Vision
An inclusive and humane world that promotes capabilities, equity and justice

Mission
Enabling access to health and mental health care for persons living in poverty and homelessness through comprehensive and creative clinical and social care approaches embedded in a well being paradigm. The needs of those who live in the margins are our collective responsibility.

The Banyan Annual Report (2014-15) is a culmination of the collective efforts of several individuals. We thank each and every one of them. A special thanks to The Banyan staff, volunteers, donors and Board of Trustees whose support and guidance has helped in bringing out this report.

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Financial statements given in this Annual Report are as on March 2015 and the achievements are as of March 2015.
I am always struck by the drive, innovation, creativity and exponential growth seen at The Banyan and The Banyan Academy of Leadership in Mental Health (BALM) over the last two decades – what began as a passionate outburst, the empathetic response to the needs of homeless mentally ill women, has grown into an organisation that offers a range of holistic mental health services across two districts in Tamil Nadu, provides capacity building and technical support services on mental health interventions for organisations and agencies across the country, and most importantly nurtures multiple cadres of mental health and development professionals and significantly contributes to bridging the human resource gap in our country.

The cornerstone of The Banyan’s care services rest in the ideology that the right to choice is fundamental, and that clients are full participants in the process of recovery and rehabilitation. Ever a learning organisation, The Banyan conducts an internal review solely based on service users’ feedback. This not only enhances our service offering, approach to care but also contributes extensively to the existing literature on the nature of mental ill-health, distress and human rights in institutional settings, since studies including services users are few and far between.

The Banyan and BALM as sister organisations share a symbiotic relationship. The Banyan develops approaches to enhance quality of life of people affected by mental illness, marginalised on account of poverty or homelessness. In this process, the organisation aims to set benchmarks for mental health services in our country through locally relevant and robust practice. BALM studies these approaches to establish evidence grounded in practice including values, ethos and culture that are embedded in such practice. This is transferred through BALM’s education venture that offers Masters level courses to create a new generation of mental health and development leaders who can catalyse the large change needed for this sector.

I am immensely proud to see the zeal and enthusiasm displayed by young professionals at The Banyan and those enrolled at BALM. I am convinced that they will stimulate increased engagement, dialogue and practice in mental health and development sector and drive social change.

On behalf of the Board of Trustees, and the committed staff at The Banyan and BALM, I would like to extend our heartfelt gratitude to our institutional collaborators, corporate donors, volunteers, and well-wishers who are integral and vital partners in our endeavor to alleviate distress and promote resilience and wellbeing.

Here’s to the next decade!
A.Sankaranarayanan
Chairman
2014 has been a landmark year for The Banyan and The Banyan Academy of Leadership in Mental Health (BALM). It has seen both organisations innovate and fine-tune mental health services, engage with multiple stakeholders across the country with the aim of strengthening networks of care, and use participatory research and evidence derived from practice to impact policy. Most importantly this year has seen The Banyan and BALM transition into organisations led by two able and experienced Directors, and a strong Management team, who are mentored by the Board of Trustees and Founders. It gives me great pleasure and pride to commend the Internal Services Team (Human Resources, Finance and Administration departments) and the dedicated Project teams, who collaboratively ensure seamless operations and functioning across The Banyan and BALM’s multiple initiatives. The commitment, drive, passion and shared values displayed by the teams makes this transition a significant milestone in the progress and growth towards organisational sustainability.

We are taking strategic steps towards ensuring financial sustainability, and have developed a multi-pronged approach to being self-sufficient — by doggedly building a corpus, bidding for Research grants, engaging with the Government, and creating micro enterprises. Securing The Banyan and BALM’s core programmes and services will give the team the freedom to expand the scope of work, and incubate creative solutions to tackle persistent problems in the mental health and development sector.

Since our inception in 1993, the philosophy of inspiring and enthusing individuals to engage with the cause has remained fundamental to our work. I am awe-struck and humbled by the generosity, kindness and empathy of our numerous volunteers, well-wishers and supporters — be it some of our staff who choose to donate their salaries back to The Banyan, or the children residing with us, who display maturity, sensitivity, grit and resilience far beyond their years, or our most committed volunteers who never miss a day and always have us in their thoughts. To you I extend our deepest gratitude — we would not be where we are without your passion, encouragement and faith in our work.

In the same vein, I also offer our heartfelt appreciation to all our institutional donors and partners — our successes are shared, and we thank you for owning the cause, and sharing our vision and dreams!

I wish The Banyan and BALM teams the very best for what promises to be exciting times ahead!

Balraj Vasudevan
Managing Trustee and Honorary Treasurer
This has been an important year for The Banyan and Banyan Academy of Leadership in Mental Health (BALM). We are in our twenties! Besides strategic and need based expansion into other villages, panchayats, blocks and states, we have also truly transformed into a non founder(s) led organisation. Our greatest joy is in this evolution - that a young team of passionate and committed professionals, now drive the mission and vision of The Banyan and BALM in delivering cutting edge services for vulnerable groups, both in institutions and communities through shelters, hospitals and clinics; in continuing to combat social exclusion and promote participation in social and community life, in pursuing research around some very persistent problems, that otherwise could be dropped for easier, less messy ones and in building a culture of partnership and collaborative work with stakeholders across the country.

This team is representative of not just the future of The Banyan and BALM, but of hope and organisational sustainability. This sense of ownership beyond the founders, by our most engaged and competent boards, dynamic Executive Council and driven and motivated volunteers, is our biggest strength and reason for celebration. Similarly, the work of some of the women and men who have accessed our services, after their having achieved a state of personal recovery, is commendable and again, a good reason to celebrate. Be it, Selvi who fought homelessness, alienation and mental ill health, and today works as a peer counsellor and activist, supporting close to hundred other persons facing similar problems of mental ill health and deprivation in the tribal belts of the Nilgiris, or Bama, who lost herself after losing her parents and today, has found her niche in life as her customers swear by her beauty treatment and services, at the salon she works in; or Shankar who uses art to express himself, still withdrawn and somewhat distant, however, content with life, or Subhha who experienced severe trauma owing to repeated abuse on the streets and utter and abject poverty, but today though still not entirely well, makes chappatis at The Banyan Bistro for a living and looks forward to her son who attends an English medium school, aspires to be a pilot, doctor or actor and plays the piano with the flair and aptitude of a natural.

We have grown, understood ambiguity, diversity of experience and multiplicity of narratives in life, illness, human rights and social change. This reflects in our approach today, as we are aware of the complexity of conditions and contexts and are yet bold enough to be hopeful to drive change. This approach has made us confident, authentic and mature and enables us to stay with problems and persevere (even in times of uncertainty) and in the process innovate, problem solve and develop solutions or newer pathways to care. This ecosystem is now also a learning ground for our newest initiative, the TISS BALM collaborative programme that trains students in Social Work Practice, Mental Health, Psychology, Policy Analysis etc. It is our hope that our organisational DNA will seep through and infect this new cadre of development professionals and in some ways impact the future of our nation positively, influence social mixing and inspire human connection.

As we head towards our 25th gradually, we hope to continue to do what we do best - address distress and help stimulate creativity, resilience and hope!

Vandana and Vaishnavi
Founder Trustees
Message from The Director

Mental disorders are disabling, burdensome and stigmatising and lead to marginalisation and deprivation of right to live with dignity. Despite the availability of very effective, safe and economical interventions in mental health care, many people who need care do not receive it due to reasons such as poor access to mental health, poor equity in distribution of services and inability to reach out proactively. Delay in appropriate care results in persistent symptoms, progression in disability, worsening poverty and poor quality of life. Wandering away from the family on the background of severe mental health problems coupled by poor safety networks at the level of family, community and the larger society is increasingly emerging as a reality in the present day context.

Pioneering care and constantly refining the process of care, working around many challenges to develop innovations resulting in human rights friendly, scientifically valid and culturally appropriate system of care has driven the work of The Banyan since our inception in 1993. Learning from the work for the past quarter century has resulted in many insights and meaningful actions. Prevention of homelessness, working towards nurturing volunteers, developing human resources who are informed by the field realities and prepared to address the issues in a scientific manner has been our logical evolution from a service organisation to academic and research institute. We hope to contribute meaningfully to understand many gaps in scientific knowledge with respect to homelessness, recovery, reintegration, alternative long term options, building capacity in lay people to become stakeholders in mental health care and lastly to develop a strong sensitive cadre of highly trained mental health professionals to fill the gap of mental health.

We have travelled a path less travelled by many and all through this journey many innovations, pragmatic solutions have evolved. We have been raising the resources to fill the lacunae of care that exists in country today and it will go a long way if governments at all levels and corporates come forward to strengthen our hands in our journey to care for the most marginalised in the community.

I look forward to more engagement with stakeholders both from public and private sector to develop a system of care for the most vulnerable sections of the society which the country can be proud of and also provide leadership to the other low and medium income countries.

Dr. K.V. Kishore Kumar
Director, The Banyan
The discourse on mental health is replete with two oft-repeated rhetoric; one that we don’t have sufficient human resources. There are not enough psychiatrists, psychologists and social workers. The second, that we have a large treatment gap - prevalence rates that outstrip the capacity of current services. Mental ill-health is predicted to become the second highest contributor to the global burden of disease, behind only cardiovascular diseases, by the year 2020.

The bigger issue in mental health, however, is its vicious interaction with poverty and homelessness. The Banyan’s work in mental health began in the year 1993, with a lone homeless woman, in the throes of psychosis and in abject distress but completely invisible to the busy society around her. Our work is located at the cusp of such deep rooted despair, where people are stricken by poverty, affected by mental ill health and on top of that rendered homeless. Narratives of illness and recovery, in our two decades long work, are deeply rooted in people’s social realities. A homeless mother who almost sold her son for a bowl of curd rice on a beach; a family left without food for days after the suicide of their sole breadwinner; a child made to sit separately in school because he is from a particular colony; an elderly father left to care for his daughter so much so that he has to change her clothes after she passes stools; a young mother left to care for her two daughters in a roofless home; a young girl who gives up on any future for herself after witnessing her father’s suicide and her mother’s road accident. A cycle of personal aspirations crushed, trampled upon, generationally, with no end in sight.

Social distress concomitant to mental health affects all domains. It presents greater risks for mental ill health and homelessness. It affects people’s ability to seek mental health care if they need to. In face of such scarcity, often the priority is not to reach out for that medication at a clinic a few kilometers away, that will eat into daily wages, for apparent outcomes in the far distant future. It affects people’s ability to recover, connect with themselves and gain a sense of well-being.

Such experiences over the years have shaped The Banyan’s responses for addressing complex issues at the intersection of homelessness, poverty and mental ill health. We understand mental health as a multi-faceted issue, and believe that pathways to well-being are critically served through social approaches.
The Banyan's Response

Emergency and therapeutic services for homeless people with mental health issues

Inclusive eco-systems for people with mental health issues experiencing long term care needs

Health and mental health systems

NALAM: Social inclusion, skills development and well-being

Mental Health Institute: Adaikalam
160 bed facility that offers critical time interventions, comprehensive clinical and social care and rehabilitation of homeless women with mental health issues

Clustered Group Homes Cottages with living spaces for 60 women, co-located with the campus of The Banyan Academy of Leadership in Mental Health

Shelter for homeless men with psychosocial needs
30 bed open facility for homeless men with psychosocial needs, street engagement and personal services

Shared Housing
Housing options with supportive services for 80 women in urban localities and rural villages: that offers independent living, options or graded levels of support facilitated by health coaches

Urban Mental Health Programme
Community clinics with social care delivered through link workers in six wards of Chennai
Social care and user-carer self advocacy through day care services, employment placements, welfare entitlement facilitation, support groups and engagement with the government

Rural Mental Health Programmes
- Kundrathur block: Partnership with Government of Tamil Nadu’s Pudhu Vazhvu Thittam covering 42 village panchayats through 3 monthly community clinics and social care with support from 40 Cluster development Facilitators
- Thiruporur Taluk: Covering 50 village panchayats through 3 weekly community clinics and social care with support from network of 27 wellness mobilisers

Skills development
Skills development kiosks including home based work options open to wider community in 3 urban and 3 rural locations.

Social enterprise
Micro enterprise initiatives - SLVAI, Bun Kadai, Bistro

Youth Clubs and Services
Youth Clubs in 2 communities - one rural and one urban, summer camps in 3 urban locations, Tuition centers and after school activities in 5 locations, Pre-adolescent workshops in 20 village panchayats
“Vittukku poonum” (Tamil for I want to go home) is the most often heard phrase at the Mental Health Institute, Adaikalam, in Mogappair. A facility for rescue, comprehensive care and rehabilitation of homeless women with mental illness, Adaikalam has reached out to 1743 women in distress since its inception. Over the course of our work in Adaikalam in the last twenty three years, we have learnt that being with family, living in an environment of shared and mutual affection, responsibilities and dreams, is the largest priority for recovery expressed among homeless women with mental illness. Contrary to popular perception, more often than not, women who become homeless due to mental illness are not always abandoned by their families. Devastating poverty, combined with complete absence of appropriate care at the right time for their mental illness, renders them homeless. When women who walk the doors of Adaikalam reveal their choice of home to return to, it is an occasion to celebrate. The story of Ramkumari is familiar to everyone who knows The Banyan’s evolution. Ramkumari counted down days to the date of her momentous journey back home by stitching tiny clothes for her young babies she had left back at home when she wandered away. When the day finally arrived, and the team reached her village, she was unable to recognise the familiar environs. Dejected the party was ready to leave, when a chance encounter with a villager crossing railway tracks on his bicycle turned the story around. Instantly recognising her, he led us to her home, that was decked in flowers and other finery that day. As Ramkumari waited to see her babies, tall adults emerged from inside her home running to hug her. She was finally home after twenty years on the day of her daughter’s marriage! Each experience of reunion is thus, filled with all the colours and vagaries of life. Adventurous and exhilarating are apt words to describe reintegrations at The Banyan. From traversing several villages with the same name until the right one is reached to braving bad weather during search, our reintegration team has done it all. Over 1300 women have returned back to their families all over India since 1993; and 28 women have traced their steps back home in the last year alone.

Navajbhai Ratan Tata Trust has consistently supported the work of The Banyan including Adaikalam since 2000.
Malathy's Journey

An infectious energy spreads across the room as Malathy greets you. From a small village near Vaniyambadi, Vellore, she recalls her ambition as a young girl being cut short when her family disallowed her from pursuing her education beyond Class 10th, a perceived luxury for a poor family to indulge in a girl in this patriarchal world. A familiar route of marriage followed and with that incessant domestic conflicts and a numbing loss of self leading to the onset of mental illness. Despondent and angry at the world, Malathy shut herself into a world within, spending her days in the outhouse of her periyamma (mother’s older sister), wandering on the streets, unaware of herself and those around her.

In 2007, no longer able to provide for an increasingly ill Malathy, her periyamma brought her to The Banyan under the pretext of seeking treatment for diabetes. Throughout her stay at The Banyan and later at another institutional facility, this deception never left her. Familiarity with The Banyan staff and ability to negotiate through the system for securing her preferences such as going out, meeting her son, and commuting to work, helped her adjust to subsequent life at the institution. Slowly regaining her sense of identity, Malathy engaged herself in a wide variety of work within and outside The Banyan. Despite making great strides in her recovery, Malathy felt a growing sense of discomfort within herself, the source of which she never understood. Fortuitously, her mother came in search of her, after learning of her whereabouts from relatives, to The Banyan. This transition to home set herself into another period of instability, familial strife and constant change in accommodation. In all the disharmony, she nurtured her dream of enabling others like her secure their rights and attain their aspirations in life, by bridging the gap through awareness. She soon moved into a rented home by herself, sustaining herself on a meagre pension, support from well wishers and a fellowship with The Banyan, pursuing her agenda through propaganda, awareness and local advocacy. This effort is soon to take shape in the form of a registered trust called Thalir.

A self described liberal, who is open to new ideas, Malathy is defined by her unwavering and determined focus on a goal that she has set her heart on. Passionate about rights based work, she comments on the usefulness of legal instruments for securing rights, “It’s good that they have instruments but attaining is difficult. For example, if I did not have a link with The Banyan I would have lived a very different life. There are a lot of people who are living unaware without a similar bridge to these rights. These are locked in boxes- it should be open to public and they should be made more aware.” Malathy is currently taking small steps towards building these kinds of bridges, spreading mental health awareness in villages surrounding Vaniyambadi and leading an after school learning activity for Grade 9 students with academic difficulties at the nearby Government school.
Before women decide on making these journeys, there is a long road to regaining health – both mental and physical. The troubled mind must find its peace, the body needs to heal from wounds and diseases inflicted by the streets. Housed at the 160 bed Adaikalam facility, is a medical care unit serviced round the clock by the team of health care workers, nurses and doctors. Medical and Psychiatric services are delivered through four doctors supported by day on day monitoring of vitals, appropriate referral and documentation tirelessly carried out by the nurses and the health care workers. Physical ailments are managed in house and through external tie ups with Sundaram Medical Foundation (SMF) and Sri Ramachandra Medical College (SRMC). Oral care is provided on premises in collaboration with Smile Dental Clinic.

In the year 2014, 954 specialist health appointments were facilitated with external partners. 26 hospitalisations including critical life saving procedures were undertaken.

Social care is offered to address underlying socio-cultural issues concomitant to mental health - homelessness, poverty, familial dynamics, reconnecting with affilations to self/family and larger community, welfare and citizenship entitlements, promotion and protection of rights, exercising autonomy and agency. Critical time interventions are available for homeless women with mental illness. Case management services are offered to ensure systematic personalised needs assessment, individual planning and coordinated care. Primary needs of nourishment, clothing and shelter are coordinated and tailored as much as possible to expressed personal preferences. Clients access a Human Rights Committee with independent members and Legal aid services through a government appointed visiting magistrate. Citizenship entitlements such as the Aadhar card are facilitated. Reintegration options of reconnecting with family through reintegration trips or shared housing with graded levels of support are facilitated; co-planning and preparation for transition to living in the community is undertaken. Psychological services are offered by a team of psychologists. These include assessments that aid in clinical care and psychological therapies such as cognitive behaviour therapy, cognitive remediation therapy, motivational therapy and supportive counselling. Therapies are tailored to suit individual needs; group therapies are offered for clients with unique but common needs such as those with intellectual disability or those with social withdrawal. In the last one year; there were 233 appointments for psychological services.

Occupational therapy services in the form of culturally appropriate and adapted activities and individual therapies are available. These range from threading beads, peeling onions, undertaking a small personal task, aquatic therapy to horticultural activity. Vocational interventions are offered through small work opportunities at various functional units of the facility (for example, housekeeping, kitchen etc) and a common workspace with skills training in making various handicrafts. Client led small enterprises such as a SUVAI as canteen offering Indian delicacies or the Mor Kadai, a buttermilk stall outside the facility. Transactions with larger community are encouraged through regular stalls and sales in the neighbourhood and through ‘self funded’ (client initiated and funded) outings. In a month, on an average, 30 women use occupational therapy services, 40 use daily wages scheme and 45 women participate in vocational training interventions. 8 women on an average traveled to employment outside the facility in the last one year.
Not all women are able to reconstruct their life stories to make this journey back to home. In some cases, women may choose not to return to their lives as it were before, instead seeking independence and an identity detached from their families of origin. Ongoing disability, age and coping with the disappointment of never finding what they left behind, this cohort of women presents with long term, often, complex needs. The Banyan’s Clustered Group Homes (CGH) is an initiative that took root in 2007 in response to such needs.

A kilometer off East Coast Road in Chennai, at Thiruvanandhaipalayam village, this facility today represents a unique ecosystem with students, residents and the wider community converging for various activities. A row of cottages overlooking a courtyard with a peepul tree serves as residences for homeless women with mental illness. The cottages merge seamlessly on the other side with classrooms and facilities of the diverse MA courses offered by our sister organization The Banyan Academy of Leadership in Mental Health (BALM). The red wall of the auditorium breaks the circular white space; always the hub of activity as it is booked for seminars, birthday parties and weddings by the wider community. A Cafe run by residents, caregivers and members from the wider community, is the community’s common space, where informal bonds are fostered over organic and diverse personal, intellectual and social conversations. There is a hub of activity with women busy making baskets at the Vocational training unit. Some women are resting after the hustle bustle of morning housekeeping, engaged in chit chat over a cup of tea. Jyoti, the indispensable receptionist and official guide, leads visitors around, familiarising them with the daily goings on of this vibrant community. On a clear evening as the wind from the ocean starts to flow, children from the neighbouring village drop in for after school tuition offered some of our residents. A shared space between residents, the neighbourhood and students, this eco-system is a process of aspirations, of all that is made of home, family and community, taking shape. Today, 42 women have made this place their home and 60 students are pursuing various degrees in social sciences and mental health.

This ecosystem has been made possible through generous contributions towards building and other capital expenses from: Mr. Balraj Vasudevan, Dr. Lakshmi Walters, Mr. M A Vellodi, Dr. Nachiket Mar, Bajaj Finserv, Ms. Malika, Mr. Shivkumar, Chennai Willington Corporate Foundation, Real Image Media Technologies, Sathyam Theatre, Mr. Amarnath Reddy, Mr. Bijoy Paulose, Mr. Sabu & Ms. Sri Charanya and Family, Mr. Mahadevan (Chennai Mission and Hot Breads), Colour the World, Mr. Jagdev Singh Gill, Tata Realty and Infrastructure Limited (TRIL). Without their faith, this dream would have never been realised.
Kannagi's story of threading her life back

Kannagi grappled with the reality of her sister’s suicide while spending her days slogging in an innerwear production factory, and her evenings, shrugging away her exhaustion, being a mother to her two nieces. While she struggled to make ends meet by working hard, saving meticulously, and depending on donations from the local church, her educated but terribly demotivated younger brother offered her little or no support. The weight of putting aside every personal need, along with her own hopes and dreams, finally gave way when Kannagi witnessed the death of her mother in a road accident four years ago. Affected by bipolar disorder, Kannagi threw caution to the winds, spent all her hard earned money and began to wander. Her brother then brought her to the Health Centre, after being referred by another client with acute psychosis whose symptoms had completely remitted. With no place to go, or relatives to take care, except for her brother who was out of work, and in light of her symptom severity, The Banyan team decided to give her space to recover in the inpatient facility at the Health Centre. Further, The Banyan facilitated support for the education of her two nieces.

Steadily, with medication and case manager sessions, Kannagi started to find her way back into recovery. Encouraged to participate in activity that she likes by her case manager, she started to assist with chores around the Health Centre, making tea and coffee for visitors and making an occasional basket at the Vocational Training unit. In time, she made friends with another client who was living independently in a home in the community nearby and moved in with her. After a stint at a local restaurant’s kitchen and housekeeping unit, Kannagi regained much of her confidence and opted to join as an employee of the Bistro located at the Banyan Academy of Leadership in Mental Health. She has now moved into the Clustered group homes (CGH) to make it easier for her to work. She loves her current job within an academic atmosphere filled with young students. In March, the batch that was graduating presented her with a sari to show their appreciation which she treasures.

The Paul Hamlyn Foundation supports ongoing operational costs of the Clustered group homes
While we enabled an inclusive ecosystem by raising infrastructure, we offered options for homes and a life in the community with intensive case management, and onsite staff if necessary, for women with long term care needs. Based on our previous experience in successfully facilitating independent living arrangements, wherein a group of women share rent and other responsibilities in a home, we extended the concept for women with higher clinical needs who may, in this transition to a space unconstrained by a schedule, find the rhythm to engage with their own self, their thoughts, interpersonal relationships, choices and aspirations.

Bonds within a home are formed, some are leaders, anchors for the home, others are mothers, daughters, sisters and friends. The home becomes a shared space of comfort with mutual affection and responsibilities. Mothers live with their children, who go to school, play with other children in the neighbourhood and attend after school activities at the rural programme’s Health Center that attracts 30 children from Kovalam village. There are organic interactions with the wider community - at a tea shop frequented daily, with women at the water spout where water is gathered, with the fruit seller who comes by the street in the evening. Small business aspirations take root – vathals (rice crisps) and dosa maavu (batter for rice pancakes) are made with great fervour in the urban homes.

Some choose to engage in handicrafts at home, some travel to our various skills development centers. Some find opportunities in the community, washing vessels, drawing kolams or housekeeping for a salary. And then there are a few who work at beach resorts or export oriented units in the vicinity. Opportunities at the 100 days work guarantee scheme of the government are made use of, by those who prefer this kind of work. Money earned is spent on bajjis at the local beach, in a visit to the temple, in buying jewellery, personal toiletries of choice, new sarees, movies and the like. Some have bank accounts, used for savings and other transactions. Health care workers onsite assist in all ways necessary; case managers visit socially to help with planning for their diverse physical, psychological, social and economic needs.

Living in such a family like unit, with opportunities for participation in the social-economic fabric of the wider community, has restorative benefits.

Parvathy, 39 years, loves to cook and lives in a home shared with four friends in a village 50 kilometers south of Chennai. She says, “Now I feel like how I did in my younger years, before I became ill, at home, going to school, coming back home, cooking...I feel very content and delighted...This is good, everyone will be happy, they will feel peaceful that they are at home.”

58 women currently live with onsite staff support and 13 women live independently in 16 homes in the urban and rural community.
Kala walked into The Banyan family in 2003. Over the many years that she has lived at two of our institutional facilities, her past has remained shrouded in mystery because of the nature of her mental illness. Like several other women in similar circumstances of not being able to return to their families of origin, Kala lives in a new found family of friends in a supportive housing unit in Perur, a close knit community off East coast road in Tamil Nadu.

In this life Kala is best friends with Jeyarani, dependable and resourceful, earning a small income through various odd jobs at The Banyan. Petite with a throwback to the 60s hairstyle, Kala prefers a pragmatic approach to her communication with others, limiting it to small need based conversations. On occasion, a health worker may attempt to negotiate complete abstinence from her use of snuff. Her ever ready sparkling smile takes care of the rest of such a conversation. Conscientious about maximizing her earnings, she prefers not be disturbed in the middle of work for case manager sessions or doctor reviews. Small pleasures fill her daily life – a packet of snacks bought from the shop across, yoga over the weekend, watching the morning kolam preparations, prasadam from a trip to the nearby Sai temple. Kala is today able to pursue life in her own way.

The expansion of our shared housing initiative has been made possible through support from the Grand Challenges Canada. Grand Challenges Canada is an initiative of the Government of Canada and is dedicated to supporting Bold Ideas with Big Impact in Global Health.
Open Shelter: Options for homeless men with psychosocial needs

At the end of a small lane off Santhome High Road, that can barely fit a car, is the Open Shelter for homeless men with psychosocial needs, run in collaboration with the Corporation of Chennai and HCL Technologies Foundation. An open, inclusive option for homeless men with psychosocial needs, the facility engages with the community in the vicinity to offer shelter, personal care, street engagement, youth club and outpatient services.

A critical part of the Shelter’s work is the The Dooming Kuppam Youth Club (DKYC) facilitated for children and young adults from the community. DKYC offers afterschool, sports and skills development services that attracts participants from the wider community. Evenings at the shelter are very busy for our residents with troves of visitors, filled with laughter, play and interactions with children from the community. Such interactions have helped residents in various ways - Raghu regained his attention over several games of carom, Pappu found immeasurable love, Basha reconnected with memories of his home and children. Boys from the Youth club also pitch in with street engagement services, delivering food and building rapport with homeless men in the surrounding localities. DKYC plays an instrumental role in our effort towards community owned, localised, well-being oriented mental health services, that offers significant therapeutic benefits, and may break down barriers of stigma and enable inclusive communities.

For Sankar anna the shelter at Dooming Kuppam is home. He says he is at the Shelter because he wants to experience life without too many worldly pleasures, without attachment, a ‘simple’ life.

One of the few residents who has been at the shelter since its establishment, Sankar anna knows the space and the people like the back of his hand. He is dedicated to his responsibilities, ensuring everything at the shelter - from the kitchen to housekeeping - flows without a glitch. He also takes care of Apu, the shelter pet, dear friend and comrade of all the residents. Perseverance in his routine chores, being responsible for several tasks, and his amiable nature have helped him tide over tough times.

A comforting and secure presence at the Shelter, the residents repose an unshakeable faith in him. This unspoken trust is the scaffold for the ‘simple’ life that Sankar anna has built over the years. A huge cricket buff, he loves to play with residents and staff in the evenings. Impeccably dressed, always seen wearing his trademark kurtas, Sankar anna is very particular about his appearance. You can find him stealing a few moments in front of the mirror, combing his hair and flashing a smile. Sometimes, he is reflective, sharing anecdotes of friends, of his heydays as a sportsperson and the riches; he speaks of different, multiple realities, of ideas that the world today is perhaps too naive to accept, and he grins and shakes his head.

Visitors, volunteers and guests are greeted by the whiff of the cardamom infused tea that he prepares after a quick siesta. A strong, complex flavour engulfs their mouth as they take in the first sip, Sankar anna flashes his trademark smile and by the end of the cup, everyone is left craving for more of that warmth.

Instrumental to the success of Open Shelter is the partnership with Corporation of Chennai, who offer all infrastructure support, and part of the human resource and food expenses. HCL Technologies Foundation supports a majority of the Shelter’s recurring expenses including community engagement and social inclusion activities such as the Youth Club. Volunteers from the Kind People, Happy City campaign (KPHC) offer their time and expertise in reaching out to homeless men with psychosocial needs.
Our community-based mental health services cover six urban wards and two rural blocks with a combined population of nearly 4.5 lakhs under the Urban Mental Health Programme (UMHP) and the Rural Mental Health Programme (RMHP). Weekly clinics are offered in seven locations, and monthly camps are conducted at another three locations. Clinics are located at our facilities in Mogappair and Kovalam; a majority are collaborations with various government or non-government settings and are co-located in Primary Health Centers, the District Disability Rehabilitation Office, Loyola college and local government offices. These clinics are staffed with a Psychiatrist, Case Managers and Community workers.

In addition to medication and counselling, in cash disability allowance and in kind benefits are offered. Such complementary social care includes after school activities, welfare entitlement facilitation, general health referrals, day care, skills development and employment placements. Home visits are conducted as a part of outreach activities linked to the various clinics. Home visits are employed to assess client progress on many domains – from symptoms and work to personal aspirations and socio-economic difficulties. Such assessments help to identify client and household social realities and consequent needs that are concomitant to recovery. These are addressed by linking with government entitlements such as ration card, insurance, disability aids, Aadhar card, government allowances and so on. Or appropriate non-government resources such as health, education scholarship, skills development, employment placements etc are identified. Home visits are also a means to offer care at home. For select families that are undergoing extreme distress, medicines and social care benefits of The Banyan such as the disability allowance and in kind ration and occupational therapy services are delivered at home. This work across all communities is resourced by a network of incentivised grassroots volunteers - called link workers or wellness mobilisers.

This combination of clinical mental health care and social care, frontlined by members from the community recruited as wellness mobilisers is particularly relevant to our work in the rural context. In Kancheepuram district, our community based mental health work covers two blocks - Thiruppur and Kundrathur - and between them 92 panchayat villages. In Kundrathur, we work in partnership with the Government of Tamil Nadu’s poverty alleviation project, Pudhu Vazhvu Thittam (PVP) that is supported by the World Bank. Existing Cluster Development Facilitators (CDFs) are trained in mental health care to layer on top of their existing poverty alleviation oriented work. In Thiruppur, we have mobilised our own network of grassroots workers called NALAM mobilisers (NALAM means wellness in Tamil) from the community as part of the NALAM project with support from Grand Challenges Canada. In both the PVP and NALAM projects, mobilisers identify and seek those most marginalised in extreme distress - elderly with no social support, those living below poverty, women with no spousal support, people living with disabilities, marginalised communities such as the Irulas and Dalits and people living with mental illness. Those in need of clinical care including specialist counseling are referred to the nearest clinics. To address other needs, government entitlements, poverty alleviation schemes and other such community resources are linked with.

We believe that this approach addresses the mental health and social deprivation nexus in two ways. On the one hand, mitigating social and economic distress concurrent to mental ill health is important for recovery. On the other, this may serve as a preventive measure by promoting positive mental health.

Community based options in mental health: Comprehensive well being oriented packages of care
These initiatives have been made possible through support from the **Navajbai Ratan Tata Trust** who have contributed towards urban and rural community based mental health care options offered by The Banyan. Rangoonwala Foundation (India) Trust undertakes costs of medicines as part of urban community outreach. BMW supports recurring expenses of the Health Center, 12 bed community inpatient facility with outpatient services including day care and skills development. Thanks are due to Grand Challenges Canada (GCC) for their support to initiate the NALAM trial that has enabled us to mobilise 27 people to work as grassroots mental health resources in Thirupurur taluk and to Pudhu Vazhvu Thittam (PVP) for their partnership that has enabled localised mental health care in Kundrathur block.
Surviving against all odds

Off a dusty road in the village of Oragadam is a cluster of thatched homes, unevenly strewn over a small area. There are 32 families living in this colony of Irulas, an ethnic minority known for their rodent trapping abilities. Marginalised for centuries, they are excluded from almost every aspect of the larger socio-economic-political fabric. Basic entitlements such as community certificate are denied. They do not own the land their houses are built on. Their children are asked to sit separately in the Balwadi.

During one of her field visits, Saraswathy, the NALAM mobiliser for Oragadam came across Kavitha and her family comprising her in-laws and two children in grades 1 and 3. For Kavitha, her husband’s suicide in such a marginalised environment was succeeded by even more unfortunate events. They lost their livestock. They went without food for days. Her father in law, Mani, fell into deep depression. Mani was already short of hearing and with poor eyesight. Not knowing how to escape this despair, Kavitha found herself pouring her heart out to Saraswathy.

Saraswathy gently convinced Kavitha to bring her father in law to one of the rural mental health programme’s clinics in Manamathy. She assured her that, given the family’s circumstances, arrangements for bus fare would be considered. At the clinic, in addition to medication, Mani was offered a monthly disability allowance and 2kgs of rice. Saraswathy continued to follow up on Mani’s progress and the family’s general circumstances through regular visits at home, which included delivery of medication. When there were small visible improvements in Mani, and he was ready to work, Saraswathy sought appropriate opportunities. The Mahatma Gandhi Rural Employment Guarantee Scheme appeared to be an apt choice, as he was comfortable with manual labour and at the same time could draw full wages even if he could not work full time on account of his disabilities. She then applied for an Aadhar card, MGNREGS card and a disability card, so that he could enrol into the scheme and access all benefits. In addition she helped apply for the government insurance scheme and a hearing aid. A tuition center with support from The Banyan was facilitated; Saraswathy mobilised support from community, teaching staff and children. Kavitha’s two children started attending this tuition center. Further, Kavitha was encouraged by Saraswathy to apply for a Diploma in mental health offered by the Banyan Academy of Leadership in Mental Health (BALM).

Today, Kavitha and her family are not yet thriving, but they have put the days of struggling to even survive behind them. A semblance of hope has returned to their lives; that the children of the house can and will do better for themselves is now more than a fleeting thought. Kavitha looks forward to better prospects for herself and her family. Summing up her emotions on joining the diploma, she says, “From the time I joined, I feel proud. From the time my husband died, circumstances at home tied me. But now I am going to another place, I am aware of things they speak about. I have shared my difficulty with them. I am very happy.”
No day is ordinary at The Banyan, nothing is routine. Being responsive to the complex needs of people doubly affected by mental illness and poverty demands dynamism and swiftness; and a well oiled machinery to sustain it. To keep our extraordinary machinery running across several project sites spread over Chennai and Thiruporur Taluk, is no mean feat.

Working in the background of all of our direct services complementing the frontline staff, is an internal services team that manages human resources, administration, fund raising and accounts. Swapna, our Deputy Director of Internal Services, is a veritable encyclopedia on The Banyan, famous for managing infinite tasks on her plate as if she were eating a piece of cake. She joined us in 2001, at the age of 18. From maintaining vehicles for critical time interventions and ensuring hygiene to managing expenses and raising new buildings, the work of our Internal Services team is integral to the impact The Banyan has in mental health.

No Strings Attached

Our spontaneity and ability to respond to diverse needs of people we work is at the core of all that we do. This is possible thanks to the long standing associations of a few institutions, who have offered us flexible support that has translated into art, recreation, outings, and stipend for clients; travel to learn from other contexts and build partnerships with other organisations; capital infrastructure and so on. Special thanks are due to Colour the world, Steve Maas Foundation, ARR Charitable Trust, VS &B Containers and Anna Nagar Times for their generous contributions every year with no strings attached.
Our skills development and wellness initiatives are spread across our urban and rural programmes. Women and men, both residential and from the community, participate in creating unique products using block printing, patch work, needle work, tailoring and other skills – some work at the units located at our centers, while others work at home. Day care options in urban and rural communities are combined with skills development offerings for the wider community and are accessed by people from the surrounding localities besides our clients. Microenterprise ideas of several clients take root as well. Bun Kadai at Adaikalam dishes out the tastiest array of baked goods, sold with fervour rivalling the best marketeers. SUVAI competes with Bun Kadai, with smells of ethnic dishes rivalling the delicious name of the initiative itself. Potti Kadai run by Anna Mary at the Clustered Group Home is a favourite haunt for students, clients and staff. Seed money for running an internet cafe in Dooming Kuppa was secured through crowdsourcing. In a home in Mogappair, clients are busy readying their batch of vattals (rice crisps), gingerly laying out bite sized portions over a white cloth on the terrace. And of course, there is the splendid Bistro, in the serene environs of Thiruvvidanthai village, at our campus, that dishes out irresistible pizzas, coffees and quick bites in addition to sumptuous lunch spreads, thanks to the fabulous training sponsored by Mr. Mahadevan and Oriental Cuisines. Watch out for the pop up restaurant announcements!
**Governance Details**

**Nature of the organization**
A secular Indian Registration Public Charitable Trust reaching out to the marginalised sections of society

**Trust Registration Details**
No. 1589/K-Year of Establishment – 1993, Place – Chennai

**Board of Trustees**
*Prof. Dr. Vandana Gopikumar – Founder Trustee
Ms. Vaishnavi Jayakumar – Founder Trustee
Mr. Sankara Narayanan – Chairperson
Mr. Balraj Vasudevan [MD Autopumps & Bearing Co P Ltd] – Treasurer
*Mr. Senthil Kumar [Director, Real Image Media Technologies Private Limited] – Trustee
Ms. Sujatha Paulose [MD V S & B Containers] – Trustee
Mr. Amarnath Reddy [MD, Shoetek Agencies] – Trustee
Mr. K.C. Mohan [Retd] – Trustee
Mr. M. Lakshman [Executive Chairman, Mr. Rane Break Linings Ltd.] – Trustee
Mr. P.S. Raman [Advocate] – Trustee
Mr. S. Pradeep, MD, Cholayil Group - Trustee
Ms. Arathi Krishna, Joint Managing Director, Sundram Fasteners - Trustee
Mr. N.K. Rangan [Managing Director, Grundfos Pumps India Pvt Ltd] - Trustee

(*) Note that Ms. Vandana is married to Mr. Senthil. Both were independent members prior to their marriage.

**Salary Details**

<table>
<thead>
<tr>
<th>Slab of gross salary plus benefits (Rs per month)</th>
<th>Male (Nos)</th>
<th>Female (Nos)</th>
<th>Total (Nos)</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;5000</td>
<td>0</td>
<td>7</td>
<td>7</td>
</tr>
<tr>
<td>5,000 - 10,000</td>
<td>11</td>
<td>77</td>
<td>88</td>
</tr>
<tr>
<td>10,000 - 25,000</td>
<td>17</td>
<td>30</td>
<td>47</td>
</tr>
<tr>
<td>25,000 - 50,000</td>
<td>3</td>
<td>5</td>
<td>8</td>
</tr>
<tr>
<td>50,000 - 1,00,000</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>&gt;1,00,000</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>32</strong></td>
<td><strong>119</strong></td>
<td><strong>151</strong></td>
</tr>
</tbody>
</table>

Head of the Organisation Rs. 1,01,667 per month
Highest paid staff member Rs. 1,01,667 per month
Lowest paid staff member Rs. 5,848 per month

**Travel Details**
Total cost of National Travel by Board members / Staff / Volunteers on behalf of the organisation for 2014 - 15 is Rs. 63,426.00
Total cost of International Travel by Board members / Staff / Volunteers on behalf of the organisation for 2014 - 15 is Rs. 5,28,406.00
1. May 2014, Ms. Lakshmi Narasimhan travelled to Bethesda for GCC meeting, Rs 2,38,966
2. October 2014, Dr. Kishore Kumar travelled to Seattle for GCC meeting, Rs 1,44,720
3. October 2014, Ms. Nisha Vinyak travelled to Seattle for GCC meeting, Rs 1,44,720

**Board of Trustees Meeting 2014 - 15**

<table>
<thead>
<tr>
<th>Date</th>
<th>Attendance</th>
</tr>
</thead>
<tbody>
<tr>
<td>28th June 2014</td>
<td>9/13</td>
</tr>
<tr>
<td>11th October 2014</td>
<td>7/13</td>
</tr>
<tr>
<td>19th January 2015</td>
<td>11/13</td>
</tr>
<tr>
<td>21st March 2015</td>
<td>6/13</td>
</tr>
</tbody>
</table>

The remuneration and reimbursement for all board members is Zero for the FY 2014 - 15

**Bank Accounts**

<table>
<thead>
<tr>
<th>Bank</th>
<th>Branch</th>
<th>Account Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Axis Bank</td>
<td>Anna Nagar Baranch</td>
<td>016010100372572 Rangoonwala</td>
</tr>
<tr>
<td>ICICI Bank</td>
<td>Anna Nagar Branch</td>
<td>060270120207220 Corpus</td>
</tr>
<tr>
<td>016010100457002 VT</td>
<td>0602701209343 Recurring</td>
<td></td>
</tr>
<tr>
<td>016010100458975 NIN</td>
<td>0602701229375 NRTT</td>
<td></td>
</tr>
<tr>
<td>032901001000114 Spiceroute</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Axis Bank</td>
<td>Madipakkam Branch</td>
<td>028710400117616</td>
</tr>
<tr>
<td>ICICI Gramaena Bank</td>
<td>Krishnan Karanai Branch</td>
<td>083010100136983 Recurring</td>
</tr>
<tr>
<td>9090100038293721 FCRA</td>
<td>0602705038023</td>
<td></td>
</tr>
<tr>
<td>SBI</td>
<td>Anna Nagar Branch</td>
<td>10408452644 Recurring</td>
</tr>
<tr>
<td>10408452859 Building Fund</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10408453115 Swadhar</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kotak Mahindra Bank</td>
<td>Anna Nagar Branch</td>
<td>6011155791 - FC</td>
</tr>
<tr>
<td>6011155807</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6011291253 - HCL</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Registrations**

<table>
<thead>
<tr>
<th>Permanent Account Number (PAN)</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>PAN/GIR No: AAATT0468K</td>
<td></td>
</tr>
</tbody>
</table>

Donations are tax exempt under Section 80 (G) of the Income Tax Act.

Donations are tax exempt under Section 35(AC) of the Income Tax Act.
Notification No: E.E. dated 12.03.2013

FCRA Registration No: 075900624, dated April 1998
This sanctions The Banyan to receive donation in a foreign currency.

**Auditor**

Mx. V.J. Joseph, Chartered Accountant
GJoseph & Co, Chennai – 600 031

**Internal Auditor**

SPR & Co., Chartered accountants
Chennai 600 086
Every penny towards our work counts. The Banyan’s work over the last twenty three years has developed thanks to unwavering support from countless individuals and key institutional donors who have partnered with us in our journey to transform lives. Some options to donate are:

<table>
<thead>
<tr>
<th>Donation options</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meals on Time Initiative</td>
<td>INR 500,000, Covers meals for 52 days in a year, one day per week</td>
</tr>
<tr>
<td>Special Occasion Scheme</td>
<td>INR 13,500</td>
</tr>
<tr>
<td>All meals in a day (Vegetarian)</td>
<td>INR 22,000</td>
</tr>
<tr>
<td>Breakfast</td>
<td>INR 3,000</td>
</tr>
<tr>
<td>Lunch or Dinner (Vegetarian)</td>
<td>INR 5,500</td>
</tr>
<tr>
<td>Lunch (with Sweet)</td>
<td>INR 7,000</td>
</tr>
<tr>
<td>Lunch (Non Vegetarian)</td>
<td>INR 13,500</td>
</tr>
<tr>
<td>Fruits for a week</td>
<td>INR 6,000, Fresh meals cooked and served in our premises for 250 residents to celebrate, or in memory, of an occasion.</td>
</tr>
<tr>
<td>Monthly Membership Scheme</td>
<td>Starting from INR 1,000 onwards to any amount that you choose credited monthly to the cause of The Banyan for 12 months</td>
</tr>
<tr>
<td>Stay Well Incentive</td>
<td>INR 12,000 per client, covers a incentive equivalent to a disability allowance for one client for a year</td>
</tr>
<tr>
<td>Support Medicines for a Client</td>
<td>INR 6,000, covers medicines of one client for a year</td>
</tr>
<tr>
<td>Stay in School Scheme</td>
<td>INR 20,000 to INR 50,000, covers annual tuition fees for school/higher education of one child living with parental mental illness</td>
</tr>
<tr>
<td>No Strings Attached</td>
<td>Any amount of your choice</td>
</tr>
</tbody>
</table>

**FCRA Money Transfer Details**
- **Name & Address of the Beneficiary**: The Banyan
- **Accounts No.**: 909010038293721
- **Type of A/c** (CA / SB): Saving Bank
- **Name & Address of Bank Branch**: Axis Bank Ltd, Madipakkam, Chennai (TN), No-2, Medavakkam High Road, Madipakkam, Chennai - 600 091
- **Branch Name & Code**: Code: 083, 600211007
- **MICR No.**: 600211007
- **IFSC Code of the Bank Branch for RTGS mode**: UTIB0000083
- **IFSC Code of the Bank Branch for NEFT mode**: UTIB0000083

**NON - FCRA Money Transfer Details**
- **Name and address of the Beneficiary**: The Banyan
- **Account Number of Beneficiary**: 0287104000117616
- **Account Classification (CA /CC / SB)**: Saving Bank
- **Name and address of the Bank Branch**: IDBI Bank, No. 6/11, Pattery Square, Balfour Road, Kellys, Kilpauk, Chennai - 600 010, Tamil Nadu, India
- **Branch Name / Code**: Kilpauk Branch, Chennai (TN), Code :287
- **The 9 Digit MICR code of the Branch**: 600259012
- **IFSC Code of the Bank Branch for RTGS mode**: IBKL0000287
- **IFSC Code of the Bank Branch for NEFT mode**: IBKL0000287
- **Swift Code**: IBKLINBB005

Send your contributions by Cheque/Demand Draft/ Money Order in favour of “The Banyan”. To donate through Credit Card or Net banking visit www.thebanyan.org. For more information write to kamala@thebanya.org.

**Intern or Volunteer**
The Banyan offers a wide range of opportunities for volunteers or interns to work as part of our programmes and be mentored by our exceptional team. People who would like to lend their skills and expertise to this cause are most welcome. Drop an email to neha@thebanyan.org.
Thank you Partners

The Banyan is only able to operate thanks to the generosity of our friends and supporters. In particular we would like to thank:

A R Foundation
Anna Nagar Times
ARR Charitable Trust
Ashok Vellodi
AVM Charities
Bijoy Paulose
Charities Aid Foundation
Chennai Mission
Chennai Willingdon Corporate Foundation
Colour the World, Stifung
Corporation of Chennai
D.N. Prahlad
Friends of The Banyan, USA
Give Foundation
Golden Homes Pvt Ltd
Grand Challenges Canada
HCL Technologies
Hemalatha Viswanathan
IBM India Pvt Ltd
Interspace
Jagdev Singh Gill
K.A.M.Kaja Mohideen
K.C. Mohan
L.Lakshman
Lakshmi Jayan
Madras Heritage Round Table
Madurai Power Corp. P Ltd
Mahindra Holidays & Resorts I ltd
Malaysia Manoroma
Mallika Das
N.Subramaniam
Navajbai Ratan Tata Trust
Paul Hamlyn Foundation
Puthu Vazhvu Project (PVP)
R V Industries
Raghavendra Industries
Rane Foundation
Rangoonwala Foundation
Sara Alexander
Sathyanarayana Charitable Trust
Shiva Kumar
Shoetek Agencies
Sri Charanaya
SPI Cinemas P Ltd
Stichting Vu-VUMC
Suneel Krishnaswamy
T.G.G.Raman
The Breadsticks Foundation
Tonga Suedhi
V.S.Pradeep
Venkatesh Govindaiah
Vrishin Subramaniam
VS & B Domestic Container Solutions Pvt Ltd
## Balance Sheet

### Liabilities

<table>
<thead>
<tr>
<th>Fund Type</th>
<th>As on 31.03.14</th>
<th>As on 31.03.15</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Fund</td>
<td>43,988</td>
<td>50,297</td>
</tr>
<tr>
<td>Corpus Fund - NRTT*</td>
<td></td>
<td>60,000</td>
</tr>
<tr>
<td>Corpus Fund - Others</td>
<td>815</td>
<td>17,797</td>
</tr>
<tr>
<td>Other Fund</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Earmarked Fund NRTT</td>
<td></td>
<td>3,434</td>
</tr>
<tr>
<td>- Capital Fund NRTT</td>
<td></td>
<td>27</td>
</tr>
</tbody>
</table>

**Total** 52,139 131,556

### Assets

<table>
<thead>
<tr>
<th>Category</th>
<th>As on 31.03.14</th>
<th>As on 31.03.15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fixed Assets</td>
<td>36,403</td>
<td>51,258</td>
</tr>
</tbody>
</table>

**Current Assets, Loans & Advances**

<table>
<thead>
<tr>
<th>Category</th>
<th>As on 31.03.14</th>
<th>As on 31.03.15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deposits</td>
<td>586</td>
<td>929</td>
</tr>
<tr>
<td>Other Current Assets</td>
<td>2,237</td>
<td>2,239</td>
</tr>
<tr>
<td>Balance in Scheduled Banks &amp; Cash-in-hand</td>
<td>19,730</td>
<td>84,080</td>
</tr>
<tr>
<td>Less: Current Liabilities</td>
<td>6,817</td>
<td>6,950</td>
</tr>
<tr>
<td>Net Current Assets (A) - (B)</td>
<td>15,736</td>
<td>80,298</td>
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</table>

**Total** 52,139 131,556

---

## Receipts & Payments

### Receipts

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Amount (Rs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opening Balances :-</td>
<td></td>
</tr>
<tr>
<td>Cash in Hand</td>
<td>83</td>
</tr>
<tr>
<td>Axis Bank - 016010100372572 RFIT*</td>
<td>57</td>
</tr>
<tr>
<td>Axis Bank - 083010100136983 Recurring</td>
<td>453</td>
</tr>
<tr>
<td>Axis Bank - 909010038293721 FCRA</td>
<td>4,491</td>
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<tr>
<td>ICICI Bank - 602701202072 Corpus</td>
<td>1053</td>
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<tr>
<td>ICICI Bank - 602701209343 Recurring</td>
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<tr>
<td>ICICI Bank - 602701203946 NRTT**</td>
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<tr>
<td>ICICI A/c 0329010000114</td>
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<tr>
<td>ICICI A/c 602705038223</td>
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<tr>
<td>IDBI Bank -0287104000117616</td>
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<tr>
<td>Kotak Mahindra Bank - 6011155791 FCRA Utilisation</td>
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<td>Kotak Mahindra Bank - 6011155807</td>
<td>722</td>
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<tr>
<td>Kotak Mahindra Bank - 6011291253</td>
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<tr>
<td>SBI - 10408452644 Recurring</td>
<td>50</td>
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<tr>
<td>SBI - 10408452859 Building Fund</td>
<td>19</td>
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<tr>
<td>SBI - 10408453115 Swadhar</td>
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</tr>
<tr>
<td>Corpus Fund received</td>
<td>6,9646</td>
</tr>
<tr>
<td>Sale of Fixed Assets</td>
<td>520</td>
</tr>
<tr>
<td>Donations &amp; Programme Receipts</td>
<td>6,9720</td>
</tr>
<tr>
<td>Interest Income</td>
<td>1,147</td>
</tr>
<tr>
<td>Other Income</td>
<td>249</td>
</tr>
<tr>
<td>Loans &amp; Advances</td>
<td>99</td>
</tr>
</tbody>
</table>

**Total (A) 15,8479**

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* Navajbai Ratan Tata Trust
* Rangoonwala Foundation (I) Trust
* Navajbai Ratan Tata Trust
### Receipts & Payments

#### PARTICULARS | AMOUNT IN THOUSANDS AS ON 31.03.15
--- | ---
**PAYMENTS**
Transit Care Centre (TCC) project expenses | 22644
Rural Mental Health Programme (RMHP) expenses | 11256
Clustered Group Homes (CGH) project expenses | 3575
Urban Mental Health Programme (UMHP) expenses | 6477
Reintegration and Aftercare project expenses | 1552
Shared Housing expenses | 1604
Administrative expenses | 2247
Assets Maintenance | 2617
Fund Raising and Communication | 1723
Research and Training | 1264
Partnership with Pudhu Vaazhvu Project (PVP) | 231
Purchase of Fixed Assets | 21500
Electricity Deposit | 26
Rent Deposit | 317
Fixed Deposit Invested | 10191

#### Closing Balances :-

| Description | Amount |
--- | ---|
Cash-in-hand | 164
Bank Accounts
Axis Bank- 016010100372572 RFIT | 74
Axis Bank- 083010100136983 Recurring | 650
Axis Bank - 909010038293721 FCRA | 3363
ICICI Bank-602701202072 Corpus | 886
ICICI Bank-602701209343 Recurring | 700
ICICI Bank - 602701223975 NRTT Grant A/C | 109
ICICI Bank A/C : 032901000114 | 15
ICICI Grameena Bank : 602705038223 | 29

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#### PARTICULARS | AMOUNT (Rs) AS ON 31.03.15
--- | ---
**PAYMENTS**
IDBI Bank -0287104000117616 | 1262
Kotak Mahendra - 6011581033 NRTT | 60020
Corpus Grant | 2862
Kotak Mahendra Bank - 6011155791 - FCRA | 86
Kotak Mahendra Bank - 6011291253 HCL | 943
SBI - 10408452644 Recurring | 45
SBI 10408452859 Building Fund | 71256
SBI I0408453115- SWADHAR | 27

**TOTAL (B) | 158479**

For THE BANYAN

For G. JOSEPH & CO.

CHARTERED ACCOUNTANTS.

BALRAJ VASUDEVAN

VIJI JOSEPH.

HONORARY TREASURER

PARTNER.

(Membership No : 027151)

PLACE: CHENNAI
### Income & Expenditure

#### Independent Auditor's Report

**REPORT ON THE FINANCIAL STATEMENTS**

We have audited the accompanying financial statements of The Banyan which comprise the Balance Sheet as at March 31, 2015, Receipts and Payments Account and Income and Expenditure Account for the year ended on that date, and a summary of significant accounting policies and other explanatory information.

**MANAGEMENT’S RESPONSIBILITY FOR THE FINANCIAL STATEMENTS**

Management is responsible for the preparation of these financial statements that give a true and fair view of the financial position and financial performance of the organisation in accordance with the Accounting Standards issued by the Institute of Chartered Accountants of India. This responsibility includes the design, implementation and maintenance of internal control relevant to the preparation and presentation of the financial statements that give a true and fair view and are free from material misstatement, whether due to fraud or error.

**AUDITOR’S RESPONSIBILITY**

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with the Standards on Auditing issued by the Institute of Chartered Accountants of India. Those Standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the organisation’s preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of the accounting estimates made by management, as well as evaluating the overall presentation of the financial statements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

---

<table>
<thead>
<tr>
<th>PARTICULARS</th>
<th>AMOUNT IN THOUSANDS AS ON 31.03.14</th>
<th>AMOUNT IN THOUSANDS AS ON 31.03.15</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INCOME</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Donation and Programme Receipts</td>
<td>55934</td>
<td>71479</td>
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<tr>
<td>Interest Income</td>
<td>1618</td>
<td>1229</td>
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<tr>
<td>Sundry Creditors Written Off</td>
<td>290</td>
<td>0</td>
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<tr>
<td>Other Income</td>
<td>136</td>
<td>294</td>
</tr>
<tr>
<td><strong>TOTAL (A)</strong></td>
<td>57978</td>
<td>73003</td>
</tr>
<tr>
<td><strong>EXPENDITURE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transit Care Center (TCC) expenses</td>
<td>23892</td>
<td>23336</td>
</tr>
<tr>
<td>Rural Mental Health Programme (RMHP) expenses</td>
<td>7306</td>
<td>11777</td>
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<tr>
<td>Clustered Group Homes (CGH) project expenses</td>
<td>4504</td>
<td>3620</td>
</tr>
<tr>
<td>Urban Mental Health Programme (UMHP) project expenses</td>
<td>4759</td>
<td>6622</td>
</tr>
<tr>
<td>Reintegration and Aftercare project expenses</td>
<td>1395</td>
<td>1623</td>
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<tr>
<td>Shared Housing expenses</td>
<td>0</td>
<td>1741</td>
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<tr>
<td>Administrative expenses</td>
<td>1861</td>
<td>2378</td>
</tr>
<tr>
<td>Assets Maintenance</td>
<td>7248</td>
<td>8951</td>
</tr>
<tr>
<td>Fund Raising and Communication</td>
<td>1419</td>
<td>1762</td>
</tr>
<tr>
<td>Research and Training</td>
<td>1183</td>
<td>1178</td>
</tr>
<tr>
<td>Partnership with Pudhu Vaazhvu Project (PVP)</td>
<td>186</td>
<td>231</td>
</tr>
<tr>
<td>Loss on sale of Fixed Asset</td>
<td></td>
<td>12</td>
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<td><strong>TOTAL (B)</strong></td>
<td>53753</td>
<td>63231</td>
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<tr>
<td><strong>EXCESS OF INCOME OVER EXPENDITURE</strong></td>
<td></td>
<td></td>
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<tr>
<td>[(A) - (B) = C]</td>
<td>4225</td>
<td>9771</td>
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</table>

For THE BANYAN

For G. JOSEPH & CO.

CHARTERED ACCOUNTANTS

BALRAJ VASUDEVAN
HONORARY TREASURER

VIJI JOSEPH
PARTNER

(Membership No: 027151)

PLACE: CHENNAI
We report that:
1. We have obtained all the information and explanations which to the best of our knowledge and belief were necessary for the purposes of our audit;
2. In our opinion, proper books of accounts have been kept by the organization in so far as it appears from our examination of those books;
3. The balance sheet, income and expenditure and the receipts and payments account referred to in this report are in agreement with the books of accounts.

OPINION

In our opinion and to the best of our information and according to the explanations given to us, the financial statements give the information required by the Act in the manner so required and give a true and fair view in conformity with the accounting principles generally accepted in India:

a) in the case of the Balance Sheet, of the state of affairs of the organisation as at March 31, 2015; and
b) in the case of the Income and Expenditure Account, of the excess of income over expenditure for the year ended on that date.

For G. JOSEPH & CO.
CHARTERED ACCOUNTANTS.

VIJJI JOSEPH.
PARTNER.

(Membership No: 027151)

PLACE: CHENNAI