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Savitri
The Savitri Waney Charitable Trust



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Dear Friends and Colleagues,

This last year has, as usual, been characterised by a healthy combination of achievements, challenges and development of the Trust's capacity to continue to support high impact interventions on the ground where they are most needed.

In the year 2010/2011, we have restored sight to 18,000 totally blind people living in poverty in Bihar whilst assisting our partner hospital diversify their funding streams for the long-term; our dug-well project has completed 450 wells, giving 1,125 tribal households access to irrigation water; and we have ensured 34 tribal villages in Maharashtra have access to safe antenatal and delivery postnatal services. We have also developed a new internal system to assess the impact of all project proposals to help identify high impact programmes that fit into our portfolio.

As the challenges and needs of our target communities change over time, so too must the Trust evolve and develop to meet these needs. The Trust has grown in size to donate over half a million pounds per annum. This would not be possible without our Champions; those remarkable individuals whose efforts and commitment are what make the projects so successful, and who we will focus on in this issue.

I have been working with the Savitri Trust for over seven years and it has been the most rewarding and humbling experience of my life. On behalf of the Trust I have had the privilege to identify, develop, and support organisations that change the lives of the most impoverished communities, whilst working in arguably the most challenging conditions in the world.

During this period, my life too has changed, and with the arrival of my daughter in December 2009 my responsibilities increased. In May 2011, I asked the Trustees if they would accept my resignation. Over the ensuing months, with their support we recruited and inducted two excellent new members to the team, Suprieya Sadarangani, Regional Manager in India and Natalie Marr, Trust Administrator, based in London: Suprieya and Natalie's complimentary experience and roles will provide a solid foundation for the Trust's future success. It has been a joy working with them over the last three months, and it is clear that they will continue to be an asset to the Trust's work.

It has been a wonderful experience to work with you and find so many generous hearts who believe in all that we strive for.

Rebecca Muir
Former Trust Manager

Mr Arjun Waney Founder of the Savitri Waney Charitable Trust



“Get these children shoes for goodness sake’ was one of my first wake up calls to how Arjun pays attention to detail and was not just a smile and nod type of donor. I admire Arjun for many things but mainly his readiness to listen to any project problems I might have had and try anything within his power to help.”

- Rebecca Muir

Who better than Arjun Waney, founder of the Savitri Trust, to start us off in this issue dedicated to our Champions.

Arjun Waney founded the Savitri Waney Charitable Trust in 2001 when he and his family decided to consolidate personal and family funds, enabling them to support and monitor charitable projects on a committed and long-term basis, and in particular, with complete accountability.

Arjun Waney is a ‘traditional’ compassionate philanthropist; traditional in the sense that he cannot stand to see people suffering and immediately wants to help. Arjun is guided by his compassion for those who have little hope and few chances in life. His desire to help these people has taken him to many places other philanthropists might shy away from, such as Bihar State. It is Arjun’s spirit and involvement at every level that makes him our greatest Champion.

Dr Prabhu Baskaran of Kebbi Eye Hospital in Nigeria Tulsi Chanrai Foundation

Dr Prabhu Baskaran is devoted to eradicating curable blindness of the poor in rural Nigeria; he has been working at the Kebbi Eye Hospital in Nigeria since 2008. Nigeria is a country often featured in the press for its unrest and troubles, and as a place where all aid workers risk their safety to help others. This is why Dr Prabhu is our Champion for restoring sight in Africa. He has played a key role in conducting public awareness programs about curable blindness in and around Kebbi and in turn regularizing the patient flow at the hospital.

Kebbi Eye Hospital is the only charitable eye care hospital in Kebbi State; catering to a population of 3,631,000. One of the major challenges faced by Dr Prabhu is the lack of readily available skilled and trained paramedics. In spite of the language barriers Dr Prabhu trains the local people to assist him. His family lives in India and he visits them only once a year. The lack of electricity and good telecommunication facilities in Kebbi make it difficult to keep in touch with his family and friends. Despite this Dr Prabhu is driven by his desire to rid Nigeria’s poor of the scourge of cataract blindness. Each day as streams of people wait patiently outside the hospital with mature and hyper mature cataracts, he is quickly reminded of his mission and passion to help others. The Savitri Trust would also like to thank our funding Champions, the patrons of La Petite Maison in London, for their continued support towards this cause. Since May 2009 £1 has been added to every bill and between then and March 31st 2011 the restaurant has raised £49,193 towards the Kebbi Eye Hospital project.



Dr Prabhu carries out 3,700 operations and over 8,000 examinations per year in one the world’s most challenging places.

Mritunjay Tiwary Akhand Jyoti Eye Hospital, Bihar

Behind every sight restoring surgery is a committed, highly dedicated team of individuals.

One particular individual is Mritunjay Tiwary. Born in the small remote rural village of Mastichak in Bihar, Mritunjay moved to Calcutta to join the successful family business. But something drew him back to Bihar to where he felt he could help in a social cause. Bihar has many causes but one in particular stood out. Bihar has a backlog of 1 million blind of which over half are caused by cataract, a curable disease; 100,000 blind people add to this shocking number every year because there are not enough eye care facilities available to cater to the need.

Mritunjay never looked back. In the 5 years since it was established Akhand Jyoti Eye Hospital (AJEH) has flourished into what is now the largest charitable eye hospital in the whole of the state. In spite of no grid electricity, poor infrastructure and a shortage of human resources, year in year out Mritunjay and his team have worked tirelessly to meet the enormous need in Bihar. The main hospital and two satellite units have achieved staggering numbers in 2010-11: 47,000 surgeries, of which 37,000 were carried out completely free of cost to the poor. However, AJEH still faces tough times ahead. The enormous backlog of the blind in Bihar means that there will always be a long line of people waiting to be treated. AJEH believes that no person should be turned away, and in order for AJEH to match its number of free surgeries from last year, the staff and supporting organisations (including The Savitri Trust) must work incredibly hard to raise those much needed funds.

Against the odds, AJEH has gone from strength to strength overcoming many obstacles along the way. What lies at the heart of its success is the uncompromising vision of people like Mritunjay, whose commitment to the people of Bihar and firm belief in providing access to those in greatest need without compromising on quality makes him a true Champion.



"We are human beings, because we take care of people who are less fortunate. I was not forced into this work, it just happened to me."

- Mritunjay Tiwary



The outreach team of AJEH go to extraordinary lengths to reach blind people who are completely cut off. Here the medical team are travelling across the River Ganges by boat to sand islands where hundreds of people are waiting for them. These islands have never seen an eye camp before.

The Forgotten Midwives

The Savitri Rural Development Project, Maharashtra



© Sophie Gerrard (Sept/2009)

78,000 women die each year in India from pregnancy or childbirth related complications, the highest rate in the world.

Midwives in rural India traditionally pass on their skills from mother to daughter so that the skill stays in the family and provides a continuing livelihood. However centuries of traditional obstetric knowledge have been swept aside in India as the central government pushes for increased institutional deliveries, yet without providing adequate improvements in quality care and resources to the primary healthcare centres (The Lancet, Volume 377(22/01/2011), 322-49). The government is slow to recognise the vital role that a traditional village midwife (Dai) plays in the obstetric system, the only viable option for women who do not have access to transportation or even roads to walk along. If the Dai is not given additional training or access to a safe delivery kit (a kit ensuring a minimum of hygiene, including delivery mat, soap, sterile razor and clamp), then she will remain an unskilled birth attendant putting a pregnant woman and her child at risk.

The Savitri Rural Development Project (SRDP) in rural Maharashtra has identified this gap and has set to work on it.

The project fully supports the government (National Rural Health Mission) guidelines to promote institutional delivery in all cases, and since the project started we have seen an enormous increase in numbers of institutional deliveries. However there are still pockets of the covered villages where getting to a health centre is not possible until services and infrastructure are improved in these areas. So far SRDP has trained over 90 traditional midwives and their successors in hygiene and safe delivery practices, and provided access to safe delivery kits. In January 2011, The Savitri Trust visited a group of Dais in Gandole Village who had come from the neighbouring villages. It was an honour to meet these women who shared their knowledge with the Trust and with over 50 years of experience, have delivered up to 1,000 babies each. The advantage that these women have is the ability to save lives in spite of limited resources.

The trained Dais are now part of the project and government obstetric system. Each Dai will inform the project community health worker if there is a pregnancy in her village (and vice-versa). If there is a complication she will talk to the government nurse for advice, and in the case of a more urgent complication arising in the labour stage she will go with the family to the hospital – with whom they now have an affiliation. In addition some of the Dais have been asked to assist in the delivery room. To have all health sectors working together in this way is an immense achievement for the project and makes it far more possible to help pregnant women deliver safely, whilst also building confidence and capacity amongst the dais whose indispensable knowledge and experience make them our Champions for this project.



When asked what she had learnt from the training, Koambi said, "The training you have given us has transformed us from the small women in the village to respected women who have the medical knowledge! Because you give the doctors in remote villages, I can get a second opinion if I am worried about one of my patients. Please keep giving me training. You are doing so much for us forgotten dais."

Dr. Niharika Panda
Pallcare India, Orissa



"Palliative care is essential for all terminally ill patients, regardless if they are rich or poor, it makes no difference."

- Dr Niharika Panda

Many patients come too late, palliative care is the only hope for them.

At any given time a mere 1% of the 2 million terminally ill patients in India have access to palliative care. While India is the world's largest grower of medicinal poppy for developed countries, there are severe restrictions to the use of morphine domestically. The barriers to accessing effective pain relief include poor infrastructure, poverty, and in particular, the fear that opioid availability will lead to drug abuse. In 27 out of 28 states in India, narcotics laws are so strict that doctors fear prescribing opioids. As a result patients are dying in excruciating pain.

Pallium India, established by Dr Rajagopal, is one of the leading charitable organisations working towards overcoming these barriers on a national scale. The organisation seeks to set up palliative care facilities, expand facilities already in existence and start rehabilitation services for families of patients afflicted by cancer.

The Pallcare India Project conducted by Pallium India, trains three doctors at government training hospitals in three different states for six weeks and provides a further year's support. For a project such as Pallcare to deliver effectively, it must rely upon the commitment and passion of people like Dr Niharika Panda. Dr Niharika works as a radiologist at the MKCG training hospital in Berhampur in Orissa and is in the process of opening the second Palliative Care Clinic in the state.

The urgency for more palliative care is clear: Orissa is one of the poorest places in the whole world with 64% of its population categorised as living in poverty, making it one of the lowest ranked places on the UN Human Development Index. AHRCCRTS in Cuttack is the only other existing pain and palliative care clinic in the whole state of Orissa, and approximately only 5% of MKCG referred patients with terminal cancer make it there. Professor Sukadev Nayak of AHRCCRTS suggested setting up a further clinic to Dr Niharika Panda and introduced her to Dr Rajagopal of Pallium India and the Pallcare India Project has continued to grow from there.

There have been many obstacles along the way for Dr Niharika, the largest of which has been obtaining the Narcotic Drugs and Psychotropic Substance License, which allows her to prescribe morphine. In addition to this, palliative care is often misunderstood and unfamiliar to medical staff. The requirements of palliative care patients reach far beyond the mere physical: they also require support on an emotional and spiritual level. Dr Niharika took it upon herself to organise a lecture and be certain that her staff were ready to offer all the support they possibly could to the patients.

The new clinic will now make it possible for many more in Orissa to receive the care and attention that they need in order to live and die with dignity. Dr Niharika Panda's vision and belief in this cause has been the driving force behind the Pallcare India Project and has made it a reality for the people of Orissa.

Farmers Take a Leap of Faith Dug Well Project, Madhya Pradesh

There are many Champions in this project from the field staff right up to the director but we would like to turn our focus here to the courageous farmer beneficiaries of Madhya Pradesh.

The unique thing about our dug well project is that the Trust subsidises rather than covers the full cost of a dug well; the remaining is a personal investment of the farmer. The total cost of a new well is Rs. 90,000 (£1,285) of which a subsidy of Rs. 40,000 (£570) comes from the Savitri Trust, which covers the blasting and the construction materials. The remaining cost is labour; the effort required to construct the well. This labour is undertaken by the farmer, his family and neighbours, who regularly invest weeks or sometimes months of backbreaking labour to create the wells. This investment of time and effort is to ensure that farmers take ownership of the well and its on-going maintenance.



On the brink of poverty, often with only 1-2 acres of land, they put their faith into our project and make that investment. Once completed the results are immediate. Their crop productivity increases by 100% and they start to talk to each other. Our partner NGO Action for Social Advancement (ASA) creates farmer groups, fostering a community spirit which differs greatly from the isolated and competitive approach farmers were pressured to take before ASA's intervention. Now they pool resources, and share technology such as new seed varieties and environmentally friendly pest controls. Taking this leap of faith demands incredible amounts of courage from the farmers, but in doing so their lives and livelihoods will never be the same again.

Malini Yadav David Sassoon School



Boys at David Sassoon School enjoying an educational comic book, donated by our teacher trainer Sammy Wright.

“In the decades that we have been working here, we have never had an experience like this one.”

This was the collective comment from the 94 in-service attendants from the six remand homes of Mumbai, commenting on the staff workshop activities sponsored by the Savitri Trust. The workshops are one element of the overall support provided by the Savitri Trust and our partner organisation, OJUS Medical Institute. The boys at the David Sassoon School (DSS) are here for a variety of reasons from small cases of theft to more serious criminal offenses. The reasons behind these scenarios are all mainly down to poverty, parental neglect, domestic violence and labour exploitation among others. Regardless of what brought them here, each boy needs support so that their prospects can be improved and their often ignored but deeply rooted problems can be addressed in a compassionate environment.

Our child psychologist, Malini Yadav, worked hard (with the support of the staff from DSS and the Children's Aid Society) to expand the existing annual workshop programme (initiated in 2008) to all six remand homes in Mumbai. The topics included how to cope with stress, finding creative ways for the boys to express themselves as well as putting into practice various teaching methodologies. Malini joined our psychological support project in 2007 and through her energies and efforts we have been able to help rehabilitate countless boys so they can live a success and meaningful life. That is why she is the Champion of this project.

Eye Care Partners

Organisation	Location	Savitri UK Support	Purpose
Second Sight	Bihar	£252,516	To restore sight to 18,000 totally blind poor people at the Akhand Jyoti Eye Hospital.
Tulsi Chanrai Foundation	Kebbi, Nigeria	£55,746	To assist the charity to restore sight to 2,883 blind poor people at Birnin-Kebbi Hafsai Eye Centre.
Mission for Vision	India Nationwide	£51,169	To assist the charity to carry out 163,809 surgeries to the poor this year.
Akhand Jyoti Eye Hospital	Bihar	£48,982	To construct a new wing to help the hospital accommodate the high volume of patients.

TOTAL for Eye-Care £408,413

Mother and Child Healthcare

Organisation	Location	Savitri UK Support	Purpose
OJUS Medical Institution	Maharashtra	£34,377	To improve access to and quality of basic healthcare and mother and child healthcare to 30,000 tribal population.
OJUS Medical Institution	Mumbai	£9,800	To provide psychological and social support to the staff and boys of the David Sassoon Remand Home.
Magic Bus	Mumbai	£5,858	To interact through sport with the boys from the David Sassoon Remand Home that will give them valuable life skills.
Tulsi Trust	Tamil Nadu	£3,526	To provide essential mother and child healthcare services to 15,000 people in 4 remote villages of Coimbatore District.
CCDT	Mumbai	£921	To provide 32 tribal women and children in the Sanjay Gandhi National Park with access to mother and child healthcare services.

TOTAL for Mother and Child £54,482

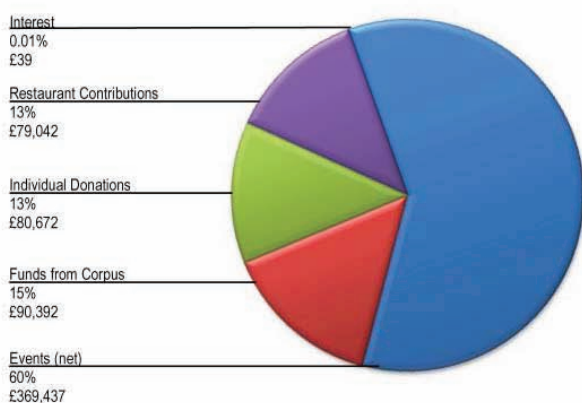
Others

Organisation	Location	Savitri UK Support	Purpose
Water	Madhya Pradesh	£94,010	To improve income generation and household food security to 4,000 tribal people through dug-well construction and renovation, kitchen garden implementation, and seed trials.
Egmont Trust	Africa	£5,000	Improving the lives of children affected by HIV and AIDS in Africa.

TOTAL for Others £99,010

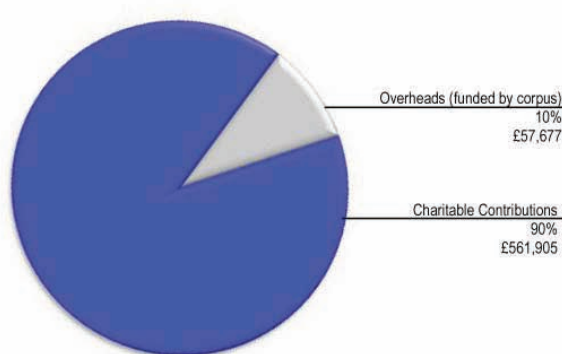
Financial Year 2010-11

Income



Total: £619,582

Expenditure



Total: £619,582

Website Launch

The new Savitri Waney Charitable Trust website has launched! We are delighted with the new look and feel of the site, which reflects the intimacy and warmth of the Trust as well as the incredible work carried out in each of the projects. Please visit www.savitri.org.uk to follow our currently supported project locations and details. Please send any feedback you may have to info@savitri.org.uk.

Our Dug Well Project Continues

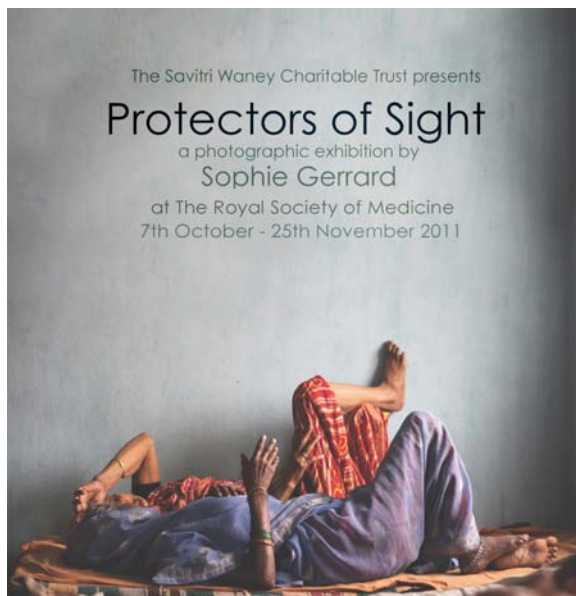
The Savitri Trust is very pleased to announce that the dug well for irrigation project has been extended for another three years (2011 – 2014). The target is to build 252 wells benefitting over 630 tribal farmer households in Madhya Pradesh by improving yields, creating capacity for income generation, and reducing distressed migration.

Look out for Oliver Croom-Johnson's short documentary film *Where There's a Well*, which is due to be broadcast in the coming months on More4 and Sky, bringing much needed exposure to this project and the plight of the people of Madyha Pradesh.

Annual Fundraising Event

Our annual fundraising evening at Zuma last December was a great success. The event was kindly sponsored by Clariden Leu and saw Zuma transformed into a rainforest as part of our Earth theme, with an array of beautiful exotic flowers and giant bugs mingling with the crowd. Our guests heard about the Savitri Trust activities and watched a short film on our eye care project in Bihar. Together we raised over £360,000 towards the Trust's projects. We thank all our guests and donors for your generosity, compassion and support.

ZUMA



Protectors of Sight Exhibition

We are delighted to announce that we will be presenting *Protectors of Sight*, a photographic exhibition by award-winning photographer Sophie Gerrard. In 2009 the Savitri Trust commissioned Sophie to travel to Bihar to document the amazing story of the fight against curable blindness. Sophie visited Bihar several times to create this project. *Protectors of Sight* is a powerfully emotive documentation of the work of the Akhand Jyoti Eye Hospital and the hope and resilience of the people of rural Bihar whose lives are so drastically affected by cataract blindness.

Her collection of photographs along with the short film also made following her time spent in Bihar, can be seen at The Royal Society of Medicine in Central London from 7th October and will also coincide with World Sight Day (13th October).

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