

SAMARTH ANNUAL REPORT

2011-2012

List of Members: 2011-2012

Governing Body

- Dr. L. Jeyaseelan : Honorary President, Prof. & Head, Department of Biostatistics, Christian Medical College, Vellore
- Dr. Shuba Kumar : Secretary, Social Scientist, Samarth, Chennai
- Dr. Rani Mohanraj : Treasurer, Psychologist, Samarth, Chennai
- Dr. Saradha Suresh : Former Director, Institute of Child Health (ICH), Chennai
- Dr. B.W.C. Sathiasekaran : Prof. of Community Medicine, Sri Ramachandra Medical College and Research Institute (SRMC&RI), Chennai
- Dr. R.Thara : Director, Schizophrenia Research Foundation, (SCARF), Chennai
- Dr. Lakshmi Vijayakumar : Psychiatrist, Founder Member Sneha Chennai
- Dr. Krishnakumar : Principal, Elite School of Optometry, Sankara Nethralaya, Chennai
- Dr. Suresh Kumar : Consultant Psychiatrist, Chennai

Advisory Body

- Dr. Lisa Manhart : Associate Professor, Epidemiology, Adjunct Associate Professor, Global Health, University of Washington Center for AIDS and STD, Seattle, USA
- Dr. Kumaraswami : Former Director, Tuberculosis Research Centre (TRC), Chennai
- Dr. Usha Ramakrishnan : Associate Professor, Hubert Department of Global Health, Emory University – USA

Members

- Dr. Keerthi Prabhu : Consultant Psychiatrist, Apollo Hospitals, Chennai
- Ms. Aarthi Kandasamy : Technical Assistant – CHARTED, Voluntary Health Services (VHS), Chennai
- Dr. Visalakshi Jeyaseelan : Lecturer, Department of Biostatistics, Christian Medical College, Vellore

- Ms. K.V.Sripriya : Nutritionist, Research Coordinator, Samarth, Chennai
- Mr. Veerapandian : Assistant Professor, Madras School Of Social Work,
Department of Counseling Psychology, Chennai
- Ms. Sylvia Jeyakumar : Biostatistical Consultant, Bill and Melinda Gates
Foundation, Chennai
- Ms. Basilea Watson : Technical Assistant (Research), National Institute for
Research in Tuberculosis (NIRT), Chennai
- Ms. Premalatha : Data Manager, Schizophrenia Research Foundation
(SCARF), Chennai
- Auditors** : Arasu and Arunachalam, Chartered Accountants
- Bankers** : Canara Bank, St.Mary's Road, Chennai

SECRETARY'S MESSAGE

Samarth has been continuing its work on building capacity in social science research and has been engaging in research activities that have the long term goal of enhancing patient care through improved and better means of health care delivery. Our ongoing research project at the Madras Medical College that seeks to identify a culturally appropriate and relevant depression screening instrument suitable for HIV-care settings is one such study that has the overall goal of incorporating comprehensive mental health care for HIV positive patients, thereby enhancing their quality of life. In the pipeline are other research projects in the field of HIV care which seek to go a step further in terms of adapting culturally relevant mental health treatments for HIV+ people. We are also working to address problems associated with domestic violence through another intervention based study which is currently under review.

On the training front, our social science workshops continue to be popular. Our regular workshops at the Biostatistics Resource and Training Centre (BRTC) at CMC, Vellore held twice every year attract professionals from various disciplines including medicine, social science, psychology, statistics, management and others. We are now seriously planning on expanding the scope and content of our training programmes to include advanced level workshops on qualitative analysis and are also exploring the potential for running online courses. The latter, we believe, would enable a wider reach, making it easy for a lot more people to get trained in social science research methods.

ABOUT SAMARTH

We are a group of epidemiologists, social scientists, psychologists and biostatisticians who share a common vision in advocating for health research. We have extensive research experience in using both qualitative and quantitative methods in several national and international multicentric health projects. These have ranged from projects on domestic violence, adolescent mental health, community mental health to, care and support programmes for HIV positive persons.

Samarth was set up in January 2007 and registered as a society under the Tamilnadu Societies Registration Act, 1956 on 24th May 2007; Samarth has been involved in conducting various research projects and social science training programmes.

OUR OBJECTIVES

- Conducting research to inform policy
- Promoting healthy behaviour through counselling and community education
- Building capacity in epidemiology, social science and biostatistics
- Building partnerships with government and private sectors in health promotion

OUR MISSION STATEMENT

Samarth is committed to creating healthier lives of communities through credible research and sustainable interventions

SAMARTH RESEARCH AND TRAINING ACTIVITIES

RESEARCH

ONGOING PROJECTS

1) Integrating Depression Screening into HIV Care in Southern India

This R21 study, collaboration between Samarth, the BRTC at CMC-Vellore and the University of Washington and proposes to understand how best to integrate a screening for depression into HIV care settings. The proposal was approved by the National Institutes of Health (NIH) USA and later by the Indian Council of Medical Research (ICMR) and the National AIDS Control Organization (NACO) is currently ongoing. Specifically, the study aims to 1) Identify the most appropriate tool to screen HIV-positive individuals in South India for depression. 2) Determine inter-rater reliability between a psychiatrist and a psychologist in diagnosing depression among HIV patients using a structured diagnostic instrument. 3) Identify barriers and facilitators to integrating depression screening into existing HIV-care services and lastly, 4) Estimate the prevalence and correlates of depression among HIV-patients seeking care in an urban HIV clinic.

The pilot study commenced in the month of July 2011. As part of the first phase of the pilot study, inter- rater-reliability between the psychiatrist and the psychologist in diagnosing depression was assessed on 30 HIV positive patients. Test-retest reliability was also done on 63 HIV positive patients for the three depression screening instruments, the MOS social support scale and the Brief COPE to measure coping behavior. Following this the main study, on a total of 300 HIV positive patients attending the ART center at MMC commenced. Inclusion criteria included being heterosexual, between the ages of 18-49 yrs, at least 6-months post-HIV diagnosis, and speaking Tamil (approximately 85% of the population attending MMC speaks Tamil). Exclusion criteria included having a recent HIV diagnosis (e.g., less than 6 months), or receiving any treatment for depression (e.g., anti-depressant medication or psychotherapy). The qualitative component of the study involving focus group discussions (FGD) with doctors and counselors was carried out on November 8th and 22nd respectively. The aim behind doing the FGDs was to explore issues concerning the acceptability of screening for depression, political will to integrate depression screening into HIV-care settings and potential barriers and facilitators. In-depth interviews with HIV-positive individuals and with political decision makers will also be conducted as part of the main study. The study is ongoing.

2) Psychological Distress among Pregnant Women in South India: Towards Intervention Development

This is a Collaborative study between the University of Washington (UW), USA under the Global Centre for Integrated Health of Women, Adolescents and Children (WACH) programme, Samarth, Chennai, the Institute of Obstetrics and Gynaecology (IOG)- Madras Medical College, Chennai and the Department of Gynaecology at the Christian Medical College, Vellore. The study - essentially a pilot - proposes to develop culturally appropriate interventions to be implemented within antenatal clinics to relieve psychological distress among pregnant women. Specifically the study aims to, 1) Estimate prevalence of depressive and post traumatic stress disorder (PTSD) symptoms among pregnant women seeking antenatal care and examine the impact of these symptoms on birth outcomes 2) Conduct interviews with women seeking antenatal care, obstetrician/gynecologists, social workers and other mental health professionals, through which we will gather information on how to culturally adapt therapeutic techniques to reduce depression and PTSD symptoms in these women. The proposal was first approved by the Health and Family Welfare Department, Government of Tamilnadu. All the revised Tamil translated questionnaires were then submitted to the respective Institutional Review Boards (IRB) of the two study sites, namely IOG-Chennai and the Department of Gynaecology, CMC-Vellore. After obtaining approval, the same has been submitted to the UW- IRB for final approval. Once this is granted we will be in a position to commence the pilot study.

3) Pilot Study To Assess the Acceptability and Effectiveness Of Central Storage of Pesticides In Preventing Suicides : Community Controlled Trial

This was a collaborative project between Sneha a suicide prevention voluntary organization, Samarth, the Biostatistics Resource and Training Centre (BRTC) at CMC-Vellore and the Voluntary Health Services (VHS)-Chennai funded by the World Health Organization (WHO). The study aimed to i) assess the acceptability and effectiveness of a central pesticide storage facility as a programmatic intervention to reduce pesticide related suicide and attempted suicide in selected villages in Tamilnadu state, ii) evaluate the quality of community cohesion and its association with attempted and completed suicides and, iii) set up a surveillance system to record and document all deaths and attempted suicides in the

selected villages. This community controlled intervention project was a two year mixed methods study which commenced in April 2009.

The specific villages in Cuddalore district selected for the study were Kandamangalam and Kurungudi which were the intervention sites and Karunagaranallur and Pazhanjanallur which constituted the control sites. The focus groups discussions 4 in each district, (2 with men and 2 with women) were completed between Augusts to September 2009 before the household survey commenced. The baseline household survey commenced in September 2009 and was completed in January 2010. The central storage facility was commissioned in February 2010. Two supervisors were appointed to man the facility and farmers were encouraged to store their pesticides in individual lockers that had been built in the facility. During the one year period when the intervention was underway any cases of attempted or completed suicide that occurred in any of the villages was documented. At the end of one year of the intervention another set of FGDs and a repeat household survey was carried out. The main aim of the FGDs was to determine people's perceptions on the storage facility and gauge its effectiveness in preventing/reducing suicides. The aim of the endline survey was to document any case of suicide, pesticide storage practices and awareness about the health hazards of pesticide use. A total of 8 FGDs, two in each district (1 with men and 1 with women) were completed in March 2011. The endline household survey was carried out in the same villages and commenced in April 2011 and is currently ongoing. The survey is expected to be completed on August 2012.

4) COPSI Project

The COPSI study (Community Care for People with Schizophrenia) aims to evaluate which of two treatments is better for people with schizophrenia, in reducing their symptoms and in improving their social functioning: Facility Based Care (FBC) or Collaborative Community Based Care (CCBC). The former involves treating patients and their families in the clinic by psychiatrists and other qualified medical and paramedical personnel; the latter in addition to this, also includes a set of treatments given by a trained person called a Community Health Worker (CHW) who visits the patients and their families at home. In order to do this evaluation, a randomized controlled trial is underway wherein some patients and their families are randomized to the FBC arm and others to the CCBC arm. Results between the two groups will be compared after 12 months. COPSI is being carried out at three sites in India. These are: Schizophrenia Research Foundation (SCARF), Chennai; Sangath, Goa; and

Parivarthan and Nirmitee (in collaboration with private psychiatrists), Satara. In each of these sites, the two sets of treatments are being compared. The duration of the project is 3 years and the study is funded by Wellcome Trust, UK. Dr. Shuba Kumar has been appointed as a qualitative consultant to this study and will be overseeing the qualitative phase of the study. The study commenced in October 2010. The qualitative component involves in-depth interviews with patients and their family caregiver carried out at baseline before commencement of the intervention and again at the end of 1 year. All baseline and endline interviews have been completed, and have been transcribed and entered into NVIVO. The analysis of the data is currently underway.

PROJECTS COMPLETED THIS YEAR

1) Maternal Nutrition in three states of India: Tamilnadu, Bihar and Uttar Pradesh

This was a collaborative study between Emory University – USA, Samarth – Chennai, the Madras Diabetes Foundation (MDRF) - Chennai and the Public Health Foundation (PHFI) – New Delhi on Maternal Nutrition in three states of India, namely, Tamilnadu, Bihar and Uttar Pradesh. The objective of the study was to review current maternal and child health policies and programme implementation experiences in these three state, identify potential delivery platforms and inform implementation of future maternal health programmes. The study commenced in October 2010 and data collection in Tamilnadu took place in four districts, namely, Thiruvannamalai, Madurai, Salem and Dindigul. These districts were selected based on an analysis of development indicators, health outcomes, health infrastructure, social development index, geography, cultural factors and feasibility given economic and temporal restrictions. A total of 16 focus group discussions (FGDs), four in each district, were carried out with both women and Anganwadi Workers during the months of October to December 2010. The FGDs sought to understand perceptions on food and dietary patterns, maternal nutrition, ongoing nutritive intervention programmes, availability of resources, awareness about various activities carried out by health officials to prevent the spread of malaria and worm infestations in the community. Each FGD was audio recorded and later transcribed verbatim and translated into English. The translated transcripts were then imported into NVIVO, software for carrying out qualitative analysis. The emergent themes were dietary practices particularly during pregnancy and lactation, awareness about services offered for pregnant women including various monetary schemes, issues concerning gender, birth spacing, perceptions on status of women and awareness about programmes for the prevention

of malaria and worm infestation. The final report was submitted to Emory University. Sept 2011 .Subsequently, our key collaborator from Emory University Dr. Usha Ramakrishnan visited Chennai at which time we reviewed a draft paper. The paper has been submitted to the Journal, Food and Nutrition Bulletin

2) Diabetes Community Lifestyle Improvement Program (D-CLIP),

The Madras Diabetes Research Foundation (MDRF) and the Rollins School of Public Health at Emory University are working to prevent diabetes in Chennai. The D-CLIP study funded by the International Diabetes Federation (IDF) through the BRiDGES grant, which is supported by an educational grant from Eli Lilly and Company, is a randomized trial testing a culturally specific, community-based lifestyle intervention for the prevention of type 2 diabetes in men and women living in Chennai, India. Study participants were randomized to receive either standard advice from a dietician or were enrolled into a series of lessons for improving their lifestyle and prevent diabetes. They had to attend classes once every week for six months, after which all study participants were followed up for at least a year to determine the effectiveness of the program in bringing about weight loss and preventing/controlling diabetes. One small component of the study involved focus group discussions (FGDs) with selected participants to the programme who had completed the requisite number of classes. The aim was to understand their perceptions on the acceptability of the lifestyle programme, aspects of the programme they found difficult to carry out, any barriers they faced and suggestions on its sustainability. This component was sub-contracted to Samarth. A total of 7 FGD's were completed between April 2011 to March 2012 with both men and women participants. Each FGD was transcribed and submitted to MDRF who will undertake further analysis.

3) PREMIUM Project

The goal of PREMIUM, a PRogram for Effective Mental health Interventions in Under-resourced health systems, is to elaborate a psychological treatment development and evaluation methodology that will lead to new, culturally appropriate, feasible, acceptable, affordable and effective psychological treatments for mental disorders in under-resourced settings. A core element of this methodology is the ultimate scalability of the treatments by emphasizing its delivery by community or lay health workers (CLHW). This methodology

was elaborated in the context of two mental disorders affecting adults: Depressive Disorder (DD) and Alcohol Use Disorder (AUD). The study funded by the Wellcome Trust, UK, is being carried out by Sangath with Dr. Vikram Patel and Dr. Neerja Choudhury as the Principal Investigators. The qualitative component was sub-contracted to Samarth with Dr. Shuba Kumar and Dr. Rani Mohanraj serving as the qualitative consultants to the study and responsible for guiding the team in the conduct of in-depth interviews with various stakeholders, namely, patients, family caregivers and health care providers.

Initially, training in qualitative research methods was provided to the field team following which guides specific for the different stakeholder groups were developed. Subsequently both Dr. Shuba and Dr. Rani provided inputs on the quality of the interviews carried out by the field team through a review of the transcribed interviews. A coding framework was developed after coding a few interview transcripts which then served as the code book for coding subsequent interviews. New codes were added on as new issues emerged from transcripts. Consistency checks to ensure that coding was reasonably uniform were carried out. All the qualitative data were analysed using NVIVO. The four main themes of analysis were, i) Explanatory Models, ii) Coping and Treatment Strategies, iii) Delivery by Non-Specific Health Workers and iv) Desired Treatments and Outcomes. The final report was submitted to Sangath.

Two intervention development workshops were then held in January 2012. The first one was held on 10th January at the TTK Foundation and the second was held the following day (11th January 2012) at SCARF. The specific objectives of the workshop were to:

- a. Finalize the list of strategies and techniques identified for treating AUD/DD and organize/schedule them to form a coherent psychological treatment and map phases of treatment delivery
- b. Define the competencies that would need to be developed in NSHWs to enable the delivery of this treatment
- c. Understand the barriers and challenges in delivering these strategies by NSHWs in a primary health care setting and strategies for addressing these

There were a total of 11 participants in the workshop held at TTK for the refinement of the AUD treatment strategies and 15 participants took part in the workshop held at SCARF for the refinement of depression treatment strategies. In the afternoon focus group discussions to define competencies needed for NSHWs to deliver the psychological treatment and

understand the likely risks, barriers and challenges in delivering this treatment, were carried out. The information so derived will inform the development of the specific intervention strategies that will then be tested in a randomized controlled trial.

RESEARCH PROJECTS IN THE PIPELINE

The following projects are currently in the pipeline:

1) Intimate Partner Violence and poor Mental Health: Feasibility of an Intervention Program. A randomized controlled Trial: An Intervention Study.

Collaborative project with Tata trust on Intimate Partner Violence and Poor Mental Health: Feasibility of an Intervention Programme- A Randomized Controlled Trial. The specific aims of the study are i) To develop sustainable intervention strategies aimed at reducing suicidal ideation and depression and improving social support and self-efficacy of women experiencing intimate partner violence attending urban primary health care clinics in Chennai city ii) Adaptation and Validation of the HITS scale (Hurt, Insult, Threaten and Scream), the Beck's Suicidal Ideation scale (BSI) and the General Self Efficacy (GSE) scale iii) To implement and evaluate the effectiveness of the intervention in reducing suicidal ideation and depression and improving social support and self-efficacy of women experiencing intimate partner violence attending urban primary health care clinics in Chennai city iv) To obtain qualitative feedback on the acceptability of the intervention. The proposal has been submitted to Tata Trust.

2) Community-Based Models for Hepatitis Awareness, Prevention and Care in Asia

This is a collaborative study between Bristol-Myers Squibb Foundation and Samarth to reduce health disparities around the world and to develop innovative approaches to strengthening and integrating community based health care worker capacity and supportive services. This project seeks to evaluate the Hepatitis prevention and care programs that have been undertaken by the BMS Foundation in select north and north eastern states in India

PUBLICATIONS

1. Shuba Kumar, Phd; **Rani Mohanraj**, Phd; Vasudevan Sudha, Msc; Nicole M. Wedick, Scd; Vasanti Malik, Scd; Frank B. Hu, Phd; Donna Spiegelman, Scd; Viswanathan Mohan, Md, Phd, Dsc, Frcp. *J Perceptions About Varieties Of Brown Rice: A Qualitative Study from Southern India* *Am Diet Assoc.* 2011;111:1517-1522

2. L. Jeyaseelan, **Shuba Kumar**, **Rani Mohanraj**, Grace Rebekah, Deepa Rao & Lisa E. Manhart *Assessing HIV/AIDS Stigma in South India: Validation and Abridgement of the Berger HIV Stigma Scale: **AIDS and Behavior** ISSN 1090-7165 AIDS Behav DOI 10.1007/s10461-011-0128-3*

3. Mohanraj R and Karunanidhi S. (2010). Prevalence of depressive symptoms among urban adolescents of South India. *Journal of Indian Association for Child and Adolescent Mental Health* vol 6 (2); 33-43

4. Geng Zhang, Vasanti S. Malik, An Pan, **Shuba Kumar**, Michelle D Holmes, Donna Spiegelman, Xu Lin, Frank B Hu (2010) Substitution brown rice for white rice to lower diabetes risk: A focus group study in Chinese adults. *J Am Diet Assoc.* 110: 1216-1221

SOCIAL SCIENCE TRAINING PROGRAMMES

Social Science training Programmes organized by Samarth and those for which Samarth faculty had been invited to as resource persons are listed below:

1. Premium Study Workshop at Schizophrenia Research Foundation SCARF, Chennai Jan 10-11th 2012.
 2. Training workshops on Instrument Development at the MGR Medical University, Chennai. June 3rd 2011,14th June 2011, July 5th 2011,20th Sept 2011,31st Jan 2012, July 2011,21st Sept 2012,Qualitative research methods and Analysis Nov15th2012, 31st Jan 2012
 3. Qualitative Research Methods and Analysis and Instrument Development- 19th – 23rd December BRTC, Vellore. Organized by Samarth.
 4. Training Workshop on Qualitative Research Methods at APAC, Chennai Sep 15th – 17th 2011.
 5. Two days Training Workshop on Qualitative Research Methods 1st - 2nd June 2011at I-Tech for Fellows, GHTM, Tambaram,Chennai.
- (Photograph1)**
6. Training Workshop on Qualitative Research Methods Venue: Sangath, Goa – 23rd – 25th May 2011.
 7. Qualitative Research Methods and Analysis 12th -14th May 2011, BRTC, Vellore. Organized by Samarth
 8. Two days Training Workshop on Qualitative Research Methods11th -12th April 2011 at I-Tech for Fellows ,GHTM, Tambaram, Chennai
 9. One day workshop on Qualitative Research at Madras Christian College, Faculty of Social work 19th March 2011.
 10. Training Workshop on Qualitative Research Methods Venue: Sangath, Goa – 4th – 5th February 2011.

Photograph 2

PROFILE OF **FOUNDER MEMBERS**

L. Jeyaseelan has a doctorate in Biostatistics and is currently the Professor and Head of the department of Biostatistics at Christian Medical College (CMC), Vellore. He was trained in Epidemiology and Biostatistics at the University of Newcastle, Australia under the INCLEN (International Clinical Epidemiology Network). He has established a Biostatistics Research and Training Centre (BRTC) and a Clinical Data Management Centre (CDMC) at CMC for high quality data analyses and management. In addition, to being the honorary president of Samarth he also provides his expertise as a Biostatistician for Samarth's research projects.

Shuba Kumar is a Social Scientist and holds a doctorate in Medical and Social Psychiatry. She received her training in Social Science and Epidemiology from the University of Newcastle, Australia under the INCLEN (International Clinical Epidemiology Network) programme. She has been a lead investigator on research projects on women's reproductive health, domestic violence, mental health and HIV care and support programmes. She is also the sitting member of ethical committees in institutions such as, the National Institute for Research in Tuberculosis (NIRT), Madras Diabetes Research Foundation (MDRF), and the Schizophrenia Research Foundation (SCARF)

Rani Mohanraj completed her doctorate in Psychology from the University of Madras and was trained under the Fogarty Fellowship Programme in Epidemiology and Biostatistics at the University of Washington, USA. She has been involved in research studies on mental health concerns, specifically depression in primary care and school mental health. She has also worked with HIV affected children and has consulted on the development of tools for counsellors in HIV care.

Saradha Suresh is the Former Director of the Institute of Child Health (ICH), Chennai. She underwent training in Clinical Epidemiology, Biostatistics and Health Economics at the University of Pennsylvania, USA under the INCLEN programme. She has been the lead researcher on several neonatal and child health projects. She serves as a technical consultant on the research projects undertaken by Samarth.

Veerapandian was trained in Psychology from the President College, Chennai and completed M.Phil from University of Madras. He is a visiting faculty in Psychology at various educational institutions

FINANCIAL STATEMENT

Audit Report of Samarth

We have examined the balance sheet of M/s **Samarth**, New No.100, Warren Road, Mylapore, Chennai - 600 004 as at 31st March 2012 and the profit and loss account for the year ended on that date which are in agreement with the books of account maintained by the said trust or institution.

We have obtained all the information and explanations, which to the best of our knowledge and belief were necessary for the purposes of the audit. In our opinion, proper books of account have been kept by the head office and the branches of the above-named trust/institution by us so far as appears from our examination of the books, and proper returns adequate for the purposes of audit have been received from branches not visited by us, subject to the comments given below:

In our opinion and to the best of our information, and according to information given to us the said accounts give a true and fair view: -

- i. In the case of the balance sheet of the state of affairs of the above-named institution as at 31st March 2012 and
- ii. In the case of the profit and loss account, of the profit or loss of its accounting year ending on 31st March 2012

The prescribed particulars are annexed hereto.

For Arasu and Arunachalam
Chartered Accountants

(B. Kandaswami Aravind)
Partner
Membership No. : 206691

Place: - Chennai
Date: - 17/08/2012

Samarth					
New No.100, Warren Road, Mylapore, Chennai - 600 004					
Balance Sheet as on					
	31/03/2012	31/03/2011		31/03/2012	31/03/2011
Liabilities	Amount Rs.	Amount Rs.	Assets	Amount Rs.	Amount Rs.
General Fund:			<u>Fixed Assets</u>		
Balance B/D	132024.56	132012.98	Computer	113175.00	0.00
Add: Excess of Income Over Expenses	144360.00	11.58	Inventor	31185.00	0.00
Balance C/F	276384.56	132024.56			
			<u>Current Assets:</u>		
Audit Fees Payable	5000.00	5000.00	Telephone Deposit	1500.00	1500.00
Project Funds	1212420.89	1253231.00	Canara Bank FCRA	855678.00	518801.00
TDS	34500.00	0.00	Canara Bank Savings A/c	452111.32	864295.33
			Cash in Hand	74656.13	5659.23
Total	1528305.45	1390255.56	Total	1528305.45	1390255.56

For Arasu & Arunachalam
Chartered Accountants

B. Kandaswami Aravind
Partner
Place: Chennai
Date: 02/09/2012

Secretary

Treasurer

Samarth					
New No.100, Warren Road, Mylapore, Chennai - 600 004					
Income and Expenditure Account					
	31/03/2012	31/03/2011		31/03/2012	31/03/2011
Expenses	Amount Rs.	Amount Rs.	Income	Amount Rs.	Amount Rs.
To Audit Fees Payable	5000.00	5000.00	By Bank Interest	48387.00	3512.00
To Bank Charges	1460.00	83.00	By D- Clip Project	13780.00	6180.00
To Instutional Cost	6000.00	0.00	By Informed Concert Project	66325.00	149024.50
To Electricity Charges	5875.00	5233.00	By MCH Project	748316.00	381567.00
To Food & Accommodation	64408.00	102871.02	By NIH-Depression Project	2777018.11	473230.00
To General Expenses	8023.00	0.00	By Pesticides Project	254100.00	6400.00
To Participation Cost	79600.00	27864.00	By Premium Project	355000.00	0.00
To Postage & Courier	3640.00	5687.00	By Social Science Workshop	212000.00	437800.00
To Printing & Stationery	78965.10	8601.00			
To Repair & Maintenance	15201.00	16061.00			
To Salary	3960160.00	1092345.00			
To Telephone Charges	22427.01	23996.00			
To Travel Expenses	71107.00	94106.70			
To Web Updating Charges	8700.00	8891.00			
To Workshop Materials	0.00	66963.20			
To Excess of Income Over Exp.	144360.00	11.58			
Total	4474926.11	1457713.50	Total	4474926.11	1457713.50

For Arasu & Arunachalam
Chartered Accountants

B. Kandaswami Aravind
Partner
Place: Chennai
Date: 02/09/2012

Secretary

Treasurer

Samarth					
New No.100, Warren Road, Mylapore, Chennai - 600 004					
Receipts and Payment Accounts for the period ended					
	31/03/2012	31/03/2011		31/03/2012	31/03/2011
Receipts	Amount Rs.	Amount Rs.	Payments	Amount Rs.	Amount Rs.
<u>Closing Cash & Bank Balance</u>	-		By Food & Accommodation	64408.00	102871.02
To Cash	5659.23	2890.15	By Computer	113175.00	0.00
To Bank-Canara Bank	864295.33	170401.33	By Instutional Cost	6000.00	0.00
To Bank-Canara Bank FCRA	518801.00	1000.00	By Inverter	31185.00	0.00
To Bank Interest	48387.00	3512.00	By Office Expenses	149291.11	73552.00
To TDS	0.00	5356.00	By Participation Cost	79600.00	27864.00
To D- Clip Project	0.00	19960.00	By Salary Paid	3925660.00	1092345.00
To Depression Project	0.00	915765.00	By Salary Payable	0.00	62000.00
To Informed Consent Receipt	66325.00	166890.00	By Travelling Expenses	71107.00	94106.70
To MCH Project	0.00	1129883.00	By Workshop Materials	0.00	66963.20
To NIH-Depression Project	3546904.00	0.00	<u>Closing Cash & Bank Balance</u>	-	
To Pesticide Project	205500.00	55000.00	By Cash	74656.13	5659.23
To Premium Project	355000.00	0.00	By Bank-Canara Bank	452111.32	864295.33
To Social Science Workshop Project	212000.00	437800.00	By Bank-Canara Bank FCRA	855678.00	518801.00
Total	5822871.56	2908457.48	Total	5822871.56	2908457.48

For Arasu & Arunachalam
Chartered Accountants

B. Kandaswami Aravind
Partner
Place: Chennai
Date: 02/09/2012

Secretary

Treasurer

