

List of Members : 2020 - 2021

Governing Body

- Dr. Saradha Suresh : Honorary President, Former Director, Institute of Child Health (ICH), Chennai
- Dr. Rani Mohanraj : Secretary, Psychologist, Samarth, Chennai
- Dr. Shuba Kumar : Treasurer, Social Scientist, Samarth, Chennai
- Dr. L. Jeyaseelan : Prof. of Biostatistics, Mohammed Bin Rashid University of Medicine and Health (MBRU), Dubai
- Dr. R. Thara : Chairperson - Research, Schizophrenia Research Foundation, (SCARF), Chennai
- Dr. Lakshmi Vijayakumar : Psychiatrist, Founder Member Sneha, Chennai
- Dr. Krishnakumar : Rtd. Principal, Elite School of Optometry, Sankara Nethralaya, Chennai
- Dr. Suresh Kumar : Consultant Psychiatrist, Chennai

Members

- Ms. K.V. Sripriya : Nutritionist, Research Coordinator, Samarth, Chennai
- Ms. Aarthi Kandasamy : Psychologist, ISHA Foundation, Coimbatore
- Ms. Basilea Watson : Technical Assistant (Research), National Institute for Research in Tuberculosis (NIRT), Chennai
- Dr. B.R Desikachari : Senior Public Health Consultant, Chennai
- Dr. Keerthi Prabhu : Consultant Psychologist, Apollo Hospitals, Chennai
- Ms. C.D. Nandini : Nutritionist, Chennai
- Ms. Premalatha : Data Manager, Schizophrenia Research Foundation (SCARF), Chennai
- Ms. Sylvia Jayakumar : Proprietor, Biostatistician, Statshub, Chennai
- Mr. Veerapandian : Assistant Professor, The Banyan Academy of Leadership in Mental Health (BALM), Chennai

Advisory Body

- Dr. Lisa Manhart : Associate Prof. Epidemiology, Adjunct Associate Prof. Global Health, University of Washington, Center for AIDS & STD, Seattle, USA
- Dr. Usha Ramakrishnan : Associate Professor, Hubert Department of Global Health, Emory University – USA

Scientific Review Committee Members

- Dr. R. Thara : Chairperson - Research, Schizophrenia Research Foundation, (SCARF), Chennai
- Dr. Shaheed Jawahar : Former Scientist “G” National Institute For Research in Tuberculosis (NIRT), Chennai
- Dr. L. Jeyaseelan : Prof. of Biostatistics, Mohammed Bin Rashid University of Medicine and Health (MBRU), Dubai

Accounts Officer : Mr. J.S. Dinesh, B.S. Associates, Chennai

Auditors : Parameswaran & Associates Chartered Accountants.

Bankers : Canara Bank, St. Mary's Road, Chennai

SECRETARY'S MESSAGE

Greetings from Samarth !

When the world was celebrating New Year's Eve on 31st December, 2019, the Wuhan Municipal Health Commission in China reported a cluster of cases of pneumonia in Hubei province. The world celebrated New Year's Day in 2020 just like any other new year oblivious to what was going to unfold! The first case of the novel corona virus in India was identified in a medical student who returned from Wuhan on the last week of January 2020 leading ICMR to begin preparations to prevent the spread of the infection. On March 11th, WHO declared the novel corona virus a pandemic, countries across the globe began to take serious note of it and started to close their borders.

We were in the midst of our data collection for the Autism Spectrum disorder study in March 2020 when the Indian government announced the lockdown. Data collection had therefore to be stopped. However, during the lockdown period, Dr. Sally Spencer-Thomas, a clinical Psychologist and an impact entrepreneur in the US approached us to translate into Tamil a series of documents to assist people who were depressed and / or suicidal. The contents and articles in her website www.constructionworkingminds.org were translated by a team of mental health professionals associated with our organization. This work was challenging as finding the most appropriate and suitable words and terms in Tamil was difficult, but in the end gave us a lot of satisfaction. The material and the resources developed by Dr. Sally addressed all aspects of depression and suicide, were very informative and helpful for individuals in need of it, especially as the pandemic and the associated lockdown was affecting the mental health of many.

We also had another opportunity of doing a qualitative study related to the pandemic. The Christian Medical College (CMC-Vellore) approached us to carry out qualitative interviews with community members and health care providers in Vellore district on awareness about the virus, perceptions about safe behaviours, the lockdown and challenges faced due to the pandemic. Because of the lockdown, we had to carry out all interviews on the virtual platform which was a new experience for us! Later, in the month of May, we were invited to carry out a qualitative study for an ongoing collaborative project between Sankara Nethralaya eye hospital in Chennai and the Biomedical Research Centre Moorfields Eye Hospital, UK on risks for diabetic retinopathy. The quantitative survey had been carried out in 20 sites across India and we were required to carry out the qualitative interviews on a sub-sample of patients who had participated in the quantitative survey. We initially conducted a virtual training on qualitative research methods for the field staff from the different sites. This was our first experience with running training workshops online and proved to be a very good learning experience for us. It paved the way for the conduct of our regular teaching workshops online. We mastered the nitty - gritty's of the technology needed to conduct such virtual workshops and now are confident to conduct our yearly workshops online. While I would still prefer face to face in-person workshops, I guess we have to go with the times and virtual platforms are becoming the new normal.

The major part of the year saw us confined to our homes on account of the lock down. We used this time to work on pending manuscripts and to enhancing our research knowledge. Then in October, we undertook the process and end-line evaluations of a peer-led pulmonary rehabilitation intervention developed by Christian Medical College, Vellore which involved field work. This was possible as there had been a fall in the COVID-19 cases at this time. We were happy to be in the field again! Towards the end of the year there was yet another increase in infections which heralded the beginning of the second wave. It is important that every citizen practice safe behaviours and follow the guidelines of the government to help us tide through the second wave without much damage to lives. Stay safe everyone!

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. Members of Samarth have been involved in conducting various research projects and social science training programmes.

OUR OBJECTIVES

- ❖ Conducting research to inform policy
- ❖ 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

**RESEARCH AND
TRAINING ACTIVITIES**

ONGOING RESEARCH PROJECTS

1. **Multi-centre statistical and economic modeling study of risk-based stratified and personalised screening for diabetes and its complications in India (SMART India Study) Study led by Vision Research Foundation, Sankara Nethralaya (October 2020 –Aug. 2021)**

This multi centric study led by Professor Sobha Sivaprasad of the NIHR Moorfields Biomedical Research Centre Moorfields Eye Hospital NHS Foundation, UK aims to develop practical and affordable models to (a) diagnose people with diabetes and pre-diabetes and (b) identify those at risk of diabetes complications so that these models can be applied to the population in low and middle-income countries (LMIC) where laboratory tests are unaffordable. The qualitative component has been sub-contracted to Samarth and is being carried out on a sample of participants who had been involved in a quantitative survey carried out in communities in 20 sites across India as part of the SMART India study. The survey identified a large proportion of individuals who had Sight Threatening Diabetic Retinopathy (STDR) and who were not seeking treatment in a hospital despite repeated reminders and advice given about the possible threat of losing their vision. This study has the following qualitative objectives :

- ❖ Explore perceptions regarding
- ❖ susceptibility to and severity of eye related problems
- ❖ potential benefits, possible barriers and sense of self efficacy with respect to seeking treatment among patients with STDR identified during the SMART study community survey
- ❖ Understand perceptions of family members of STDR patients on their understanding of STDR and barriers, benefits to seeking treatment
- ❖ Understand perceptions of health care providers (HCPs) regarding barriers to care seeking for treatment of STDR in patients with a focus on recommendations for future intervention strategies

Eight sites are participating in the qualitative component and these are Chennai, Cochin, Hyderabad, Bhuvaneshwar, Haldia, Mumbai, Raipur and Guwahati. The research assistants (RAs) each of these sites first participated in an online training workshop on qualitative interviewing techniques conducted by Shuba Kumar and Rani Mohanraj and were oriented to the qualitative guides. Following this training, the RAs were asked to conduct a few mock interviews, transcribe them and send to SK, RM who reviewed and provided feedback, as a means of improving their interviewing skills. The data collection commenced following completion of these exercises.

The sample size required per site is :

Patients with STDR who did not seek care	:	4 patients x 8 sites	=	32
Patients with STDR who sought care	:	2 patients x 8 sites	=	16
Family caregivers of patients with STDR	:	4 caregivers x 8 sites	=	32
Health care providers	:	2 HCPs x 8 sites	=	16
Total SSIs per site			=	12
Overall Number of SSIs			=	96

On account of the lockdown imposed by the government in the wake of the COVID-19 pandemic, data collection has been affected as the respective sites had been finding it difficult to get eligible patients and their caregivers to participate in the interviews. An overall total of 40 interviews have been completed so far. Data collection activities will continue till end July 2021 after which this activity will be stopped. The process of developing and refining the code book and coding interviews is currently underway.

COMPLETED RESEARCH PROJECTS :

1. Understanding community and health care provider's awareness, risk perceptions, behaviours and barriers around COVID-19: A qualitative study in collaboration with CMC Vellore (May 2020 – August 2020)

This qualitative study was carried out in collaboration with the RUHSA department of CMC Vellore and formed a small component of a larger study titled, "Trends in COVID19 epidemic and Impact study", which is being funded by the Scottish Funding Council-Global Challenges Research Fund(SFC-GCRF) COVID-19 Fund –University of Edinburgh. The study described the current disease burden in Vellore district by determining the prevalence of COVID-19 among potential individuals in K.V Kuppam block. The qualitative component was carried out on a small sample of residents living in Kuppam block located in Vellore as well as health care providers from the government and from CMC. Samarth carried out the qualitative interviews which was facilitated by RUHSA and also analysed the qualitative data.

The specific objectives of this study were to :

- i. To understand the awareness in rural areas about COVID-19, their acceptance, willingness and practical difficulties related to following preventive measures (such as social distancing), their willingness to respond to messages about prevention and treatment in appropriate ways, and potential cultural, social and financial barriers to responding to preventive measures, participating in testing or seeking treatment.
- ii. To understand health care providers' and administrators' awareness of COVID19 and their perceptions of its likely impact in rural Tamil Nadu, type and capacity of services available - including outpatient facilities, in-patient facilities, rural hospital beds, testing facilities, availability of personal protective equipment (PPE), availability of funds, specific measures for vulnerable populations, options for care seeking, supply chains for equipment, and practicalities associated with shielding/isolating vulnerable patients and health care personnel.

- iii. To make recommendations based on the emerging findings from the study to help shape the local response to COVID19 – this will include community education and preventive measures.

Four themes that best explained the data with respect to the community representatives were i) understanding and awareness of COVID-19, ii) perceptions of risk of contracting COVID-19, iii) prevention and protection against COVID-19 and iv) perceptions on protective measures taken by the government. With respect to the HCPs the three themes that best explained the data were i) perceptions on the disease ii) management and care & challenges faced iii) resource management & challenges faced. The final report has been submitted to RUHSA-CMC.

2. Translation and Transculturation Services for Coping with COVID-19. Funded by Sally Spencer-Thomas, LLC “the Company” (May 2020-December 2020)

Dr. Sally Spencer-Thomas is a clinical psychologist, inspirational international speaker and an impact entrepreneur. She has sub-contracted Samarth to undertake the Tamil translation of a series of documents that will be made available online to assist people who are depressed/suicidal. The different documents to be translated into Tamil were:

- ❖ Construction Working Minds Website (<http://www.constructionworkingminds.org/>): the entire website inclusive of 39 pages, country specific resources, especially around crisis, such as hotlines and tele-health/on-line support, country specific media around suicide prevention/mental health and construction
- ❖ Coping Cards Resource Package: 54 coping cards, 4-page check-in survey and results, 1-page leadership talking points and digital, local resources for organization's web page (once)
- ❖ Contractor Workbook: estimated 25 pages out of 50 total of text/copy including 15,000 words to help contractors build mental health supports This work was completed and the final Tamil translated documents were handed over to Dr. Sally Spencer-Thomas,

3. Feasibility of Peer-led, Professionals Assisted Pulmonary rehabilitation (PLPAPR): Exploratory pilot study Qualitative Evaluation Protocol in collaboration with RUHSA Department, CMC, Vellore. (October 2020 – February 2021)

There is evidence to show that a pulmonary rehabilitation programme comprising of elements like patient assessment, maximising benefits of medicinal treatment, physical exercise, self-management awareness, nutritional support and psychological as well as social support when given to the patient, improves physical endurance and quality of life. It is a fact that the present treatment processes are not satisfactory and are ineffective in stemming the disease or the associated disabilities. They also do not provide adequate relief from the symptoms. A study to develop and test the feasibility of implementation of a peer-led, professional assisted pulmonary rehabilitation (PR) programme including respiratory exercise training, nutritional, psychosocial and counselling support was developed by CMC. The intervention entailed training of peer supporters who were individuals identified in the community to supervise the PR activities of patients with chronic pulmonary problems. Samarth was sub-contracted to undertake the process and endline evaluation of this programme with the following specific objectives:

Objectives of Process Evaluation

- i. To examine fidelity to the planned intervention
- ii. To obtain patient perceptions about and satisfaction with the intervention
- iii. To obtain perceptions of peer supporters on their capability to deliver the intervention and any barriers or challenges faced

Objectives of Endline Evaluation

- i. To explore patient perceptions on their overall experiences with regard to the intervention, their satisfaction with it, challenges or difficulties faced and their capability to continue with it
- ii. To understand perceptions of peer supporters on their experiences of delivering the intervention, challenges or difficulties faced and how they coped
- iii. To understand perceptions of HCPs on their experiences in training the peer supporters, challenges faced and how they coped

The findings revealed that patients were very appreciative of the exercise programme and very satisfied with the PLTs who were encouraging and patient. All the patients felt more energetic, more able to undertake their daily chores and their breathlessness problems had also eased. While it was not completely cured, they could perceive its positive effects. They also indicated that they would definitely continue to do the exercises as it had proved beneficial to them. The PLTs too indicated their commitment to the programme, were willing to continue with teaching patients and believed that this work of theirs had enhanced their status in the community. The final report has been submitted to RUHSA-CMC

4. Barriers to Early Identification of Autism Spectrum Disorders (ASD) (September 2019 to August 2020)

In collaboration with Dr. Kannan, a consultant psychiatrist in Chennai, a small qualitative study was undertaken by Samarth to understand the perspectives of paediatricians, psychiatrists, parents and therapists (occupational therapist and speech & language therapist) on barriers to early identification of Autism Spectrum Disorder (ASD). The qualitative study aimed to obtain perceptions from paediatricians, parents and therapists on potential strategies to overcome these barriers. Using a combination of Focus group discussions (FGDs) and in-depth interviews (IDIs), we planned to gather information from health care providers (HCPs) like paediatricians, psychiatrists and therapists involved in the care of children with autism and from parents of children who have been diagnosed with autism. We were able to complete 3 focus groups discussions with HCPs, namely, with doctors under Rashtriya Bal Swasthya Karyakram (RBSK) programme, psychiatrists from the Institute of Mental Health (IMH) and with a group of speech therapists. We also completed 3 interviews with paediatricians at the Institute of Child Health (ICH). Unfortunately, the study had to be stopped as the country was hit by the COVID-19 pandemic.

PROJECTS IN PIPELINE

1. **NIHR Global Research Group on development of mEAL-exchange Tools for diabetes Management in LMICs (MEALTIME Study)**

In response to call for applications by the National Institute of Health Research (NIHR)-Global Health Research Groups, a collaborative research proposal was prepared that will be led by Prof. Aladdin Ayesh, Professor of Artificial Intelligence at the De Montfort University-UK. The co-applicants include Dr. V Mohan and Dr. Sudha Vasudevan from the Mohan Diabetes Research Foundation, Chennai, Dr. Viren Ranawana, University of Sheffield-UK, Dr. Susy Sebayang, University of Airlangga-Indonesia, Prof. Anoma Chandrasekhra, Wayamba University- Sri Lanka, Dr. Shuba Kumar and Dr. Rani Mohanraj, Samarth, Chennai, Dr. Janet Kyle, University of Aberdeen-UK and Dr. B Subathra, Kalasalingam Academy of Research and Education, Madurai.

The project establishes a Global Research Group for developing individualised Medical Nutritional Therapy (iMNT) for diabetes mellitus (DM) treatment in Asia. Global diabetes numbers will reach 27 million by 2025 and is mainly driven by Asia. Diabetes is increasingly becoming a disease of the poor in Asia who cannot afford treatments and are disproportionately affected by it. Reducing drug dependency and financial burdens of treatment is essential. This innovative study aims to develop and test an artificial intelligence (AI) enabled tool for individualized Medical Nutrition Therapy (iMNT) using meal-exchange for controlling diabetes. In addition, the study will generate comprehensive nutritional analysis of 100 carbohydrate rich foods commonly consumed in LMICs like India; undertake formative work to inform the development of the AI tool; test the efficacy of the AI tool in improving metabolic markers; dietary adherence and sustained behaviour change and assess the cost effectiveness of the intervention in diabetes management in LMIC settings. Dr. Shuba Kumar and Dr. Rani Mohanraj will be responsible for planning, executing and analysing the qualitative data gathered during the formative phase in years one and two. They will be responsible for assessing the behavior change component and the cost effectiveness analysis which are part of the efficacy trial. They will lead the training of the research teams in qualitative methods and analysis as part of the capacity building activities of the project. The status of the proposal that has been submitted to NIHR will be known in October 2021

2. **Cultural Validation of Scales to Measure Suicide Related Knowledge, Attitudes, Coping and Stigma**

Dr Gregory Armstrong who is Senior Research Fellow and NHMRC Early Career Fellow Nossal Institute for Global Health at the Melbourne School of Population and Global Health Faculty of Medicine, Dentistry and Health Sciences, University of Melbourne approached Samarth to undertake the cultural validation of a range of scales that aim to measure suicide related knowledge, attitudes, coping and stigma. This scale validation forms a small component of larger study that Dr. Armstrong and Dr. Lakshmi Vijayakumar are working on which is being sub-contracted to Samarth. Described below is the methodology for scale validation.

The specific scales to be validated are:

- ❖ Reasons for Living Scale (RFLS)
- ❖ Literacy of Suicide Scale (LOSS)
- ❖ Suicide Stigma Assessment Scale
- ❖ Attitudes Towards Suicide Questionnaire
- ❖ General Help-Seeking Questionnaire (GHSQ) – Only Tamil translation and back translation

The protocol for scale validation was developed by Samarth and approved by Dr. Armstrong. The proposal will be submitted to the SCARF ethics committee in June 2021 and once all approvals are through the study will commence.

3. Barriers and Facilitators to the TAEI programme (Tamil Nadu Accident and Emergency Initiative) in Tamil Nadu: A mixed methods study

This study is a collaboration between the National Institute of Research In Tuberculosis (NIRT) and Samarth and is in response to a call for proposal from the Tamil Nadu Health Systems Programme (TNHSP). The specific objectives of this study are:

- ❖ To understand strengths and limitations of the TAEI programme
- ❖ To explore Health Care Provider (HCP) perceptions on barriers and challenges in implementation of programme services
- ❖ To understand utilizer perceptions on need for, awareness of and availability accessibility and quality of care received at TAEI facilities

This study guided by the Consolidated Framework for Implementation Research (CFIR) will employ a cross sectional mixed methods design involving a combination of structured quantitative assessments, qualitative interviews and facility observations. The quantitative component will seek to collect information on process indicators of the programme from both users and health care providers (HCPs). Sociodemographic and socio-economic data will also be collected. The qualitative component will seek to understand the perceptions of the HCPs on the TAEI programme as well challenges and barriers they face in care delivery. From the users we will seek to understand their satisfaction with the services used and difficulties faced in accessing it. The protocol has been approved by TNHSP and will be submitted to the SCARF ethics committee in June 2021. Approval from the NIRT ethics committee is awaited.

SOCIAL SCIENCE TRAINING PROGRAMMES

Online Social Science training Programmes organized by Samarth for which Samarth faculty have been resource persons during the period 2020 – 2021 are listed below:

1. Online Qualitative Research Methods and Analysis workshop **17th – 24th August 2020**, conducted by Samarth
2. Online Qualitative Research Methods and Analysis workshop **19th – 24th October 2020**, conducted by Samarth in collaboration with CMC, Christian Medical College (CMC)
3. online Instrument Development Workshop **27th–30th January 2021** conducted by Samarth in collaboration with CMC, Christian Medical College (CMC)
4. Online Qualitative Research Methods and Analysis workshop **18th – 23rd January 2021** conducted by Samarth

PUBLICATIONS

Muthu MS, Ganesh A, Padmanabhan R, Nuvvula S, Mohanraj R. Development and validation of a scale to assess Feeding at Sleep Time (FeAST) among infants and toddlers. *Community Dent Oral Epidemiol.* 2020 Dec;48(6):471-479. doi: 10.1111/cdoe.12558. Epub 2020 Jul 16. PMID: 32673445.

Shuba Kumar, Geetha Kumar, SaranyaVelu, ShahinaPardhan, SobhaSivaprasad, PaisanRuamviboonsuk, Rajiv Raman: Patient and provider perspectives on barriers to screening for Diabetic Retinopathy: An exploratory study from Southern India. *BMJ Open* 2020;10:e037277. doi:10.1136/bmjopen-2020-037277

Kumar S, Mohanraj R, Lidiya A, Karthikeyan D, Kannan L, Azariah F, et al. Exploring Perspectives on Mental Well-Being of Urban Youth from a City in South India. *World Soc Psychiatry* 2021;3:87-91.

Shuba Kumar, Rani Mohanraj, BhavnaDhingra, Monika Agarwal and Saradha Suresh Optimizing Care-Seeking for Childhood Pneumonia: A Public Health Perspective, *Indian Pediatrics* . Accepted for publication (in Press)

Profile of **FOUNDER MEMBERS**

L. Jeyaseelan has a doctorate in Biostatistics and is currently the Professor at Department of Biostatistics at Christian Medical College (CMC), Vellore. He was trained in Epidemiology and Biostatistics at the University of Newcastle, Australia under the INCLLEN (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.

Shuba Kumar is a Social Scientist and holds a doctorate in Medical and Social Psychiatry from the Tamil Nady Dr. MGR Medical University, Chennai. She received her training in Social Science and Epidemiology from the University of Newcastle, Australia under the INCLLEN (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 sitting member of ethical committees in institutions such as, the National Institute for Research in Tuberculosis (NIRT), the Schizophrenia Research Foundation (SCARF), theICMR Central Ethics Committee on Human Research (CECHR) and Zifo Genomics Research Institute (ZGRI) Private Limited, Chennai

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. She is also the sitting member of ethical committee in Voluntary Health Services (VHS), Adyar, Chennai.

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 INCLLEN programme. She has been the lead researcher on several neonatal and child health projects. She is currently Honorary President of Samarth.

Veerapandian was trained in Psychology from the Presidency College, Chennai and completed M.Phil from University of Madras. He is a visiting faculty in Psychology at various educational institutions. He is Associate Professor, The Banyan Academy of Leadership in Mental Health (BALM), Chennai

FINANCIAL STATEMENT



PARAMESWARAN & ASSOCIATES
CHARTERED ACCOUNTANTS

FORM NO. 10B

[See rule 17B]

**Audit report under section 12A(b) of the Income-tax Act, 1961, in the case of
charitable or religious trusts or institutions**

We have examined the balance sheet of SAMARTH [name of the trust or institution] PAN AAGTS9955G as at 31/03/2021 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 visited 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 trust as at 31/03/2021
- (ii) the case of the profit and loss account, of the profit or loss of its accounting year ending on 31/03/2021

The prescribed particulars are annexed hereto.

for **PARAMESWARAN AND ASSOCIATES**
Chartered Accountants



(V PARAMESWARAN)
PARTNER

M. No. : 024939

FRN : 013255S

UDIN : 22024939AAAAAD3767



Date : 02/01/2022

Place : Chennai

"KAMALALAYA"

E -7, III Floor, Gemini Parsn Apartments, Cathedral Garden Road, Chennai - 600 006.
Phone : 4302 4545, Mobile : 98400 67659, E-mail : cavparam@gmail.com

SAMARTH
NO 100, WARREN ROAD, MYLAPORE, CHENNAI - 600 004

INCOME & EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31ST MARCH 2021

Income	Amount	Expenditure	Amount
To Project Expenses	8,40,447.00	By Project Income	10,44,882.00
To Bank charges	1,515.20	By Interest Received	32,562.00
To Printing & Stationery	1,708.00	By Excess of Expenditure Over Income	38,490.97
To Repairs & Office Maintenance	19,004.00		
To Salary & Wages	1,53,000.00		
To Telephone Charges	46,949.84		
To Travelling Expenses	1,950.00		
To Audit Fees	23,600.00		
To Depreciation	27,760.93		
	11,15,934.97		11,15,934.97

Place: Chennai
Date : 02/01/2022

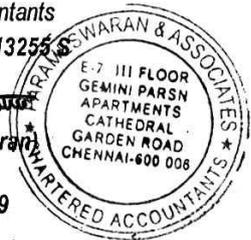
Samarth
(Signature)
Secretary
(Rani Mohanraj)
Secretary



Vide our report of even date,
For Parameswaran & Associates

Chartered Accountants
Firm Regn. No. 013255

(Signature)
(V Parameswaran)
Partner
M.No. 24939



SAMARTH
NO 100, WARREN ROAD, MYLAPORE, CHENNAI - 600 004

BALANCE SHEET AS ON 31ST MARCH 2021

Liabilities	Amount	Assets	Amount
Capital Account	8,51,457.15	Fixed Asset	1,37,349.51
Outstanding Expenses	1,48,450.00	Deposits	4,53,233.63
		Cash & Bank Balance	4,09,324.01
	9,99,907.15		9,99,907.15

Place: Chennai
Date : 02/01/2022

Samarth
Secretary
(Rani Mohanraj)
Secretary



Vide our report of even date,
For Parameswaran & Associates
Chartered Accountants
Firm Regn. No. 013255 S

(Signature)
(V Parameswaran)
Partner
M.No. 24939



Schedules		
Particulars	Amount	Amount
Capital Account		
Opening Balance		8,89,948.12
Excess of Expenditure over Income	38,490.97	
Closing Balance	8,51,457.15	
	8,89,948.12	8,89,948.12
Outstanding Expenses		
TDS Payable		9,850.00
Audit Fees Payable		23,600.00
Expenses Payable		1,15,000.00
		1,48,450.00
Deposits		
Telephone Deposits		1,500.00
Fixed Deposit		3,50,792.63
TDS Receivable		75,941.00
Salary Advance		25,000.00
		4,53,233.63
Cash & Bank Balance		
Cash - BMS		42.64
Cash - Samarth		86.36
Canara Bank-7996		1,66,403.95
Canara Bank - FCRA		2,30,995.00
Canara Bank - Debit Card		11,796.06
		4,09,324.01



FIXED ASSETS

PARTICULARS	W D V as on 01.04.2020	Additions		Deletions	Total	Depreciation		W D V as on 31.03.2021
		Before Sep	After Sep.			Rate	Amount	
10% Furniture	90,567.89	-	-	-	90,567.89	10%	9,056.79	81,511.10
40% Computer	30,091.03	-	-	-	30,091.03	40%	12,036.41	18,054.62
15% Inverter	19,293.45	-	-	-	19,293.45	15%	2,894.02	16,399.43
Air conditioner	20,721.04	-	-	-	20,721.04	15%	3,108.16	17,612.88
Office Equipment	4,437.03	-	-	-	4,437.03	15%	665.55	3,771.48
Total	1,65,110.44	-	-	-	1,65,110.44		27,760.93	1,37,349.51

