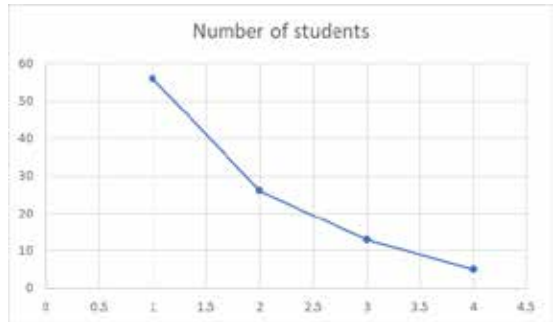


Figure 1. Approximate time required in hours

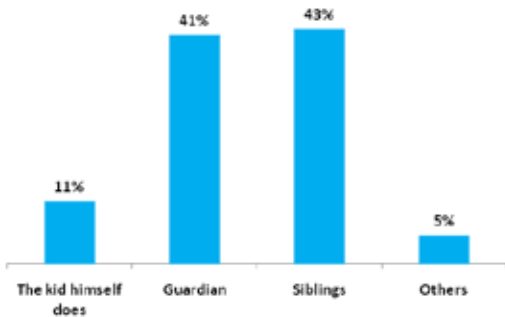
How much time did their children spend on studies apart from online work?



Figure 2. 45 children spared approximately 1hr for studies apart from online classes.

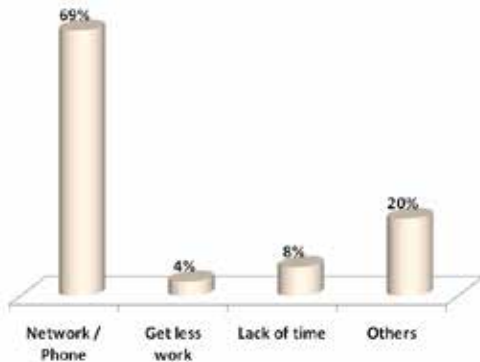
The parents were asked who helps the child in studying at home.

Most of the children's elder siblings helped with their studies and in completing the homework. Only 11 children did the work on their own.



Problems faced during online learning.

The most common problem faced was lack of phone or network.



A Science fest-cum-workshop was arranged for students by Mr. Abrar and Mr. Gaurav, fellows from the organization “PRATHAM”. Various live experiments on reflection, refraction, and path of light, electric magnet, and magnetic field, friction bottle fountain, balloon siphon, balancing of different objects with the help of center of gravity, were conducted by the students, with a thorough understanding of the scientific concepts. Chief guests, parents, and visitors went through all the stalls where

the students explained concepts learned through the corresponding experiment.

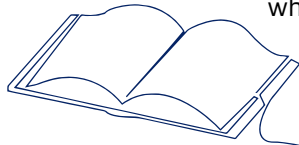
Other celebrated festivals and activities-

- Independence Day Celebrations** - While following the appropriate Covid protocol, Dr. (Col.) Chandra Shekhar Pant, V.S.M., Chairperson, Aarohi, hoisted the national flag, followed by the rendition of the national anthem, by all the attendees. A heartfelt tribute was also paid to the brave Indian soldiers.
- Republic Day Celebration** - It is always disheartening to celebrate any event in school without the presence of its students, but the pandemic protocols demanded it. Republic day was marked by flag hoisting by Dr. Pankaj Tewari, Executive Director, followed by the national anthem.



► **Online admission for students** The admissions process began on May 15, 2020, by sharing selective information regarding the online admission process, through WhatsApp.

There were 15 new admissions, of which 2 were enrolled under R.T.E.



► **Teachers' community tour** Our A.B.S. teachers were constantly on their toes during the challenging time of this pandemic to ensure the continuity of

the students' education. To monitor the quality of this online teaching-learning method, our teachers made regular home visits. This activity of our teachers was much appreciated and supported by the community.

► **Wipro Earthian Project** It was based on 3 main topics - waste management, biodiversity, and water conservation. The students from classes 6 to 8 completed the project under the supervision of the teachers.

• **Waste and Management Project** included excursions in the local vicinity, where students learned about waste, types of waste, and recycling. Students talked to the local community about the current types of waste and their management versus the conventional/traditional ones.

• **Biodiversity Project** taught students about different types of animals and birds in their vicinity.

• **Water Conservation Project** brought various water sources in Peora village to the students' notice. They also interviewed the community members on public taps, natural springs, streams, hand pumps, etc. Through these interviews the students found out that these natural springs are around three to four hundred years old and run clear water to date. Many of these natural springs have completely dried.

► **Blocks-** ABS was donated some wooden "learning blocks". These blocks are of immense help to the learners, regardless of their age, in learning different subjects and skills.



- Numbers, patterns, shapes, small-large, up-down, forward-backward, right-left, etc.
- Geography and the concept of maps.
- Concept of tall buildings, bridges, houses, etc.
- Helpful in explaining mathematical concepts.

Honesty Shop: We opened an unsupervised shop in the school with the principle, *“My Honesty My Identity”*. The shop's sole purpose was to teach values like honesty, a sense of responsibility, and self-discipline, to the students. It also induced the spirit of ownership

and students started taking care of the shop like their own home. This shop had education-related material with the price written at the bottom; students buy things and voluntarily pay the right price for the object.

► **Survey related to online teaching:** This survey was done by the senior teachers of A.B.S. to know and understand the various activities used for online education in other local colleges and schools.

► **Annual planning 2021-22:** Our teachers prepared a yearly plan for the year 2021-22. Due to COVID-19, regular planning was backed up by contingencies, that in case schools did not open online teaching-learning would be continued. Although if the schools re-open and



like regular observation, periodic workshops on capacity building of teachers, exposure visits for students, volunteers' intervention would be done.

Note: We welcome volunteers every year for 7-14 days in March, 20 days in April, 7 days in August, and 10 days in October. To reach out to us, write to principal.abs@aarohi.org

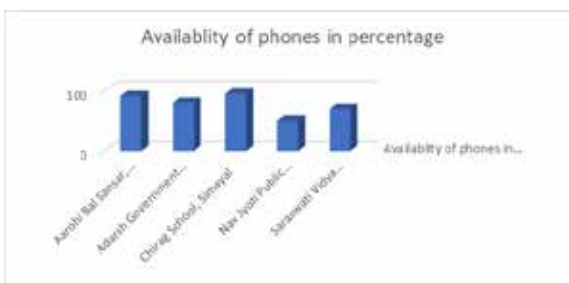
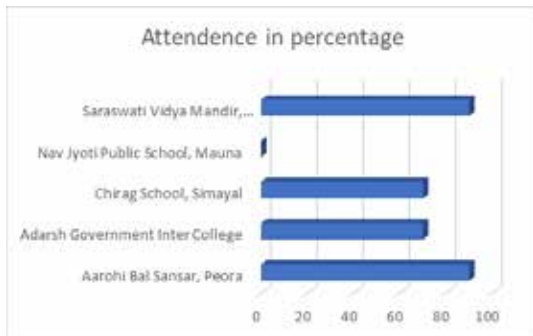
org

Key Features of the school -

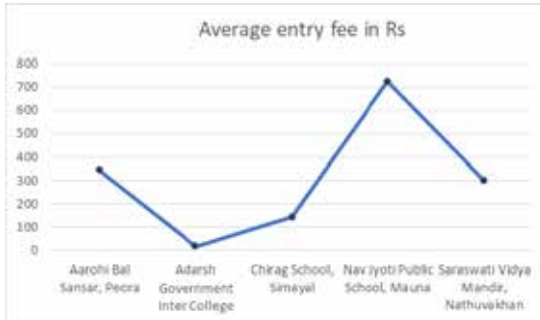
- Excellent student-teacher ratio (9:1)
- Well-equipped classrooms and adequate teaching aids
- Collection of trained and experienced teachers with most teachers from the community.

Operation of schools and status of classes-

Sr. No.	Name of the school	Class	Run by	Admission process
1	Aarohi Bal Sansar, Peora	LKG- 8th	Non-Governmental Organization	Open for all students
2	Adarsh Government Inter College, Peora	6th - 12th	Government of Uttarakhand	Open for all students
3	Chirag School, Simayal	LKG- 5th	Non-Governmental Organization	Selected (18) seats
4	Nav Jyoti Public School, Mauna	LKG- 8th	Private Individual	Evaluation and entry fee
5	Saraswati Vidya Mandir, Nathuvakhan	LKG- 8th	Private Individual	Evaluation and entry fee



Attendance of children in online classes



- Properly functional for last 27 years
- Periodic selection of children in Navodaya and other reputed schools.
- Participation in other academic activities the national level
- Compliance with all the components of the Right to Education Act

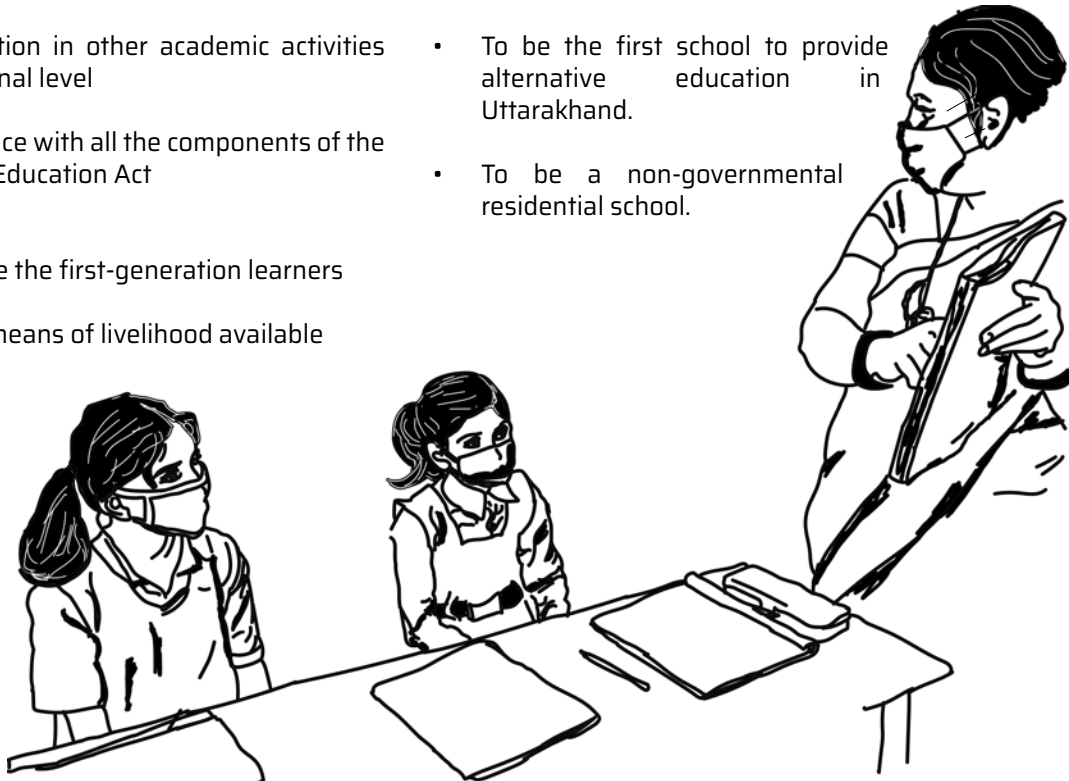
Challenges

- To literate the first-generation learners
- Limited means of livelihood available

- We are planning to step towards offering secondary education.
- Lack of proper educational opportunities for children with special needs
- Geography of the terrain brings up various problems for online learning
- Increased expectations among parents during online teaching

Prospects

- To be the foremost NGO run school in the Ramgarh block, offering education up to grade 12.
- To be the first school to provide alternative education in Uttarakhand.
- To be a non-governmental residential school.



Education Outreach Program

Considering the worldwide pandemic, education has been directly and indirectly affected in many parts of the world. The school closures have taken all education stakeholders by surprise. Many schools, teachers, and families lack guidance about preparing for educational continuity and psycho-social support to students, during long-term school closures. Online teaching was a significant challenge faced in the mountain villages. In response to this problem, village-based remedial classes and art-based workshops for primary and secondary learners were started.



Remedial Classes

With the support from parents and village officials, remedial classes were piloted in three villages in the Okhalkanda development block of the Nainital district. Locally trained facilitators for each village, carried out the sessions daily, following the national pandemic guidelines. This was done in consultation and prior planning with the teacher trainer. Activities through storybooks, flashcards, worksheets, and Jodo Gyan material, were carried out to strengthen conceptual learning. 50 students from three villages attended

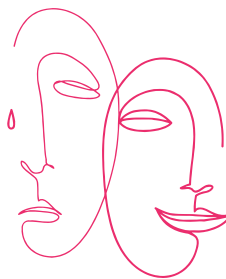
the classes and have shown keen interest in continuing them. However, due to rising Covid cases nationwide, these classes were halted until further notice.



Theatre Workshop

Amid indefinite school closures, while educators were conducting trials on flexible learning modes, the Aarohi Education outreach team took a creative step to creatively connect with children through performing arts. With the support and trust **Happy Children's Library**, village Seem, near Khairna, theatre workshops were conducted every fortnight with two batches of learners.

Arts have always been a fun way for children to express themselves, their emotions and explore their unique skills. This intervention aimed at using theatre and dance as a medium, for building social, emotional, and communication skills. Various fun activities were done during the process to improve flexibility, balance, and coordination. The initiative culminated in theatre production for village kids and elders.



Contextualizing Education with Farming and Ecology 2020-21

To make education more meaningful and experiential for rural hill children, there is a need to bring a fundamental change in our attitude towards education. Aarohi, in collaboration with the Duleep Matthai Conservation Trust, began the development of referenced learning materials. This year, a webbook was prepared after completing about 50 content materials, their illustration, and layout work under the course structure. All these materials are being linked to the goals of standard-appropriate teaching. Parents will be able to contribute to the learning of their child taught under different subjects, keeping in mind the child's background- farming and ecology. A module of various alternative means is also being prepared for the use of teachers. Despite the national lockdown this year, farming activities at the A.B.S. polyhouse continued robustly. We hope that this project will be implemented as soon as possible - whether online or offline.



YouthWing

The Youth Wing program was started in 2010 to strengthen the youth physically and mentally, develop their skills and qualities, raise awareness amongst the children about their community and its challenges, unveil and nurture their hidden talents, boost their confidence, and awaken the spirit of self-reliance in them.



Our activities in the year 2020-21

- Cycling training for 30 youth
- Army training for 45 youths, out of 26 young cleared to race, and 9 earned the medical assessment.
- Sunday Sports Event: 45 youths participated in "Khel Mahakumbh" organized in March 2021. Sports played, were Kabaddi, Cricket, and athletics.



Women Empowerment at Supai

Aarohi has been working towards girls' health and education in the Bhaisiachana block of Almora district for the last eight years. The project is designed around education, including the countenance of scholarship, computer education, and life skill education. Along with this, an activity center is being run to make girls self-reliant for their education.



The health program brings health awareness and establishes communication with the community for further intensive collaboration. Scaling up the program this year, in the existing intervention area of health and education, we have added 6 more villages with 729 total families and an overall population of 3,121, where 1,566 are females whereas 1,555 are males.

► **Education Program** - Scholarships from Rs 2,000 to 20,000 is given through H.K.T. Memorial fund to the girls who need financial assistance to pursue an academic course, degree, or diploma of their interest.

► **Activity Center** - Two activity centers are established and are being smoothly operated in collaboration with the villagers. The syllabus is covered through sports and other activities for children from classes 1 to 5 and 6 to 8. Simultaneously there is a library with around 1,000 books for children to read in the activity center.

► **Other activities** - The purpose of working in the culturally rich district of Almora, is to preserve the local culture and promote good food, a healthy lifestyle, dialect, agriculture, and art. Music and other art forms are promoted in the center. We receive enthusiastic participation from children and many local women.

► **Computer Education** - Computer centers are run for two different batches, standards 6-8 and 9-12. Activities like life skill sessions, sports, and art-crafts are effectively carried out to develop children and youth.

► **Health Program** - To promote maternal and child health, we have started yearly health intervention in 6 villages this year. Along with this, three adolescent groups have been formed to provide awareness and sensitization about health and education to adolescent girls.

Keeping in view the rural environment and health risks involved, geriatric groups are being identified and formed. This year, 8 meetings were held to inform the local people about the health program.

CASE STUDY

I am Babita; I am 32 yrs. old. I live in Chhani Haidya village with my husband two daughters. I am a homemaker and look after all the farming. When I conceived for the third time, I could not get the A.N.C. checkup done because of the unavailability of the services. Then Aarohi health workers did awareness through home visits. I talked to one of the health workers and

ASHA, who guided me for further checkups and follow-ups. They told me about the nutritional needs during pregnancy, need for personal and domestic hygiene. At the onset of labor, Aarohi health worker and ASHA accompanied me to the hospital to Almora. I gave birth to a healthy child. I thank Aarohi for their timely guidance and help.

Testimonials of Scholarship Girls

Divya Supyal, a resident of Supai village, studies in class 8. She is a scholarship beneficiary of the Hari Krishna Trivedi Memorial fund. Divya is deeply passionate about computer learning; she is a quick learner and pays attention very keenly from day one. Along with being punctual, her attendance is 100% and helps other kids in learning.

eligible for this scholarship program. The life skill lessons I have received have helped me sail through the difficult times in my life.

I am **Daya Jadaut**. I live in Supai village, and I am currently pursuing a post-graduation in Arts. I am a beneficiary of a scholarship program by Aarohi for the last 8 years. I have been receiving this scholarship since grade 11. This scholarship helped me buy my books, uniform, and other essential school items. I thank Aarohi for considering me

I got dance education for the asking from Aarohi. I started participating in cultural events after I enrolled in college for 12th. It has been four years now. I have been doing cultural events at various places in India like Allahabad, Hyderabad, Sikkim, Punjab, etc. I got a chance to participate in the Mukteshwar half marathon and other Adventure camps. Coming from a small, underdeveloped village, it is huge to get such exposure and platform to explore and expand my skills. I thank Aarohi from the bottom of my heart and wish to be associated with the organization if I can give back what I have received.



HEALTH PROGRAM

Program Overview

The COVID-19 Pandemic is challenging health systems across the world. Having communities at the center of the primary healthcare services, is the key to delivering services and essential to carry out public health functions. The behavioral change in population and empowerment of communities regarding their health depends upon the quality of primary healthcare services they get. Aarohi's Health Programme is committed to providing quality primary health care that is equitable, accessible, and affordable, emphasizing reproductive, maternal, newborn, children, and adolescent health. During this pandemic year, the program efforts focused on early identification and referral of critical cases, prevention, and pandemic awareness activities in the communities.



Clinical Health

Aarohi started essential healthcare services in 1992 to meet the desperate need of people in a remote village in the Nainital district in Uttarakhand. The cottage hospital Arogya Aarohi Kendra (AAK) currently provides outpatient, inpatient, pathological laboratory, advanced diagnostic services like radiology, X-ray, E.C.G, dental and surgical care services to the rural mountain communities.

Throughout the pandemic and national lockdown, AAK continued its exemplary service of providing quality primary healthcare and emergency services to the rural population. For the covid-19 positive cases, our clinical doctors and paramedics played an essential role in early identification and appropriate referrals. Patients from faraway villages visited the clinic for emergency medical services. 5,828 patients benefited through AAK, in the year 2020 - 21.



We thank our clinic doctors, Dr. Puneet Sigh, Dr. Himanshu Upreti, Dr. Ruma Mukherjee, Dr. Mukul Bisht, Dr. Col. C. S. Pant, VSM and Dr. Bula Roy, for their service during these tough times.

Highlights of clinical activities:

- This year we attended to 227 patients of age 60 years and above. Of these, 113 were females and 114 were males who came to AAK from nearby villages. The clinic fulfilled the need for senior, routine health checkups and provided access to essential medicines.
- A separate register with the travel history and health of the patients visiting AAK was separately maintained during this period to enable tracking of cases in the region.
- We received generous donations this reporting year; we have upgraded our autoclave from manual to electronic. This



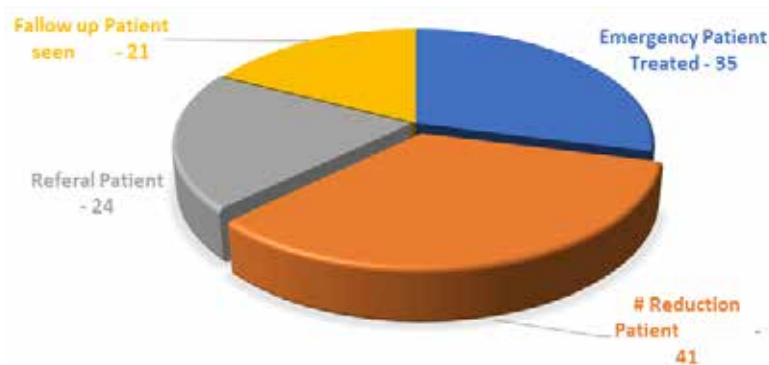
has helped us to strengthen the infection prevention unit.

- AAK established a Sewage Treatment Plant (S.T.P.) on the campus to treat the liquid waste which is generated in the hospital. The recycled water is now used for irrigation and washing purpose. This has helped us achieve the goal of making our campus eco-friendly and free from biomedical waste hazards.
- For the last few years, we ran our pathology laboratory within the O.P.D. of the hospital. On January 01, 2021, we inaugurated our newly built, dedicated laboratory in the hospital.
- While being based in Satoli village, we have a well-equipped hospital set up with X-Ray and ultrasound facilities. The lockdown restrictions limited the patients' travel to Haldwani, and our clinic got the opportunity to provide the essential services of X-ray diagnosis and fracture reduction treatment. The total number of patients for X-rays was 133, and X-rays done with different views was 283, in the year 2020 - 21.
- Dental health has an impact on every aspect of our lives but is often taken for granted. Our dental clinic at Aarohi Arogya Kendra is equipped with modern instruments. A dedicated dentist helps us provide both standard and advanced dental care services to the rural mountain population.

- AAK conducted two outreach health screening camps in Khamri and Jalalgaon villages, in partnership with Central Himalayan Environment Association, Nainital (CHEA).
- AAK also conducted three outreach health

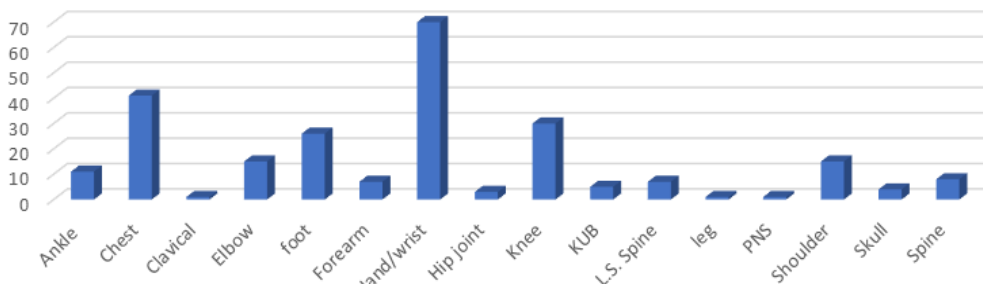
camps this year in Mona, Kwarab, and Bhiyalgaon villages.

- Although our school Aarohi Bal Sansar was closed this year, AAK team of paramedics and doctors, screened all the students biannually, for their health needs.



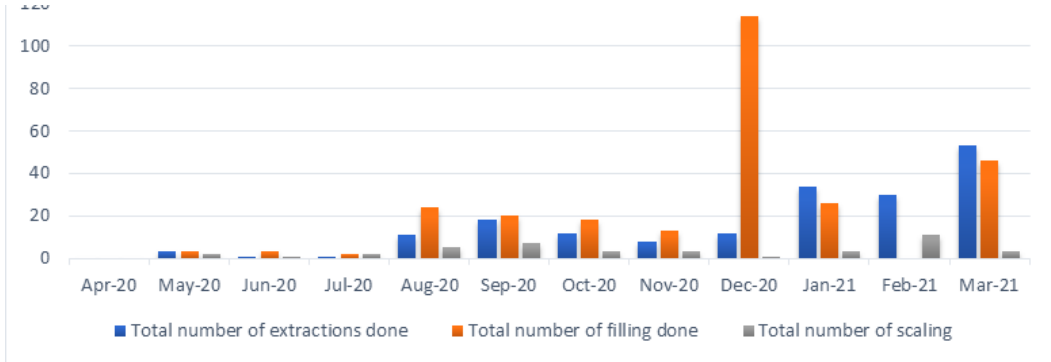
X-ray patients' profile 2020 - 2021

X-ray 2020-21



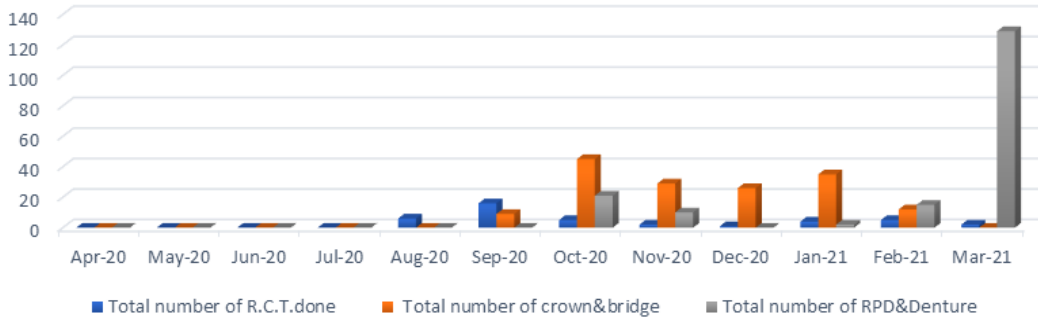
Classification of X-rays done at Aarohi Arogya Kendra 2020 - 2021

Common Dental services at AAK



Common Dental services at AAK 2020 - 2021

Common Dental services at AAK 2020 - 2021



Advanced Dental services at AAK 2020 - 2021

Mobile Medical Unit (MMU)

The Mobile Medical Unit (MMU) service started by Aarohi Arogya Kendra in April 2014 has completed seven years of its service in the Ramgarh, Dhari, and Okhalkanda blocks of Nainital district. The MMU has completed 694 camps till now. The MMU camps conducted from the 1st to 8th day of each month cover more than fifty-seven thousand people in 127 villages, over a geographical area of 500 kms. From monitoring the growth of neonatal cases, early identification of pregnancy-related complications, to referring critical cases at the right time to more advanced health centres, the MMU is playing a vital role in improving the maternal and child health of the hard-to-reach population. Geriatric patients continue visiting the monthly camps to access their routine checkups and medicines. Even during the pandemic, our sincere doctors and paramedics continued to provide the camp services.

To improve our healthcare services for people in remote villages of rural Kumaon, we aspired for a new MMU bus with better facilities and equipment. The Swiss Himalayan Amity (S.H.A.), NAJBO Foundation, and Bajaj Auto made this dream come true with their generous financial contribution and support. October 3, 2020, marked the inauguration of our new MMU bus. We are grateful to our team of doctors, paramedical team, well-wishers and friends of Aarohi, who have supported, encouraged, and joined us on this incredible journey. The new MMU is equipped with a pathological laboratory, a pharmacy, and modern diagnostic equipment like E.C.G. and Ultrasound.

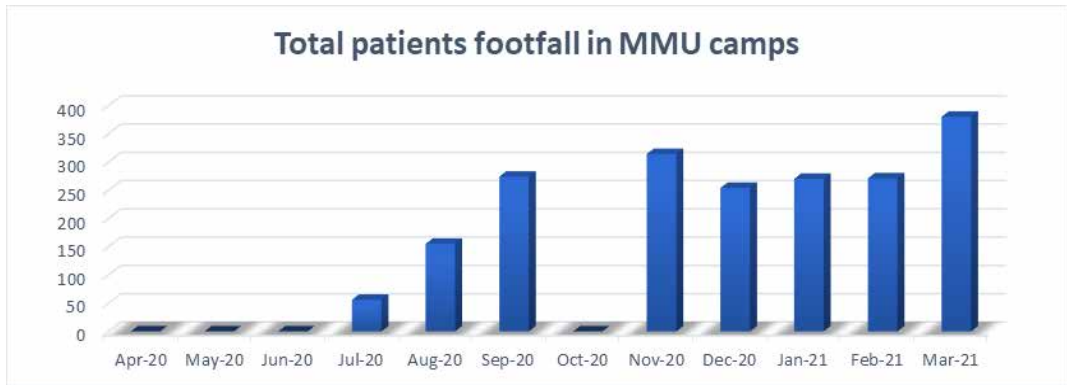
- The Monthly MMU camps are highly beneficial in **routine A.N.C. checkups** of pregnant women, identifying High-Risk Pregnancies (H.R.P.), providing counseling services, and guiding them for institutional deliveries.
- The availability of gynecologists has increased the access **to reproductive healthcare and family planning services** in MMU camps. Trained midwives in the MMU team, have created a conducive environment for counseling services, upon the guidance of our camp doctors.
- The MMU's presence has led to uninterrupted access to essential medicines for **hypertension and diabetes patients**, particularly the **senior** age group.

During April, May, and June 2020, we did not conduct the MMU camps as the first Covid-19

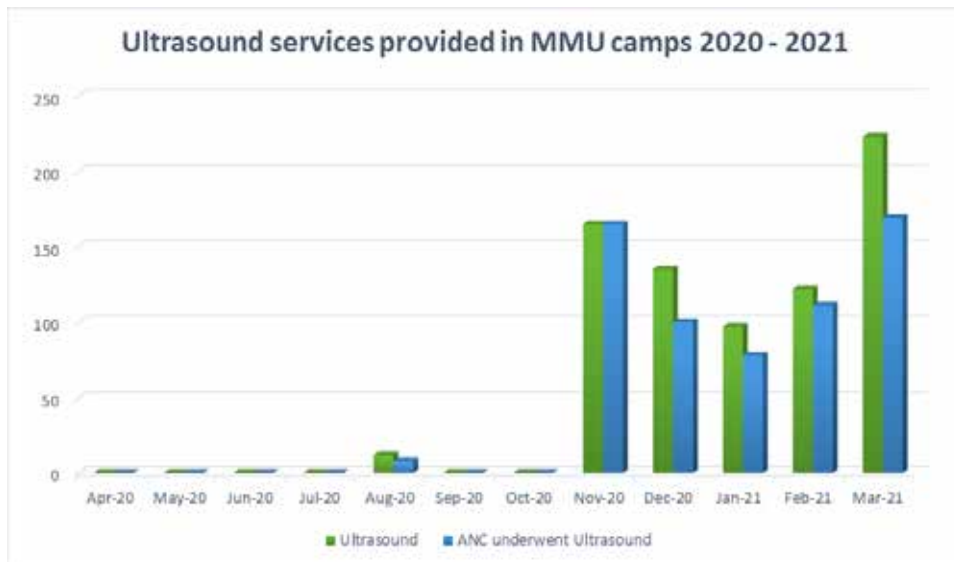


wave lockdown instructions were severe and conditions were uncertain. In October 2020, we could not run the MMU camps because of the handover process of the old MMU bus to the

state government. ***We thank our camp doctors, Dr. Ritu Jain, Dr. Navin Jha, Dr. Vivek Sharma, Dr. Rajiv Kapur and Dr. Aarti Chaturvedi for providing their services.***



Patient footfall in MMU camps 2020 - 2021



Ultrasound services provided in MMU camps 2020 - 2021

Sr.No	Particulars	2018 - 19	2019 - 20	2020 - 21
1	Total patients benefitted	11,823	8,254	5,828
2	OPD patients treated in Aarohi Arogya Kendra	1,592	1,569	2,230
3	Female Patients	732	759	1,135
4	Male Patients	811	779	1,040
5	Children	49	31	55
6	In-patients treated	60	57	11
7	Laboratory Tests	6,675	9,120	5,175
8	X Rays	170	261	283
9	Ultrasounds	1,132	1,484	936
10	Total Villages Covered	50	105	120
11	Total Dental Screening	605	310	1,020
12	Number of Specialist Camps	5	6	4
13	Patients treated in Specialist Camps	795	482	76
14	Surgeries done in Camps	58	44	0
15	Mobile Medical Unit Camps	88	96	53
16	Patients treated in MMU Camps	6,006	5,532	1,974
17	Pregnant Women benefitted in MMU camps	1,607	1,862	828
18	Ultrasounds done in MMU Camps	812	1,402	631

MMU Clinical Services over last 3 Years

Highlights and challenges of Covid-19 response 2020 - 21:

- Sensitization and capacity building of our paramedics and frontline health workers on Covid-19 was the first task we initiated as early as March 2020, in the Okhalkanda, Ramgarh, and Dhari blocks of the Nainital district. Key messages were disseminated, and action points were provided to the frontline health workers as a part of the preparedness and awareness drive.
- The nationwide lockdown and the long march of migrant workers resulted in virus transmission from urban places to mountain villages. All the village-bound workers and their families were put in poorly maintained quarantine centers, creating more problems. We distributed spraying machines, gloves, hand sanitizers, and soaps in our intervention villages per the request from gram pradhans and ASHA workers. Migrants kept in quarantine centers at the village level, ASHAs, Anganwadi workers, pregnant women, recently delivered women, and families of malnourished children benefitted through this activity.
- Providing correct information at the right time is essential to communities during this uncertain period. Our health team did its best in delivering relevant content to the communities in the local language. Key messages and instructions were on:
 - ▶ Appropriate use of mask and safe mask disposal.

- ▶ Key messages and instructions on home quarantine were circulated among villagers, focusing on care for people returning to the villages.
- ▶ A specific pamphlet was sent out to pregnant and lactating women to seek appropriate care and guidance.
- ▶ Using the guidance from the government, we also prepared audio content with crucial messages which were aired on the Kumaon Vani Community Radio. We provided information to the local Pradhans and key local resource persons about the precautions and care needed to check COVID-19 contagion.
- ▶ A specific poster on myths vs. facts on corona was circulated to the communities.



- We continued to do community surveillance and report the Panchayat level gaps to Block and District administration. Our team, visited 30 quarantine centers to understand the ground realities and support the Gram Pradhans and frontline health workers.
- Our frontline health workers participated in a webinar organized by Azim Premji University, National Alliance for Maternal Health and Human Rights, Sheher & Community of Practitioners on Accountability and Social Action in Health (COPASHA). The event was held on May 29, 2020, where we shared our pandemic response experiences with health workers from other parts of the country.
- In August 2020, we got the opportunity to be invited as guest speakers in the webinar conducted by Gandhi Fellowship on the topic “Healthcare system in India and Covid-19”. About 60 plus participants attended the webinar, where we shared our experiences working in rural and hard-to-reach areas.

Challenges

The challenges faced during the Covid-19 lockdowns affected the total annual footfall of the patients treated through the Aarohi health programme, especially by MMU and surgical camps:

- During the peak of the second wave in the month of April 2021 to June 2021, most of the outreach activities were stopped considering the lockdown conditions.
- Access to primary, secondary and tertiary health care was a major problem as the limitation of lockdown didn't allow the patients to seek timely health care services.
- Due to the scourge of misinformation rampant during the first two waves, there was a surge in medical skepticism shown by the local population. They were afraid to come to health centers for the fear of being detected with Covid-19 and being taken forcefully to quarantine centers and dedicated Covid facilities. Aarohi put all efforts in, to combat the misinformation by conducting awareness drives through different media.
- Unavailability of RT-PCR and Rapid Antigen Test kits for Covid-19 diagnosis were a critical problem for all NGOs. Suspected patients and patients who had come in contact with Covid positive patients found it difficult to get their tests done, as the service is solely being provided by government facilities.



- Non availability of diagnostic services like

Ultrasound and X-ray was a major challenge faced by communities. Aarohi being the only service provider in the area, patients from far away villages also visited the hospital. The paramedics at Aarohi performed maximum fracture reductions during this period.

- Oral health issues are prominent here and were ignored by communities as the dentists were allowed to undertake only emergency/trauma patients.
- Home delivery increased across the rural mountain communities due to the fear of Covid-19 transmission in hospitals.

Aarohi Arogya Kendra was not able to conduct surgical camps as the District Health Administration did not give us permission to conduct surgeries. Prevalence of cholelithiasis (Gall bladder stones) cases is high among the local communities, to which Aarohi is catering. About 30 patients with such surgical needs were referred to Sushila Tewari Medical College for treatment.

Community Health:

Enhancing the health and wellbeing of the population is the prime goal of our Community Health Programme, which we initiated a decade ago. Aarohi started its first Women's Health Resource Centre (WHRC) in 2019, in Okhalkanda block, to make essential health services and health information accessible to rural women. The piloted experience provided us with positive results like enhanced participation from Panchayats, improved surveillance in communities, increased institutional deliveries,

and active participation of adolescent groups. These promising results have directed us to scale up the model covering a population of 16,435 in fifty hard-to-reach villages of the Okhalkhanda block.

Women's Health Resource Centers:

Capacity building of frontline health workers, enumeration of the population, health surveillance, conducting periodic health surveys, conducting home visits to address the needs of individual cases at the household level, collecting and development of I.E.C. materials, immediate referrals, strengthening the Village Health and Sanitation Committees, ensuring



participation of action groups like village level mother's groups and adolescent groups, connecting the population to Mobile Medical Unit and surgical services, coordinating with Primary Healthcare Centers and Anganwadi centres, creating awareness through Swasthya melas are some of the activities through which Women's Health Resource centres attempt to increase the accessibility to primary health care services and health information. During this pandemic year, our frontline workers

prioritized home visits for the critical cases in their villages. The sincere effort from the health frontline workers and MMU services has helped us reach our goal of **zero maternal deaths for the third consecutive year.**

Maternal Health:

The WHRC undertakes maternal health activities through the community health nurses and village health workers. The centre ensures early pregnancy registration, conducts antenatal checkups, and provides counseling to the family for birth and emergency preparedness. Additionally, it ensures postnatal checkups and includes counseling, identifying and referral of high-risk pregnancies and complications, and screening all women for anaemia. 282 pregnant women were given care in 2020 - 2021.



Child health:

The WHRC works in tandem with Anganwadi centres at the village level, to deliver child health services. The WHRC ensures Home Based Newborn Care (HBNC) visits according to the ASHA module guidelines, which includes promoting exclusive breastfeeding and continuous breastfeeding practices, counseling on timely initiation of complementary feeding, and monitoring the growth and development of

children under five. This helps provide essential care for sick children, as defined by Integrated Management of Newborn and Childhood Illness (IMNCI) protocols, which primarily relate to treatment for diarrhea, respiratory infection, and fevers, identification, and referral of high-risk cases, and complications.

Adolescent Health:

Adolescent persons in the age group of 10-19 years make significant choices about their health, and develop attitudes and healthy practices that affect their safety and wellbeing. These choices have an impact on the risk for future chronic and severe diseases. We have adopted the Rashtriya Kishor Swasthya Karyakram (RKSK) strategic framework and modules to align our national health programs. As a part of the intervention, we conducted 23 group work sessions at the WHRC level. Topics like the importance of nutrition, sexual and reproductive health, mental health, injuries and violence, substance misuse, non-communicable diseases were discussed.

Community Mobilization:

Although public gathering restrictions were in place, we used multiple methods to communicate with the communities in the past year to sensitize and raise awareness on various topics on health. Our methods included door-to-door visits by community health workers and ASHAs, awareness campaigns through posters, community radio, limited village-level meetings.

In community meetings, we continue to discuss and debate several health topics like water and



sanitation, growth monitoring, complementary feeding, complications during pregnancy, the importance of institutional delivery, immunization, antenatal checkups, family planning, menstrual hygiene, and diarrhea. Ensuring the protocols, 126 mothers' group meetings were held during this period, with 1,698 women participating in the sessions.

Capacity Building:

The effectiveness of interventions promoting safe pregnancy, safe and clean deliveries, healthy child growth and development,

depends upon the capacity of the health system to deliver a high-quality intervention. However, in the absence or insufficient availability of public healthcare services here in the mountains, health workers are trained in providing integrated reproductive and child health services. Capacity building of our frontline workers remains an ongoing process for Aarohi.

Building the capacities of ASHAs and Traditional Birth Attendants (T.B.A.s) in the villages is one of the critical activities of the WHRC.

Table 1: Maternal health indicators - Ante-Natal Care

Sr. No	Maternal health indicators - Ante-Natal Care	2019 - 20	2020 - 21
1	Total Pregnant women given care	188	282
2	Pregnant women who got ANC checkups in MMU (Medical Mobile Unit)	121	213
3	Pregnant women identified as Anaemic	82	168
4	Total High-Risk Pregnancies (HRP) identified	35	79
5	Pregnant women who were referred for complications	18	44

Table 2: Maternal health indicators - Deliveries

Sr. No	Maternal health indicators - Deliveries	2019 - 20	2020 - 21
1	Total Deliveries	42	167
2	Total Live births	39	156
3	Total Institutional deliveries	25	69
4	Total Home deliveries	17	98
5	Deliveries conducted by Aarohi trained TBA	14	59
6	Complications identified during delivery	03	21
7	Women referred due to complications during delivery	02	16

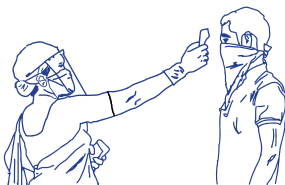
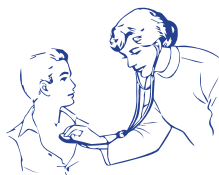


Table 3: Maternal health indicators - Post Natal Care

Sr. No	Maternal health indicators - Post Natal Care	2019 - 20	2020 - 21
1	PNC women given care	43	179
2	Women who had complications within 42 days of delivery	05	37
3	Women referred due to complications after delivery	03	19
4	Total Eligible Couples	572	1,225
5	Couples who are using temporary contraceptives	37	171
6	Eligible couples who were advised on family planning	190	691

Table 4: Child health indicators

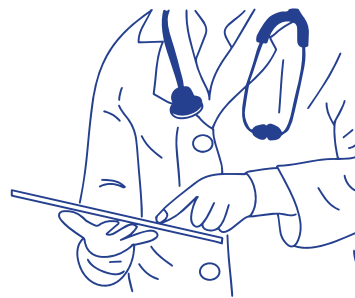
Sr. No	Child health indicators	2019 - 20	2020 - 21
1	Total Children 0-6 months	103	234
2	Infants 0-6 months exclusively breastfed	76	184
3	Total Children 0-5 years	789	1,241
4	Children 0-5 years monitored for growth and development	393	773
5	Severe Acute Malnourished children 0-5 years (red category)	27	84
6	Children 0-5 years who had Diarrhoea	23	106
7	Children 0-5 years who had Pneumonia	09	15
8	Children 0-5 years with other illness	18	67
9	Children 0-5 years referred due to all illness	16	183

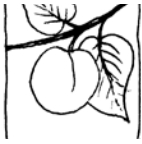
Table 5: Community Mobilization

Sr.no	Community Mobilization	2019 - 2020	2020 - 2021
1	Total number of Mothers' group meetings	108	126
2	Total participants	807	1,698
3	Total Adolescent group meetings	10	23
4	Total participants	209	549
5	Total number of Village Health Sanitation Nutrition Committee (VHSNC)	14	30
6	Total Participants	151	484

Table 6: Vital Indicators

Sr.no	Vital Indicators	2019 - 2020	2020 - 2021
1	Maternal deaths	0	0
2	Neonatal deaths	3	3
3	Infant deaths	1	1
4	Children under 5 years - deaths	1	0





LIVELIHOOD PROGRAM

Aarohi's Livelihood programme, which is an income-generating programme for farmers and local people, operates on two approaches.

Institutional Approach:

Aarohi's institutional approach works further at the community-based and institutional levels. Institutionally it produces 31 products, and at the community level, it focuses on quality farming through cultivation of herbs and apricot trees. Aarohi purchases these herbs and apricot kernels for the development of value-added herbal products, apricot oil and apricot oil-based bodycare products. The community-based work is further done by the skilled hands of the women in Self-Help Groups for income generation.

In one of our units, 11 members manufacture 31 products. We have dealings with 151 marginal farmers in the Himalayan region, in 26 villages. We make our products available to our customers all over India, with an annual turnover of around 33 lakhs.

Expertise:

Training for soap making, developing different types of soaps, tree plantation, nursery development, environmental protection, scientific versus traditional farming.

Description of Products

#	Product Name	Product Type
1	Natural Oil	2
2	Scrub	2
3	Soap	10
4	Herbs	8
5	Herbal Tea	6
6	Herbal Salt	3
7	Freshener	2
8	Gift box	4

PRODUCT TYPE

■ 1 Natural Oil ■ 2 Scrub ■ 3 Soap ■ 4 Herbs
■ 5 Herbal Tea ■ 6 Herbal Salt ■ 7 Freshener ■ 8 Gift box



Community-based main activities:

- Cultivation and farming of herbs.

- ▶ Facilitating quality herb cultivation through providing seeds and guidance.
- ▶ Adding value to farmers' efforts through procurement, processing, and marketing of herbs.
- ▶ To address livelihoods emerging through the provision of employment to the farmers in addition to their traditional farming methodology.
- ▶ Utilizing the skills of rural women through S.H.G.s - Knitting sweaters, gloves, socks, neck warmers, and other woolen clothing.

Sustainable Rural Livelihoods:

The community-based initiative covers 30 villages in 3 blocks of district Nainital, benefitting 2000 families and using 45 hectares of land for a sustainable community-based livelihood system.

This program aims to deliver quality farming techniques to peasant families living in the intervention villages. Cultivation of herbs, millet, pulses, edible seeds, and natural oils, is the main objective of these approaches. The idea of this intervention is to create a sustainable rural livelihood by utilizing existing community resources.

Particulars	2018-19	2019-20	2020-21
Total producer beneficiaries	990	1,385	1,200
Number of procurement villages	170	182	182
Apricot nuts purchased (In quintals) <i>(Refer point (a) under Community engagement)</i>	6.17	74.31	3.71
Apricot kernels purchased (In quintals)	30.01	66.45	22.30
Apricot kernels processed (In quintals)	38.38	41.38	20.00
Dry herbs purchased (In kgs)	386.00	220.70	242.50
Benefit to farmers through the sale of nuts/kernels/herbs (In INR) <i>(Refer point (a) under Community engagement)</i>	870,511	1,940,446	601,662
Total number of people involved in processing activities <i>(Refer point (b) under Community engagement)</i>	12	14	15
Benefit to people involved in processing activities (In INR) <i>(Refer point (b) under Community engagement)</i>	79,380	118,534	16,547

Sales & Marketing

Particulars	2018-19	2019-20	2020-21
Total number of products	13	14	16
Total revenue-product segment wise (In INR lakhs)	49.45	47.57	32.63

HOME STAY PROGRAMME



Aarohi has been using the concept of “Village Home Stay” informally from the year 2013-14 with the purpose of encouraging tourism in rural areas, increasing housing facilities, providing self-employment opportunities, and a source of additional income to the homestay owners. Presently, several homestays are operational in various intervention villages, with the technical and financial support from Aarohi.

Activities for the year 2020-21:

- In the year 2020-21, the homestay families’ collectively submitted a proposal to the Uttarakhand Tourism Department to make the area tourism cluster. The project has been approved, in which various types of infrastructure works are to be initiated to promote tourism in villages Peora, Satkhol, and Satoli, which shall cost about 80 lakhs.
- In the year 2020-21, the Chief Development Officer, Nainital, visited all homestay families and appreciated how community tourism is being promoted in unison through Peora Homes Autonomous Co-operative.
- After the announcement of the tourism cluster by the District Tourism Officer, Shri Arvind Gaur, a meeting was held with the village heads of the three villages, members of the Home Stay families, and the members of Aarohi, in which the establishment work to be done in the tourism cluster was discussed.
- Due to Covid 19 in the year 2020-21, the business of homestay families was meager. Still, due to the changing form of tourism (work from home) and the demand, the homestay families made the homestays available for an extended period.
- In the year 2020-21, all homestay families have been registered as per the rules of the Uttarakhand Tourism Department.
- Peora Homes Cooperative has prepared and sold various products for market sale, to promote local products and create new employment opportunities this year, which the people highly appreciated. This work will continue in the future.

Future vision

Peora Homes Autonomous Cooperation’s objective is to connect tourism with local products and relate it to employment and promote experiential tourism by linking homestay initiatives with agriculture and the environment.

FROM VOLUNTEERS

N.S.S. team

A team of 10 volunteers, N.S.S. candidates from Shri Ram College of Commerce, Delhi, arrived at Aarohi. During their stay, the volunteers visited with the L.P.P., education, and health team to understand their functioning.

5 volunteers joined the education team and had discussions with the ABS teachers, interviewed them, visited their parents in the villages, and tried to assess their problems. They also ran a fundraising drive, followed by a feedback session with the Aarohi executive team, to discuss the progression of Aarohi.



FINACIAL OVERVIEW

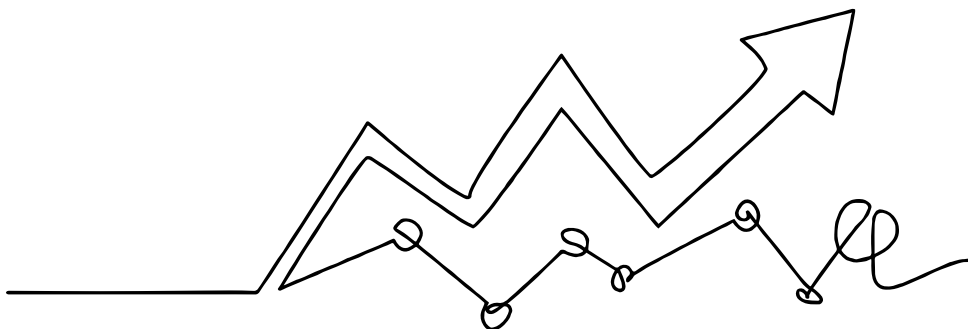
STATEMENT OF INCOME-EXPENDITURE FOR THE FINANCIAL YEAR 2020-21

Abridged balance sheet of Aarohi as at March 31, 2021	
Sources of Funds	Amount (INR)
Unrestricted funds	5,01,16,688
Grants utilized for fixed assets	2,47,70,997
Eramarked grants and funds	4,40,44,770
Current liabilities	19,68,428
Total	12,09,00,883
Application of funds	Amount (INR)
Fixed assets	3,21,16,929
Long term investments	7,18,88,088
Cash and bank balances	84,18,806
Other current assets	84,77,060
Total	12,09,00,883
Abridged Income and Expenditure Account for yaer ended March 31, 2021	
Income	
Donations and grants	1,33,87,812.63

Income from investments and interest	61,32,483.55
Income from livelihood program	35,37,109.72
Other income	18,96,860.00
Total Income	2,49,54,265.90
Expenditure	
Staff Cost	1,27,15,213.00
Cost of matetial consumed (livelihood and health programs)	22,48,658.14
Professional fees and honourarium	14,10,630.00
Depreciation	6,08,861.00
Other cost	45,94,716.35
Total rexpnditure	2,15,78,078.49
Net surplus	33,76,187.41
Abridged Receipts and Payments account for year ended March 31, 2021	
Receipts	
Opening cash and bank	87,53,821

Donations and Grants	1,73,18,971
Receipts from investment and interest	76,89,696
Receipts from livelihood program	35,37,110
Receipts	18,96,860
Total receipts from main activities	3,04,42,636
Refund of income tax	9,79,928
Other receipts, recoveries and adjustment of advances	34,76,246
Total Receipts	4,36,52,631
Payments	
Purchase of fixed assets	75,36,558
Investments including fixed deposits	56,23,079

Income tax deducted at source	4,04,418
Payment of statutory dues	52,223
Repayment of deposits and other adjustments	4,29,187
Revenue payments	
Staff cost	1,21,94,437
Purchases	22,81,000
Professional fees and honouraria	14,66,818
Other expenses	50,72,254
Total revenue payments	2,10,14,508
Grants refunded	1,73,852
Closing cash and bank balance	84,18,806
Total payments	4,36,52,631



Appendices

FOUNDER MEMBERS

Late Pratap Bhaiya
 Late Oona Sharma
 Dr.Sushil Sharma
 Late V. B. Eswaran
 Late Lt. Gen. Gurbir Mansingh
 Mohit Satyanand
 Late Dr. Ajay Dhar

AAROHI MANAGING COMMITTEE

Dr. (Col.) Chandra Shekhar Pant, VSM	Chairman
Mr. Gopal Singh Negi	Secretary
Neha Jacob	Treasurer
Mrs. Premila Satyanand	Member
Mr. Ranjan Joshi	Member
Dr. Navin Dang	Member
Mrs. Sudha Sastri	Member

LIFE MEMBER

Mr. Mohan Chandra Kandpal	Almora
Mr. C.S. Martoliya	Almora
Mr. Ranjan Joshi	Almora
Mr. Chandra Shekhar Pandey	Barrechina (Almora)
Mr. Gopal Negi	Kaphura
Dr. P. L. Arya	Kaphura
Mr. Rajendra Singh Mehra	Mouna
Ms. Anandi Arya	Mukteshwar
Mr. Kunwar Singh Negi	Nathuakhan
Ms. Kiran Singh	Nathuakhan
Ms Julia Singh	Nathuakhan

Mr. Harish Chandra Singh Negi	Nigrar
Mr. Pradeep Gupta	Satkhol
Mrs. Shubha Gupta	Satkhol
Mr. Tikam Singh Bisht	Satkhol
Mrs. Sheeba Sen	Satkhol
Dr. Sushil Sharma	Satoli
Ms. Munni Kabdal	Satoli
Dr. Harish Chandra Pant	Satoli
Mr. Vikram Maira	Sitla
Mr. Sanjeev Kumar Bohra	Dehradun
MR. Arjan Brijnath	Dehradun

Mrs. Diljit Brijnath	Dehradun
Shri Bhawani Datt Kharkwal (IPS),	Haldwani
Dr. Lakshita Joshi	Haldwani
Mr. Vinit Joshi	Haldwani
Mr. Aditya Ahuja	Delhi
Mr. Rajesh Thadani	Delhi
Ms. Anuradha Sharma	Delhi
Mr. Peter Laughton	Delhi
Mr. Subodh Kumar Saigal	Delhi
Mrs. Purnima Saigal	Delhi
Ms. Aishwarya Saigal	Delhi
Ms. Aparajita Saigal	Delhi
Mrs. Smriti Sharma	Delhi
Dr. Puneet Singh	Delhi
Mr. Vishal Bhandari	Delhi
Dr. (Col) C. S. Pant (Retd), VSM	Delhi
Ms. Surbhi Bhalla	Delhi
Ms. Kamiya Dargan	Delhi
Dr. Geeta Pant	Delhi
Dr. Sanjay Jain	Delhi
Dr. Nivedita Deo	Delhi

Mr. Rahul Jain	Delhi
Mr. H.L. Kapoor (Rajiv Kapoor)	Delhi
Mr. Lalit Bhandari	Delhi
Mr. Vivek Gupta	Delhi
Mr. Nitin Gupta	Delhi
Ms. Sudha Sastri	Delhi
Mr. Shrikant Sastri	Delhi
Mrs. Saral S. Tandan	Delhi
Mr. Iqbal Husain Khan	Faizabad
Mrs. Manjula Jhunjunwala	Faizabad
Ms. Jyoti Patil	Maharashtra
Dr. Rajesh T. Mehta	Maharashtra
Dr. Bharti R Mehta	Maharashtra
Mr. Suresh Bhapkar	Nagpur
Ms. Neeraja Joshi	Gurgaon
Ms. Rashmi Birmani	Nagpur
Mr. Sanjay Deshpande	Nagpur
Mrs. Manju Gupta	Noida
Mr. Arun Kumar Gupta	Noida
Mr. Ankit Gupta	Noida
Ms. Juhi Harisinghani	Pune
Mrs. Meena Harisinghani	Pune

Mr. Ajit Harisinghani	Pune
Mr. Anand Vinze	Pune
Mrs. Jayashree Vinze	Pune
Mrs. Pilloo Framjee	Pune
Mrs. Geeta Billimoria	Pune
Mr. Sirish Kulkarni	Pune
Mrs. Raj Arora	Pune
Dr. Kumar Viswanath	Pune
Mrs. Radha Vishwanath	Pune
Ms. Usha Deo	Pune
Mr. Vikash Deo	Pune
Mr. Deepak Deo	Pune
Brig. Vivek Saptnekar, VSM (Retd)	Pune
Mrs. Neela Sapatnekar	Pune
Mrs. Prajakta Sarwottam	Pune
Mr. Charles Dobbin	UK
Ms. Jaqueline Lane	UK
Ms. Robyn Davidson	UK
Mr. Leeds	UK
Mrs. Fiona Mohan	UK
Mr. Barrows	UK
Ms. Hazel Jackson	UK

Ms. Gill Smith	UK
Ms. Liz Roberts	UK
Mr. Kenneth Robbie	UK
Ms. Jodie Giles	UK
Ms. Lucy Lloyd Price	UK
Mr. Barry Morley	UK
Mr. Richard Chamberlin	UK
Dr. Michael Priest	UK
Mr. Russell Scott	UK
Mr. Nigel Ried	UK
Ms. Aparajita Singh Breur	USA
Dr. Thomas Breur	USA
Ms. Nimmi Harisinghani	USA
Mr. Alope Mansingh	USA
Mrs. Yasmir Bisal	USA
Ms. Maya Mansingh	USA
Dr. Sandeep Gupta	USA
Ms. Fatima Gupta	USA
Mr. Romi Sahai	USA
Mr. Abhinav Saigal	USA
Mr. Sunanda Joshi	Haldwani
Mr. Saurav Debnath	Haridwar

Mr. Shreyas Shankar	Hyderabad
Mr. Jagdish Bhandari,	Nainital
Mr. Diwan Singh Bisht	Nainital
Mr. Praveen Sharma	Nainital
Mr. Kalyan Paul	Ranikhet
Ms. Anita Paul,	Ranikhet
Mr. Yoganand Sinha	Allahabad
Mrs. Maya Sinha	Allahabad
Mr. Peter S. Chowfin	Bareilly
Mrs. Kalpana Ghai	Chandigarh
Mr. Subhash Puri	Chandigarh
Mrs. Jasjit Mansingh	Delhi
Dr. Surjit Mansingh	Delhi / USA
Mrs. Jasleen Dhamija	Delhi
Mrs. Sukhada Gupta	Delhi
Air Vice Marshal V. B. Batra	Delhi
Lt. Col. Rajat Chatterjee	Delhi
Ms. Niharika Puri	Delhi
Mrs. Neelakshi Chatterjee	Delhi
Col. Sudhir Tripathi (Retd)	Delhi
Mrs. Vijaylakshmi Baig	Delhi
Mr. Ranjit Dhillon	Delhi
Mr. Ibadat Singh Dhillon	Delhi

Mr. Sanjeev Saith	Delhi
Mrs. Laxmi Ahuja	Delhi
Dr. Kusum Jasuja	Faizabad
Dr. Rohit R. Nair & Mrs. Prajakta Sarwottam	Goa
Dr. Raju Usgaocar	Goa
Dr. Smita Usgaocar	Goa
Dr. Ashok Agrawal,	Jaipur
Mr. Mohan Lal Gupta,	Jaipur
Mr. Abey Pandaplakkal John	Kerala
Mr. Aashish Chaudhary	Meerut
Dr. Bharaj Lal	Maharajanj
Mrs. Meera Gurabaxani,	Mumbai
Mrs. Arti Gurbaxani	Mumbai
Mr. H. Gurbaxani	Mumbai
Mr. Avinash Gurbaxani	Mumbai
Mr. Kaushik Chatterjee	Mumbai
Mrs. Suchishree Chatterjee	Mumbai
Mr. Kurush Pavri	Mumbai
Dr. Amrish S. Vaidya	Mumbai
Mr. Mahesh M. Natekar	Mumbai
Ms. Shweta Gopalachari	Mumbai
Mr. Vikram Suresh Nerurkar	Mumbai

Ms. Arti Shenvoy	Mumbai
Mr. Milind Gandhi	Mumbai
Mrs. Lopa Gandhi	Mumbai
Mr. V. Venkat Rao	Mumbai
Ms. Priti Rao	Mumbai
Shri Ram Vaidya	Mumbai
Ms. Shilpi Gupta	Mumbai
Ms. Neha Jacob	Pune
Mrs. Monica Shah-Drego	Pune
Dr. Kunal Mehta	Pune
Dr. Ripple Mehta	Pune
Dr. Ravi Chandra	Patna
Mr. Rajneesh Ranjan	Varanasi
Ms. Nicole Kilborn	Australia
Mr. Tim Winton	Australia
Ms. Marissa Howard	Australia
Ms. Helen Peters	Australia
Mr. Arjun M. Hiemsath	Australia
Mr. Kabir M. Hiemsath	Australia
Mr. Steven Langendries	Belgium
Ms. Stefanie Friedel	Belgium
Dr Astrid Christoffersen-Deb	Canada

Mr. David McMinn	Canada
Mr. Vijay Kumar	Germany
Mrs. Margaret Kumar	Germany
Ms. Pilar Palacia	Italy
Mr. Claude Al Tabar	Lebanon
Mr. Peter Furst	Shillong
Mrs. Maureen Furst	Shillong
Ms. Kanika Jain	Singapore/ USA
Dr. Sarah Marti	Switzerland
Dr. Corina Wild	Switzerland
Dr. Robert Graf	Switzerland
Mr Raju Mehra	Sargakhet
Dr. Seemin Qayum	USA
Mr. Sinclair Thomson	USA
Dr. Sanjeev Arora	USA
Dr. Madhu Arora	USA
Ms. Anita Arora	USA
Ms. Sarah Arora	USA
Ms. Siddhi Gupta	USA
Mr. Joshua Kearns	USA
Dr. Anjali Niyogi	USA
Mr. Patrick Staiger	USA

Dr. Vineet Varanasi	USA
Dr. Subhashini Allu	USA
Ms. Medha	USA
Dr. Mukesh Shah	USA
Dr. Neera Shah	USA
Mr. Gurpal Singh Bindra	USA
Mr. Rajeev Butaliya	Delhi
Dr. Himanshu Upreti	Delhi
Dr . Sudhakar Reddy	Chhattisgarh
Mrs. Sangeeta Sharma	Chhattisgarh
Mrs. Geeta Pant	Delhi

Mr. Toposmito Sengupta,	Kolkata
Dr. Tejasvi Bhatt	Ranikhet
Joined This Year	
Dr. Navin Dang	Delhi
Dr. Manju Dang	Delhi
Mrs. Geeta Pant	Mumbai
Mr. Milind P. Mokashi	Mumbai
Mr. Rajiv Kumar	New Delhi
Mr. Ravi Sachdev	New Delhi
Ms. Soma Sri Harsha (Kurnooh)	Andhra Pradesh

ORDINARY MEMBERS

Dr. (Col) Chandra Shekhar Pant	Satoli
Munni Suyal	Satoli
Mohan Chandra Kabdwal	Satoli
Puran Kabdwal	Satoli
Taradutt Kabdwal	Satoli
Renu Kabdwal	Satoli
Puran Chandra	Diyari
Suraj	Diyari
Chandra Shekhar	Diyari
Kamla Bisht	Diyari

Bhuwan Suneri	Diyari
Devendra Sharma	Simayal
Suresh Kapil	Simayal
Bimla Bisht	Peora
Bhupendra Singh Bisht	Peora
Rohit	Satkhol
Ishita	Satkhol
Tikam Singh	Satkhol
Basant Thapa	Satkhol
Janki Thapa	Satkhol
Yashpal Arya	Satkhol

Sanjay Singh Bisht	Satkhol
Neeraj Negi	Kaphura
Bhupen	Chhatola
Pooja Joshi	Sitla
Puran Nayal	Sitla
Deepak Nayal	Sitla
Deepak Pandey	Ramgrh
Poonam Arya	Kool
Pradeep Kumar	Khushyalkot
Tulsi Arya	Dholigaon
Geetanjali	Dholigaon
Suman Arya	Dholigaon
Manju Bisht	Dholigaon
Neha Bisht	Dholigaon
Kavita Arya	Dholigaon
Har Singh	Kalaagar
Deepa	Sirna

Bhagwati Nayal	Bhumka
Mamta Arya	Suni
Chitra Mehra	Suni
Sarita Karki	Chakldad
Neema	kairagaon
Rajani Bora	Kachlakot
Manoj Kumar	kotili
Prakash Chandra	Katna
Sundar Negi	Nigrar
Sushila Bisht	Nainital
Chandrakala Bisht	Nainital
Savitri Karki	Haldwani
Jayesh Mohta	Ghaziabad
Pradeep Rastogi	Kotabagh
Maya Jaraut	Supai
Swati Pant	Delhi
Brijesh Kumar	Rudrapur

Details of Grant Donation FY 2020-21

Donor Name	Donated Amount	Support Area
Ms. Raunak Patel	15,000	Education
Mr. Shriram Jatar	10,000	Education
Ms. Ratna Barua	2,000	Development

Ms. Ruchira Pant	10,000	Development
Ms. Richa Banerjee	2,000	Health
Charities Aid Foundation India	1,000	Education
Ms. Deepali Saini	3,000	Health
Mr. Rajesh Arora	5,200	Development
Mr. Dinesh Kumar Sharma	20,000	Education
Mr. Gajinder Trehan	5,000	Education
Mr. Alok Tewari	5,000	Education
Mr. Santosh Desai	50,000	Education
Ms. Deepa Bhatt	10,000	Development
Dr. Pankaj Tewari	2,000	Development
Ms. Neeru Tewari	2,000	Development
Mr. Devendra Kumar Sharma	2,000	Development
Mr. Bhupendra Singh Bisht	2,000	Development
Mr. Chandra Shekhar	2,000	Development
Ms. Rama Sekhawat	20,000	Education
M/s ALFA Sights INC.	9,539	Education
Uphills Films	10,000	Health
Ms. Reena Mohan	45,000	Health
Ms. Kamini Gangwal	3,000	Development
Mr. Iram Sultan	4,000	Development
Mr. Mahesh	1,100	Health
Mrs. Shleea Khanna	500	Health

Ms. Pratibha Periwal	20,000	Education
Ms. Richa Puranesh Sav Banj	1,000	Health
Ms. Ishita	500	Health
Mr. Sanjiv Kanwar	10,000	Education
M/s Agarwal Law Associates	5,00,000	Development
Mr. Mukul Rohatgi	9,00,000	Health
Ms. Shagun Chaudhary	5,11,000	Health
M/s Shahzada Ram Satya Wati Charitable Trust	5,000	Health
Ms. Tulsi Hashmatrai Gurbaxani	16,000	Education
M/s CJI Porcelain Pvt. Ltd.	25,000	Development
Swarojgar Vikas Sansthan	5,000	Development
Mr. Govind Singh Dhama	20,000	Education
Dr. Puneet Kumar Singh	50,000	Development
UK Online Givning Foundation	47,908	Education
Ms. Asha Vasant Sheth	1,51,000	Education
Carlin Media LLC	91,374	Other
Mr. Vineeth Varanasi	18,000	Other
Mr. Deep Chandra Joshi	35,000	Other
Mr. Govind Singh Dhama	5,000	Other
Anonymus	2,000	Other

CHIEF DONORS 2020-21

Bajaj Auto Ltd.	Community Health Programme	48,00,000
Bajaj Auto Ltd.	Sustainable Rural Livelihoods Programme	40,00,000
Swiss Himalayan Amity	Mobile Medical Unit	39,36,250
Swiss Himalayan Amity	Rural Development Programme	17,27,600
The Duleep Matthai Nature Conservation Trust	Education Programme	3,00,000



AAROHI TEAM MEMBERS

ADMINISTRATION

DR. PANKAJ TEWARI
GOPAL NEGI
SWATI PANT
DEEP CHANDRA
DEVENDRA KUMAR SHARMA
BHUPENDRA SINGH BISHT
BHUWAN CHANDRA GUTHOLIA
CHANDRASHEKHAR YASHPAL ARYA
MINAKSHI ARYA
BHUWAN SUNORI
BIMLA BISHT
BHAWANI ARYA
HARISH CHANDRA
SUNDAR LAL
RAJENDRA PRASAD
MAHENDRA SINGH NAYAL

HEALTH

KAVIKUMAR
Dr. BULA ROY
Dr. MUKUL BISHT
DR. NISHIGANDHA MAHAJAN

DR. PUNEET KUMAR SINGH
JAGDISH SINGH NAYAL
PRAKASH PANDEY
MUNNI SUYAL
SUSHILA BISHT
PURAN CHANDRA
SAVITRI BISHT
PRADEEP ARYA
PUJA JOSHI
KANCHAN ARYA
NEERAJ NEGI

COMMUNITY HEALTH

CHAMPA MEHRA
HAR SINGH MEWARI
TULASI ARYA
MANJU DEVI
NIHA MEHRA
HEMA
DEEPA PANERU
VIMALA BISHT
MANJU
NEEMA
SUMAN ARYA
KAVITA
NEHA BISHT

SARITA DEVI
RAJANEE BORA
BHAGWATI NAYAL
MAMTA
MANJU PANERU
YASHODA
KAMLA DEVI
PREMA BUNGYAL
REKHA ARYA
POOJA TITGAIN/
SUYAL
JYOTI MAHTOLIYA
ARTI ARYA
SARITA PANERU
MEENA

EDUCATION

BRIJESH KUMAR
GANGOTRI NEGI
NEEMA DEVI
PRADEEP RASTOGI
SANJAY BISHT
JYOTI JOSHI
LEELA NEGI
DEEPA ARYA
POONAM ARYA
DEEPAK PANDEY
NIDHI JOSHI

RENU KABDWAL
NIDHI VYAS
JAYESH MOHTA

HKT- SUPAI

CHANDRA KALA BISHT
ANITA NEGI
MAYA JAROUT
GEETA DEVI
POONAM
CHADANI TIWARI
MAHIMA DOLIYA

LIVELIHOOD

PURAN NAYAL
DEVENDRA NAYAL
BASANT THAPA
SUNDAR NEGI
JANKI THAPA
ASHA NEGI
HARISH CHANDRA
CHAMPA NEGI
KAMLA NEGI
SURESH CHANDRA KAPIL
PURAN CHANDRA KABDWAL
BISHAN ARYA
BHUWAN CHANDRA



GRATITUDE

Publishing the annual report on Aarohi's 28th anniversary, 2020-21, we express our gratitude to the well-wishers and associates of the organization with eternal gratitude -their suggestions, cooperation, support and guidance are the key to the organization's success in achieving its objectives.

We are grateful to our well-wishers and supporters from the local community, who stood by us and gave us their valuable time.

We also express our gratitude to all the institutional and individual donors, whose financial support enabled us to implement and realize our ideas, through necessary resources.

We want to express our gratitude to the members of the Management Committee of the organization who are selfless and inspiring guides for the organization.

We also express our heartfelt gratitude to all government, non-government organizations, volunteers, and doctors, who have benefitted Aarohi with their services. This generous support has empowered us to scale up our health services to remote areas. We would also like to express our gratitude to the patients who have made our presence meaningful and given us a chance to serve them and propagate this program.

We would also like to express our heartfelt gratitude to national and foreign volunteers

who joined the organization, cooperated with us, helped expand the organization's scope, and bring fresh ideas to our daily work and policies.

We also express our deep gratitude to Swiss Himalayan Amity (SHA). They tirelessly raise funds for financial support to Aarohi, which enables the organization to be creative in every program. We would also like to thank the parents and guides associated with Aarohi Bal Sansar, whose important suggestions and participation resulted in a positive qualitative change in the school's operations and teaching-learning process.

We would like to express our gratitude for the cooperation and guidance received from the local government and administration. We also want to express our appreciation for all the dedicated workers associated with the organization, who rose magnificently to the pandemic-related challenges and discharged their responsibilities well. Without their loyalty and accountability, our work would not be possible.

Aarohi team would like to express its gratitude to the well-wishers, voluntary workers, and local community associated with Aarohi, with whose help and support, Aarohi's continued ascension towards community service has been possible, for the last 28 years. We express our gratitude to Manish Khanna & Co., Nainital, Chartered Accountant, for financial verification and to Campaign Art and Printers- Almora for publishing the annual magazine.





Village - Satoli, PO- Peora, District - Nainital, Uttarakhand - 263138
email - info@aarohi.org | www.aarohi.org | facebook - Aarohi.NGO | instagram - aarohi.ngo