

ANNUAL REPORT

2021-22





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FROM THE FOUNDER'S DESK

DR. APARNA HEGDE

ARMMAN





"

This was yet another roller coaster of a year, where sinking to the bottom propelled us towards greater heights in our journey to improve the health of mothers and children in the country. The second wave of COVID-19 was even more devastating than the first one. Lack of oxygen cylinders and shortage of hospital beds compounded the effect of the deadly virus as the overburdened health system struggled to cope. We continued to face the lowest of lows, both personally and professionally, attempting to come to terms with the loss of friends, family, colleagues and loved ones even as we implemented our interventions despite multiple challenges.

This year, the priority remained on ensuring that pregnant women, mothers and children receive access to necessary preventive care information, along with deepening and expanding the reach of our programs, and sharpening our focus on high-risk pregnancies.

The Kilkari and Mobile Academy programs have been rolled out in Jammu and Kashmir, Andaman and Nicobar and Chandigarh, taking the total number of states where these programs are present to 17. Our collaboration with Google Research India to use Artificial Intelligence (AI) to predict the risk of women dropping out of healthcare programs such as mMitra and improve targeted interventions has shown positive results. We will be conducting a Randomized Control Trial (RCT) next year, post which the AI model will be deployed across the entire subscriber base of mMitra. ARMMAN has also been selected as one of the 10 incubatees of the WhatsApp Incubator Program which will give us technical support to design, prototype and refine our WhatsApp pilot to test the use of 2-way communication and multimedia by creating and disseminating targeted content.

We have increased the programmatic focus on identifying and managing high-risk factors in time to reduce the pressure on tertiary-level health systems, thereby improving maternal and child health outcomes in India. Training of Medical Officers and Specialist doctors in high risk protocols as part of the Integrated High Risk Pregnancy Tracking and Management program is currently ongoing in Telangana. We are also piloting the High Risk Pregnancy Tracking project in 2 hospitals of Mumbai for early identification of high-risk factors, counseling, provision of targeted information, regular reminders and follow-ups to ensure adherence to treatment protocol.

As the pandemic established the need for tech-based solutions to address some of the most pressing issues in healthcare, our work received recognition on a global scale as I was featured on Fortune Magazine's list of World's 50 Greatest Leaders at #15. Our interventions were also recognised by The Elevate Prize Foundation, and closer home by the NITI Aayog.

As we firm up our 5-year strategic plan to chart the road ahead for the organization, we are committed to making a transition to equity-based and gender transformative approaches, and to assess empowerment engendered in women and health workers by mHealth programs. Even as we design new solutions and adapt to the evolving technology, we will continue to improve the quality of our existing interventions so the 30 millionth woman gets the same service of the same quality that the first one did.

It is with this goal in mind that we keep moving towards our vision of a world where every mother is empowered to make healthier choices for herself and her children, thereby leading to an improvement in maternal and child health across the country. We thank our funders, partners and well-wishers who have stood by us through these turbulent times, motivating us to work harder than ever before and hope will continue on this incredible journey with us.



ABOUT US

ARMMAN is an India-based non-profit organisation leveraging **mHealth** to create cost-effective, scalable, gender-sensitive, non-linear, systemic solutions for improving access of pregnant women and mothers to critical preventive care information and services along with training health workers to reduce maternal and child mortality/morbidity.

It adopts a "**tech plus touch**" approach by leveraging the health worker network of the government and partner NGOs along with deep mobile penetration.





VISION

A world where every mother is empowered, and every child is healthy.



MISSION

ARMMAN leverages technology, especially mHealth, to enable healthy pregnancy, safe delivery and safe childhood by:

- Addressing systemic gaps in health service delivery.
- > Promoting healthcare-seeking practices in the community.
- Creating evidence-based, cost-effective, scalable solutions.





MATERNAL AND CHILD HEALTH IN INDIA

Maternal and child health is the barometer of a country's socio-economic development. India has some of the worst mortality and morbidity indicators for maternal and child health globally with crippling gender disparity.

Despite the improvement in institutional delivery, awareness and access to antenatal care is still low among pregnant women in the country. This leads to anemia and malnutrition in mothers and children, two of the most prominent problems contributing to mother and child mortality/ morbidity.



A woman dies due to pregnancy and childbirth-related complications

every 20 minutes



Two-thirds

of maternal deaths occur after delivery



For every woman who dies,

20 more suffer
debilitating morbidity



2 children

under age 5 die every minute



32% of children under 5 are malnourished;

35.5% are stunted



These lead to complications that prevent them from realizing their full potential as adults



OUR APPROACH

Factors leading to poor maternal and child health indicators include:



Lack of access to critical preventive care information during pregnancy and infancy leading to delay in seeking care



Inadequately trained health workers unable to detect, manage and refer high-risk conditions in time



ARMMAN leverages deep mobile penetration with existing health worker network and infrastructure to provide critical preventive care information to women through pregnancy and infancy and train and support health workers for timely detection and early referral of high-risk conditions.

INTERVENTIONS FOR...



mMitra

Free voice call service that sends timed and targeted critical preventive care information about pregnancy and infancy directly to the phones of enrolled women in their chosen language and timeslot.



Maternal messaging program similar to mMitra in partnership with the

Ministry of Health and Family Welfare.



Telephonic
counselling to
mothers of infants at
risk of malnutrition to
avoid further
severity.





Mobile-based refresher training course on maternal and child care in partnership with the Ministry of Health and Family Welfare.



Training on high-risk pregnancy tracking and management to enable reduction in delayed referrals.



Home-based
pregnancy and infancy
care program in
severely underserved
communities.

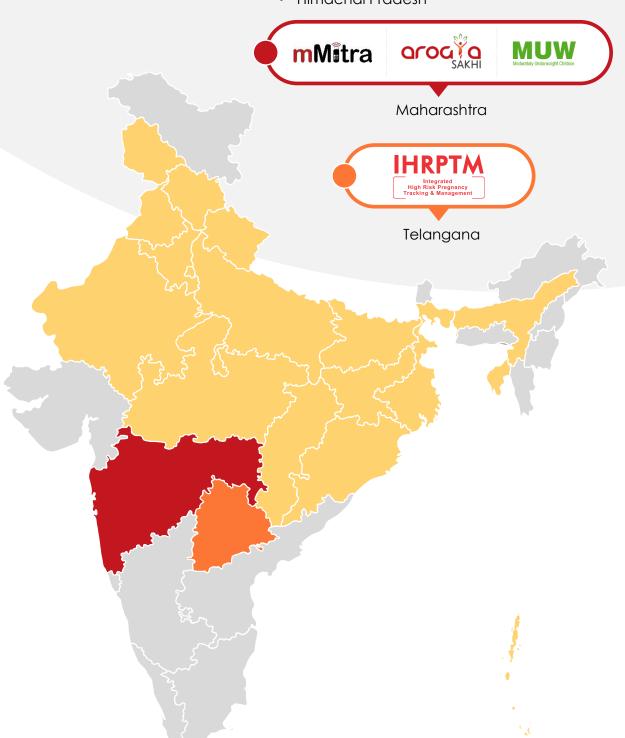
GEOGRAPHICAL PRESENCE





- Andaman & Nicobar
- Assam
- Bihar
- Chandigarh
- Chhattisgarh
- Delhi
- Jammu & Kashmir
- Haryana
- Himachal Pradesh

- Jharkhand
- Madhya Pradesh
- Odisha
- Rajasthan
- Tripura
- Uttar Pradesh
- Uttarakhand
- West Bengal





MILESTONES



Q1 Apr-Jun Kilkari and Mobile Academy launched in **Jammu & Kashmir** and **Chandigarh** Formed partnerships with

Google.org and David Weekley
Family Foundation

Q2 Jul-Sep Kilkari and Mobile Academy Iaunched in **Andaman and Nicobar** Won Co-Impact design grant Formed partnership with Bayer India Foundation Completed
Phase 1 of
the mMitra
WhatsApp
pilot

ARMMAN's third paper with Google Research India and IIT Madras as part of mMitra Al pilot published

Q3 Oct-Dec Signed agreement with MoHFW to continue as implementing partners for Kilkari & Mobile Academy for 3 years

Dr. Aparna Hegde won **2021 Elevate Prize** powered by MIT Solve

ARMMAN &

Begun implementation of **Swabhimaan 2.0** program in

Chhattisgarh

Kick-started
second phase
training for
Medical Officers
and Specialists in
Telangana
(IHRPTM)

Q4 Jan-Mar ARMMAN joined
Co-Impact's
Gender Fund
towards
advancing
gender equality
and women's
leadership

Dr. Aparna
Hegde won
Women
Transforming
India Award by
Women
Entrepreneurship
Platform and
NITI Aayog

Selected as one of 10 incubatees of the WhatsApp Incubator Program

felicitated by
Health Department
of Palghar,
Maharashtra for
their exemplary
work during COVID
and other
government
campaigns

Arogya Sakhis







Largest mobile-based maternal messaging program in the world that sends timed and targeted critical preventive care information to women in India during pregnancy and infancy, in collaboration with the Ministry of Health and Family Welfare (MoHFW).



72 timed and targetedweekly recorded voice calls with9 attempts for each message



Calls in 5 Languages

Hindi, Assamese, Bengali, Bihari, Odiya



Toll-free number

to hear the calls again



Implemented in

17 States / Union Territories



New States

Jammu & Kashmir, Chandigarh, Andaman & Nicobar



25.5 million

women and their children reached till date



4,188,700

new subscribers in 2021-22



43% of calls with > 50% of content listened to by

of content listened to by women (as of March 2022)

VOICES FROM THE GROUND







The Kilkari program not only helped me during pregnancy and child care, but it also motivated me to become a frontline health worker and help other pregnant women, mothers and their children.

I feel empowered.



C

I find the calls emphasizing on the importance of breastfeeding and immunization useful as they guide me to ensure that my baby is healthy. My husband and I continue listening to the calls even after our daughter is born as we learn new things and feel confident as parents.





Daisy Kumari Kilkari subscriber

Assam



I particularly liked the calls about diet during pregnancy, family planning and immunization as I didn't have much knowledge about this. Following the advice given in the calls ensured that I have a safe pregnancy. Everything is so well explained that you don't need to depend on anyone.



Gitanjali Devi Kilkari subscriber Assam



C

I am a new mother and have many doubts about how to take care of my baby. The Kilkari calls not only guided me during pregnancy but are now also helping me after delivery. Thanks to Kilkari, I get all the information I need at the convenience of my home.

Bindu Saroha *Kilkari subscriber*Delhi

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Largest mobile-based refresher training program in the world for frontline health workers (ASHAs), in collaboration with the Ministry of Health & Family Welfare, to strengthen their knowledge about maternal and child care to counsel women about best healthcare practices.



Handset-Independent, Audio-Based Technology accessed via a Simple Voice Call



Covers 33 Months (Pregnancy till child is 2 years)



Divided into 11 Chapters with a quiz at the end of each chapter and a pass/fail score



Available in 4 languages Hindi, Assamese, Bengali, Odiya



Implemented in

16 States / Union Territories

238,061 **ASHAs** trained till date



34,318 **ASHAs** completed the course in 2021-22

VOICES FROM THE GROUND







The Mobile Academy course taught me about prenatal and postnatal care, childbirth, new-born care, breastfeeding, hygiene and sanitation, which is helping me while counselling women. The best thing is that the course is easy to access from anywhere at any time as the lessons are audio-based and can be done from a basic mobile phone too.







The Mobile Academy course explained everything in the local language, which made it easier for me to understand the information. I often face network issues in the village but I found the course so interesting that I used to travel a little outside my village to access the course and complete the lessons.





The Mobile Academy course served as a refresher to my knowledge on maternal and child care. I am able to do my work better and feel confident while counselling women about the best practices to follow during pregnancy and infancy. I encourage other ASHAs to do it too.

Manju Devi ASHA Uttar Pradesh





C

New mothers have many doubts and I am able to counsel them well after doing the Mobile Academy course. It was convenient to do the course at my own pace. I feel happy that I am able to serve women better in my community.

Sarita *ASHA* South Delhi





mMitra

free mobile-based voice call service that sends timed and targeted critical preventive care information directly to the phones of enrolled women through pregnancy and infancy.



141 timed and targeted recorded voice calls



Biweekly / weekly calls



Missed call system



Choice of time slot and language



9 attempts for each call



Call Centre support



2.66 million

women and their children reached till date



230,202

new subscribers in 2021-22



97

Partner hospitals



40

Partner NGOs



50% of calls with > **50%** of content listened to by women (as of March 2022)

VOICES FROM THE GROUND





W C

The mMitra calls taught me about how the baby responds to my touch and the changes in my body. I even got information about the important supplements to consume during pregnancy. The calls I loved the most were about mother and baby bonding.







I understand my baby's needs and even know to look for danger signs, thanks to support from mMitra. With help from the calls, I feel confident about taking care of my baby. mMitra has made pregnancy and motherhood an enjoyable experience for me.





I live in a remote village and so the timely mMitra calls were even more useful for me to get all the information I needed at all times. If all pregnant women and mothers can get mMitra calls, they and their children will definitely be healthier.

Mayuri Mangesh Rasal mMitra subscriber Palahar





C

I didn't have anyone to guide me during pregnancy but with the mMitra calls, I got all the information I needed at the right time. I continue listening to the calls even after delivery. The information about breastfeeding and vaccination is especially useful.

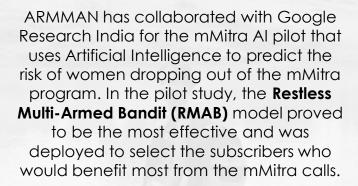
Antima Prajapati *mMitra subscriber*Mumbai



INNOVATIONS



mMitra Al Pilot with Google Research India



ARMMAN's **third paper** with **Google Research India** and **IIT Madras** as part of the mMitra AI pilot compares strategies for optimizing live service calls to over

23,000 participants over 7 weeks to reduce engagement drops. It details out the effectiveness of the RMAB model vs other Al models.

The software for this has been transferred to ARMMAN and the model is **ready for scale up** to the entire mMitra subscriber base, with an eventual aim of transitioning to the Kilkari program.



WhatsApp Incubator Program

We are one among the Top 10
Incubatees of the WhatsApp Incubator
Program (WIP) as part of which we plan to
scale WhatsApp across mMitra and Kilkari
to provide critical care information in the
form of targeted multimedia audio/visual
content to pregnant women and mothers
enrolled in the programs.

It will also be used to provide **long-term handholding** to ASHAs (frontline health
workers) through Mobile Academy, and
Auxiliary Nurse Midwives (ANMs), Medical
Officers (MOs) and Specialist Doctors
through the Integrated High-Risk
Pregnancy Tracking and Management
(IHRPTM) program.







IHRPTM

Integrated
High Risk Pregnancy
Tracking & Management

Auxiliary Nurse Midwives (ANMs), Medical Officers (MOs) and Specialist Doctors trained and supported in the management of high-risk conditions during pregnancy to provide 'continuum of care' to women.



Pilot launched in Telangana in collaboration with the state government



Algorithmic color-coded, detailed protocols for end-to-end management of **18 high-risk conditions**



Hybrid (classroom cum online) training



Support via **Learning app** (loaded with multimedia content including live action videos, simulations, interactive quizzes, and notifications) and

Tracking app (for high-risk pregnancy identification and tracking to ensure timely referral, management and follow-ups)



Two-way communication support via live call center / WhatsApp

Future Plan Scale up to four more states including **Andhra Pradesh**, **Karnataka**, **Assam** and **Odisha** by 2026-27.

3-PHASE Trainings for



9000 ANMs (Auxiliary Nurse Midwives)



1000 MOs (Medical Officers)



300 Specialist Doctors







Home-based
Antenatal
and Infancy Care
program

Women leaders (Arogya Sakhis) are trained to provide home-based care, perform diagnostic tests and screen for high risk factors to ensure early referral during antenatal and infancy period in severely underserved communities.

Arogya Sakhis...



...conduct basic diagnostic tests including haemoglobin, blood sugar, urine, blood pressure, fetal doppler and anthropometric measurements.



...are equipped with a tablet-based decision-support application to record the test results and screen for high-risk symptoms.



...have informative animation videos on pregnancy and infancy embedded in their tablets to aid effective counselling.



Over **3600**women and children supported with doorstep diagnostic and counselling services in 2021-22

253



Arogya Sakhis trained till date:

48 currently active in Palghar district,
Maharashtra
(Jawhar, Mokhada and

Vikramgad blocks)

VOICES FROM THE GROUND





Home-based Antenatal and Infancy Care program



I learned new skills as an Arogya Sakhi. I am able to provide home-based care and spot danger signs in time. I have also become financially independent. Becoming an Arogya Sakhi has opened new doors for me to advance my career as a health worker.



Utawali village, Palghar district





As an ASHA worker, I could only register pregnant women and refer them to primary healthcare centres if there was a problem but as an Arogya Sakhi, I am able to conduct diagnostic tests, detect high-risk symptoms and also refer them early. Being an Arogya Sakhi, I am able to do much more.

Chaya Laxman JadhavBalapur village,
Palghar district



Becoming an Arogya Sakhi has made me capable of helping mothers and children when they most need support, and this gives me tremendous fulfillment. Women trust us and are comfortable sharing their health issues with us.

Prerna Pramod Lahange Dolhari Khurd village,

Palghar district







I am respected by people in my community. As an Arogya Sakhi, I am able to counsel women through pregnancy and infancy, and provide them with the care they need and deserve. I have two children and I feel proud that I am able to financially support them for education.

Pranali Pramod More Shelpada village, Palghar district







- Using **predictive analysis** to initiate early intervention with mothers of 3-6 month old infants who are at risk of **malnutrition**, thereby reducing the proportion of infants who are malnourished at the age of one.
- Intervention for infants aged 6-36 months.
- 1000 mothers and their infants reached in Mumbai.

PROGRAM DESIGN



1 introductory call



armman.org

12 thematic weekly calls for 4 months

Information provided on growth and development, nutrition and balanced diet, best practices in breastfeeding and complementary feeding, immunization, WASH (Water, Sanitation and Hygiene), childhood infections, maternal health and mental health, and family planning. Each call consists of health information, follow-up on actions advised, response to queries and referral if required.

FUTURE OF THE PROGRAM



Multimedia content development underway targeting fathers of infants to guide them on child health and nutrition, their role in enabling dietary and lifestyle changes.



2-way communication system via the call center and WhatsApp to reinforce the messaging and strengthen engagement with the family.



Collaborate with primary healthcare system to improve identification of children at the risk of severe malnourishment and ensure medical monitoring via telephonic counseling to mothers of these children.

referral if required.





The Virtual Outpatient Department (V-OPD) was launched during the pandemic to provide virtual consultations with **obstetricians** and **pediatricians** for pregnant women, mothers and their children via toll-free calls. Medical advice through a phone call proved convenient for women as this prevented them from the risk of stepping out during the lockdown.

The need for the Virtual-OPD continues even post the pandemic as women find it easier to get basic medical advice and counselling via a phone call. This year, we additionally started providing counselling via WhatsApp.



Consultations available in

English, Hindi, Marathi



TIMINGS

Monday to Saturday



11am to 3pm

for obstetric queries



3pm to 7pm for pediatric queries

Our V-OPD Doctors have provided consultations to

24,600 women



1-800-2121-425



VOICES FROM THE GROUND



VIRTUAL OPD



I had several health issues during my pregnancy but every time I called the Virtual-OPD, I received the guidance I needed. This ensured that I delivered a healthy baby.

Anita



Tanushree

The V-OPD doctor guided me on the best food to start giving my baby after six months. This helped me follow a nutritious diet for my child.



My baby was tested positive for COVID but guidance from the V-OPD doctors helped me take care of him to ensure that he recovers from it completely.

Renu



Shabnam

I was worried when I saw slight bleeding during the 3rd month of pregnancy. The V-OPD doctors advised me to follow a nutritious diet, avoid heavy physical work and rest well, and soon my reports were normal. If I have an issue at any time, I know that medical help is just a call away, thanks to V-OPD.



I had fever and urine infection in the 4th month of pregnancy. When I called the V-OPD, the doctor advised me to conduct some tests and also guided me on following good personal hygiene and developing healthier habits. I soon recovered.

Tabbassum



Mina

I was pregnant for the first time and was craving junk food. The V-OPD doctor recommended that I avoid oily and spicy foods and only eat from places that are clean and hygienic. I followed the advice and I am healthy.

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ON-GROUND COVID INITIATIVES





SMS/voice calls on critical COVID information sent to

800,000 health workers

in collaboration with the government.

4.2 million calls

made to frontline health workers across 36 states and union territories in India directing them to encourage all citizens to receive COVID vaccines as part of the government's door-to-door COVID-19 vaccination campaign

'Har Ghar Dastak'.



300,000 women

have received critical COVID-19 information on their mobile phones.

60,000 women

have been linked to essential health services.



Leveraged the Arogya Sakhi network to distribute food packets directly to beneficiaries

in Palghar district, Maharashtra and essential supplies to medical facilities.

AWARDS AND RECOGNITION





Dr. Aparna Hegde wins NITI Aayog's Women Transforming India Award FORTUNE
WORLD'S
50
GREATEST
LEADERS



Dr. Aparna Hegde ranked

15th on Fortune's list of
World's 50 Greatest
Leaders



Dr. Aparna Hegde
becomes
GLG Social
Impact Fellow



ARMMAN and Dr. Aparna Hegde win **Elevate Prize 2021** powered by **MIT Solve**



MEDIA PRESENCE

A Mumbai Doctor's Healthcare Initiative Delivers Free Health Advice To Patients' Mobile Phones



Outlook

Dr. Aparna Hegde, Founder of NGO ARMMAN Features at Number 15 on Fortune's List of World's 50 Greatest Leaders

Preventing Maternal Deaths, One Phone Call at a Time



FORTUNE 50

The World's 50 Greatest Leaders

ARMMAN's Founder Dr. Aparna Hegde Wins Prestigious Elevate Prize by MIT



indiacsr Corporate Sustainability & Responsibility &

Programs implemented by ARMMAN have now Reached 26 Million Women and Children, says Dr. Aparna Hegde

Meet the Mumbai Doctor Named Among World's 50 Greatest Leaders





Dr. Aparna Hegde – Transforming and Inspiring The World

Doctor and Entrepreneur Aparna Hegde on How Tech can Solve Prenatal Care Challenges



YOURSTORY

Dr. Aparna Hegde spoke to Your Story about what it means to be featured in Fortune's list of World's 50 Greatest Leaders

Pregnant Women, Beware of Covid-19



■ Healthw@rld.com
From The Economic Times

Digital Shift Drives Progress in Rural Maternal Health

Stories from Inside India's Covid Disaster: 'No one has seen anything like this'



The Telegraph

'It's not a death, it's murder': How India's Second Covid Wave has Hit Mothers and Babies

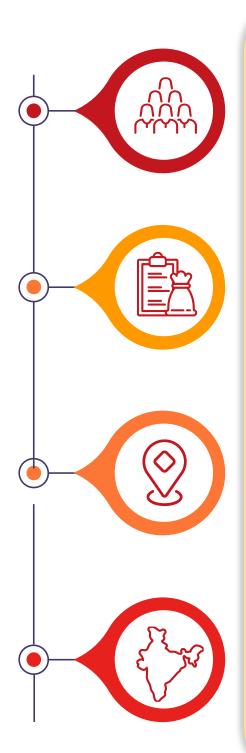
GADGETS NOW
by THE TIMES OF INDIA

10 Incubatees of WhatsApp
Incubator Program



SWABHIMAAN

FUTURE FOCUS AREAS



In the coming year, we plan to expand the government's **Swabhimaan 2.0** program targeting pregnant women, mothers & their husbands and adolescent girls in partnership with a coalition of organisations including UNICEF, National Institute of Mental Health and Neurosciences (NIMHANS), ROSHNI Centre of Women Collectives led Social Action and Institute of Economic Growth (IEG).

OUTCOME

It will strengthen the existing Food, Nutrition, Health and WASH (FNHW) and gender packages under Swabhimaan by integrating interventions to address gender disadvantage and mental health risks as per the state's requirements.

AREAS OF INTERVENTION

Bihar, Chhattisgarh, Odisha, Jharkhand, Telangana, Madhya Pradesh

Through this project, we will reach target groups in some of the most underdeveloped districts in 6 states of India, enabling our tech-based interventions to reach the last mile so that the most vulnerable and marginalized communities are not left behind.

We will also start sending out **Maitri Kishori calls** that will provide critical information on maternal and child health, nutrition, mental health, gender and safety.





BOARD OF TRUSTEES

ARMMAN's Board of Trustees have the responsibility of governance as required by the Charity Commissioner. The trustees are signatories to bank accounts, FCRA, and the auditor's report.



DR. APARNA HEGDE

Managing Trustee

Mr. Srinivaas V. Sirigeri

Dr. Srikrishna Solgudu Ramachandra

Mrs. Chanda Neeraj Kathuria

Mr. Arindam Mukherjee

Dr. Janhavi Sanjay Raut

Mr. Anant Bhagwati

Dr. Dayashankar R. Maurya

Mr. Paresh Parasnis

TEAM ARMMAN



Number of Employees **157**



New Employees in 2021-22

12
Female

ÇÇÇÇ

17 Male

KEY PERSONNEL RECRUITED THIS YEAR

Dr. Chetan Purad

Director, Programs - IHRPTM Dr. Hanimi Reddy Modugu

Director - Research

Rohit Singh

Associate Director – Kilkari and Mobile Academy







0

ARMMAN Mumbai Office

Second Floor, Advance House, Plot-a, ARK Industrial Estate Compound, Makwana Road, Marol Naka, Andheri (East), Mumbai 400059



ARMMAN Delhi Office

C-91, 2nd Floor, Shivalik, Malviya Nagar New Delhi - 110024

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OUR PARTNERS

Technology Partners









Implementation Partners





Technical Partners







Content Partners



Strategic Partners





OUR FUNDERS

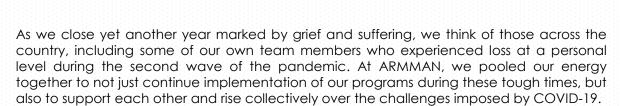
Johnson-Johnson	IGI	Google	V:P
Glenmark FOUNDATION	9GEP	Grands Défis Canada Grand Challenges Canada	rippleworks
skell FOUNDATION	Chevron	dasra catalyst for social change	BAJAJ
Co— Impact	InfrasoftTech _» .	Ⅲ CitiusTech	David Weekley Family Foundation
BAYER Bayer	SOCIATION OF THE PROPERTY OF T	Woman ty	TIDES A Force for Social Good
	MDRT°	FOUNDATION NETRI®	

CEO'S MESSAGE

RAMESH PADMANABHAN







Through these consolidated efforts and continued collaboration with partners, we have gained momentum in expanding our programs and moving towards greater efficiency through innovations.

Our WhatsApp pilot to test the use of 2-way communication and multimedia by creating and disseminating targeted content is well underway and already showing promising results. ARMMAN has also been selected as one of the 10 incubatees of the WhatsApp Incubator Program, which will give us technical support to design, prototype and refine the pilot. Through our partnership with Google Research we are addressing dropout and poor engagement in large-scale mHealth programs for maternal and child health like mMitra. We have developed an AI model to identify women who would benefit from client support services, and used targeted resources to improve engagement and prevent these women from dropping out of the program. Once the prototype is fully functional, we will deploy the model across the entire mMitra subscriber base comprising 250,000 women in Mumbai.

Moving forward, we will develop improved versions of our biggest programs, in alignment with our "fit for purpose" strategy where low-risk women get broad-based content while those with high-risk conditions and/ or the most disadvantaged get more targeted content with greater handholding support through 2-way communication. We are also committed to making a transition to equity-based and gender transformative approaches to ensure that our interventions are accessible to the most vulnerable women, children and health workers.

While we gear up for the next phase in ARMMAN's journey, we are committed to ensuring our readiness at an institutional level for the growth plans we have developed. We will invest in mid-level leadership along with hiring, structuring and nurturing new talent which will allow us to strengthen our team and improve efficiencies.

We are grateful for our strong support system of partners, donors and well-wishers that have been by our side as we continue to implement, innovate, and expand. This year, we also received a design grant from Co-Impact to enable us to chart our 5-year organizational strategy and clearly articulate our vision as we move forward. We have also extended our donor base to include global foundations such as David Weekley Family Foundation and an anonymous donor, as well as corporates such as Bayer India.

As we move towards ARMMAN's 15th year, we are filled with gratitude for all the love and wishes we have received along this journey, especially from the women that we work with. We can only hope to return this goodwill by continuing to inform, empower and support them in their journey during pregnancy and infancy.

FINANCIALS



ARMMAN (Advancing Reduction in 'Mortality and Morbidity of Mothers, Children and Neonates) Registration No. E-25192(MUM) Balance Sheet as at 31 March 2022

Schedule VIII (Vide Rule 17 (I) of Bombay Public Trust Rules, 1951)

All amounts are in Indian Rupees) FUNDS AND LIABILITIES	Note	As at 31 March 2022	As at 31 March 2021	PROPERTY AND ASSETS	Note	As at 31 March 2022	As at 31 March 2021
Trust Funds Corpus fund Other Earmarked Fund (Created under the provisions of the trust-deed or	3	4,71,550	4,71,550	Project fixed assets Balance at the beginning of the year Add: Assets purchased during the year Less: Assets written off Less: Depreciation Total (A)	8A	20,06,050 24,22,411 (5,37,068) (12,73,210) 26,18,183	16,37,372 10,17,559 (6,48,881) 20,06,050
Scheme or out of the income). Unspent grant	4	25,92,45,080	13,90,78,700	Other fixed assets	8B		
Deferred income - Project assets	5	26,18,183		Balance at the beginning of the year		4,402	5,241
		TO THE STATE OF TH		Add: Assets purchased during the year			
		1		Less : Assets written off		(4,402)	(839)
				Total (B)	1		4,402
		26,23,34,813	14,15,56,300	Total (A) + (B)		26,18,183	20,10,452
Liabilities				Loans Deposits and advances	9 10	1,00,228 34,41,772	1,72,112 36,64,645
For Expenses	6	57,76,478				22,25,888	
For Statutory dues For Contribution to Charity Commissioner office (Refer Note 21)	7	18,91,205 2,54,78,155		Cash and bank balances	11	31,34,65,201	15,87,28,433
		3,31,45,838	63,20,407		1		
Income and Expenditure Account		4 66 08 025	1 10 04 126				
Balance as per last balance sheet Add: Surplus as per Income and Expenditure Account		1,66,98,935 96,71,686	1,10,94,436 56,04,499				
Add: Surplus as per income and Expenditure Account		90,71,000	30,04,455				
		2,63,70,621	1,66,98,935				
TOTAL		32,18,51,272	16,45,75,642	TOTAL		32,18,51,272	16,45,75,642

Summary of Significant accounting policies and other explanatory information

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As per our attached report of even date

For Walker Chandiok & Co LLP

Chartered Accountants Firm's Registration No: 001076N/

Sudhir N. Pillai

Membership No: 105782

Place: Mumbai Date: 30 September 2022

For ARMMAN (Advancing Reduction in 'Mortality and Morbidity of Mothers,

Srinivaas Sirigeri

Trustee

Place: Mumbai Date: 30 September 2022

Chanda Kathuria Trustee

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FINANCIALS



ARMMAN (Advancing Reduction in 'Mortality and Morbidity of Mothers, Children and Neonates)

Registration No. E-25192(MUM) Income and Expenditure Account for the year ended 31 March 2022

Schedule IX [Vide Rule 17 (I) of Bombay Public Trust Rules, 1951]

(All amounts are in Indian Rupees)

EXPENDITURE	Note	For the year ended 31 March 2022	For the year ended 31 March 2021	INCOME	Note	For the year ended 31 March 2022	For the year ended 31 March 2021
To Establishment expenses	12	4,27,60,482	61,39,134	By Interest -Accrued	16	78,45,595 7,81,543	53,84,270 1,69,368
To Remuneration to Trustee	13	24,00,000	27,60,000	-Realized		70,64,052	52,14,90
To Audit fees	14	8,75,000	1,77,000	By Donations	17	12,20,657	6,43,592
To Depreciation on Project fixed assets on other fixed assets	8A 8B	12,73,210	6,48,881 839	By Grant income By Miscellaneous income	18	24,14,75,515 14,42,027	15,13,62,137
To Expenditure on Objects of Trust	15						
(classification is as certified by trustees) (a) Religious (b) Educational (c) Medical and poverty relief (d) On Other Objects of the Trust		19,50,03,416	14,20,59,646				
To Surplus transferred to Balance sheet		96,71,686	56,04,499				
		25,19,83,794	15,73,89,999			25,19,83,794	15,73,89,99

Summary of Significant accounting policies and other explanatory information

As per our attached report of even date

For Walker Chandiok & Co LLP

Chartered Accountants

Sudhir N. Pillai

Partner Membership No: 105782

Place: Mumbai

Date: 30 September 2022

or ARMMAN (Advancing Reduction in 'Mortality and Morbidity of Mothers,

Srinivaas Sirigeri

Trustee

Chanda Kathuria

Place: Mumbai

Date: 30 September 2022



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