

ANNUAL REPORT

2023 - 24



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Credits

Words: The Banyan Team

Stories : Preetha Mahadevam

Photographs: Palani Kumar and Ibrahim Mohammad

Layout: Ashok Kumar

Founders' Note



Three decades ago, a woman's plight on the streets propelled us to establish The Banyan—an act of responsiveness born not from careful planning but from the need to be present as allies amidst insurmountable distress. Living alongside those we served allowed us to advance our programs in sync with values of justice, equity and radical empathy. From emergency care to community living, child and adolescent services, and founding of the Banyan Academy of Leadership in Mental Health (BALM), this journey has been shaped by collaborative thought and action with service users and partners, where we introspected what worked and what did not, confronted ethical dilemmas and engaged in sustained actions to improve and adapt based on learnings.

The Banyan and BALM's strategic growth has been informed by intense, profound lessons from their lived experiences of withdrawal, resilience, and renewal on their own terms. We are today a community driven by passion to center those at the margins and challenge the status quo. Our leadership, board, service users, peers, collaborators, and friends advance our vision of an inclusive, just and humane world that promotes capabilities and participation among persons living with psychosocial distress. This year has borne testimony to this steadfast conviction.

The Emergency Care and Recovery Centres (ECRCs) for homeless people with mental health conditions and the Home Again approach for those requiring long-term care have expanded across 10 locations in

India, Sri Lanka and Bangladesh through direct and partner-operated initiatives, emphasising social health and community participation, thanks to Grand Challenges Canada (GCC), Azim Premji Foundation (APF) and Rural India Supporting Trust (RIST), commitment to the most distressed and The Banyan. NALAM, the community mental program, that offers well-being oriented services through grassroots mobilisers, is set to expand to Madhya Pradesh and Odisha in collaboration with partners, in addition to the continued implementation in Tamil Nadu and Maharashtra with support from the Infosys Foundation.

While services expand across geographies, finding allied partners for supporting and implementing the models, advocacy of the programmes and our mission remains a steadfast commitment. This year, with the support of Grand Challenges Canada, The Banyan embarks on research specific to Home Again to better understand the economics of the model, and exploring stakeholders in North India for programme uptake. Working with the government stakeholders is also emphasised across our programmes, with the renewal of our MoU with the Government of Kerala to support exit pathways for long-stay clients from the state-run Mental Health Centres, as well as engaging with the Government of Maharashtra in supporting our Home Again residents in Ratnagiri. Our engagement with the National Health Mission continues with renewed vigor with the commencement of Phase II of the ECRC replication programme, with six new district ECRCs being launched over the next five years.



In parallel, BALM's academic initiatives and partnerships have supported the development of cadres of professionals and change agents for underserved communities through Master's programs, diplomas, and short courses, drawing on findings based on research and experiential learning emerging from The Banyan's work. Education remains the cornerstone of our efforts, and we are excited to announce the launch of the Master of Social Work in Mental Health program in 2024, developed in collaboration with Madras School of Social Work (MSSW) and TVS Sundram Fasteners Limited. This curriculum equips passionate individuals with the knowledge and

skills to address complex challenges in the mental health sector, fostering a holistic, recovery-oriented approach to care.

We are grateful to our programme teams, donors and volunteers for their unwavering support in pursuit of our mission for the past decade. We thank our service users for letting us be a part of their lives and for their wisdom. Your generosity has reinforced our hope that collective visioning, effort, and intent can shift the status quo towards a future of healing and inclusion for all.

With gratitude,

Dr. Vandana Gopikumar and Vaishnavi Jayakumar

Senior Management Team's Note

The intersection of homelessness and mental illness reveals profound layers of exclusion and marginalization within society. Individuals facing these dual challenges encounter a pervasive stigma surrounding mental health that not only compounds their difficulties but also undermines efforts to provide timely and effective public health interventions.

Moreover, the prevailing approaches to mental health care often prioritize control and invisibility over democratic and participatory engagement. Participatory methods, which could empower affected individuals and communities, are frequently sidelined unless they conform to established norms and narratives.

This limited imagination in service provision further restricts the allocation of resources, typically favoring medicalized treatments at the expense of comprehensive support systems. This narrow focus overlooks the interconnected nature of health, social welfare, and citizenship needs, leaving many without essential services that could address their holistic well-being.

Compounding these challenges are systemic barriers between health and social welfare sectors, which hinder collaboration and prevent the development of integrated support frameworks. This fragmentation perpetuates gaps in care, leaving individuals with mental illness and homelessness navigating complex bureaucracies that often exacerbate their marginalization.

Despite these entrenched barriers, there are numerous micro-innovations emerging from communities and grassroots organizations that offer practical, context-sensitive solutions to the everyday challenges faced by hundreds of thousands of mentally ill individuals living in poverty. Inclusive dialogues need to be foregrounded that challenge stigma, prioritize participatory approaches, and expand the imagination of what comprehensive mental health care is.

By embracing innovation, community engagement, and systemic reform, there exists a pathway towards more equitable and effective responses to the profound challenges of homelessness and mental illness in society. By challenging stigma and fostering community engagement, we strive to create a future where everyone can live a fulfilling life aligned with our uniqueness, color and quirks.

The senior management team sincerely thanks our founders, directors, colleagues, friends, and the individuals we serve for your unwavering support in our mission. As we embark on our 31st year, we cherish the trust you have placed in us. We humbly invite you to continue engaging with our work, holding us to the highest standards and encouraging us towards transformative change, and a diverse, interesting and inclusive society.

Dr. KV Kishore Kumar, Swapna Krishnakumar, Dr. Archana Padmakar, Dr. Preetha Krishnadas, Vanitha Rajesh, Mrinalini Ravi, Murugan Krishnan, Ashok Kumar, Roy Defeewa



150 million Indians live with a mental health condition, of whom only 17% receive the care they need. 3 in 10 people with serious mental health conditions have been homeless at least once in their lifetime. In the absence of care and necessary support, serious mental conditions decimate what little is left of resources, especially among low-income families, with people drifting into further poverty and homelessness. Loss of close relationships due to deaths and other disruptions, familial conflict in the background of structural factors such as caste and gender, push people with serious mental health conditions into a relentless spiral of disenfranchisement. Caught between systems of care that privilege medicalised options and neglect concomitant socio-economic realities and solutions that seek to remove them from public view, very often homeless people with mental health conditions find themselves institutionalised long-term in psychiatric hospitals, beggars' homes or even jails.

The Banyan seeks to substantively alter this scenario through responsive, person-centered systems of care that address the entire continuum of needs, from early intervention to sustainable community re-entry and put people on pathways to living diverse lives aligned with their aspirations and choices.



Why we exist?



“I am safe here”

- service user, ECRC




Our approach

The Banyan's continuum of care has three main approaches:

Emergency Care and Recovery Centres (ECRC): A coordinated, collaborative, and multidisciplinary care system that offers homeless people with mental health conditions the opportunity to determine their pathways back into the community. This is achieved through health support, stable and meaningful interpersonal connections, work, housing, and reintegration with families, whether of origin or formed by choice.

In 2020 The Banyan and National Health Mission (NHM), Government of Tamil Nadu, with the support of Azim Premji Foundation, embarked on a collaborative programme to replicate ECRCs across districts in Tamil Nadu – in an effort that acknowledges the need for proximal acute care facilities for homeless populations. These district-level ECRCs are implemented by locally identified civil society organisations (CSOs) in tandem with the district general hospital where they are located. Each stakeholder plays a crucial role in the establishment, operation, and monitoring of the ECRCs.

The Banyan currently operates four ECRCs directly across Tamil Nadu and Kerala, three are run collaboratively with partners in Tamil Nadu and Karnataka, and eight district-level ECRCs that are replicated in partnership with National Health Mission and Azim Premji Foundation with local civil society organisations in Tamil Nadu.



ECRC Location	Implementing Organisation/Partner	Bed capacity	Total admissions till March 2024
Chennai	The Banyan	125	2,761
Chengalpattu	The Banyan	75	182
Ponnani	The Banyan	15	99
Gunaseelam	Prasanna Venkatachalapathy Temple Trust	21	87
Bangalore	Aaladamara Foundation	25	101
Thiruvallur	Menadora Foundation	50	114
Sivagangai	Vazhai Foundation	20	125
Erode	Atchayam Trust	30	118
Thanjavur	SHED India	20	146
Tirunelveli	Real Social Organisation of Youth Academy	20	81
Thoothukudi	Real Social Organisation of Youth Academy	20	88
Madurai	M.S Chellamuthu Trust and Research Foundation	30	88
Nilgiris	Nilgiris Adivasi Welfare Trust	20	119
Krishnagiri	Rural Development Council	Upcoming	

“I came to the OP Clinic with symptoms of depression. My family, and even I, didn’t have much hope for change...But everyone I met at the clinic continuously encouraged me, even as I lost hope many times – and look at me now! I am working and earning a living”

– service user, NALAM



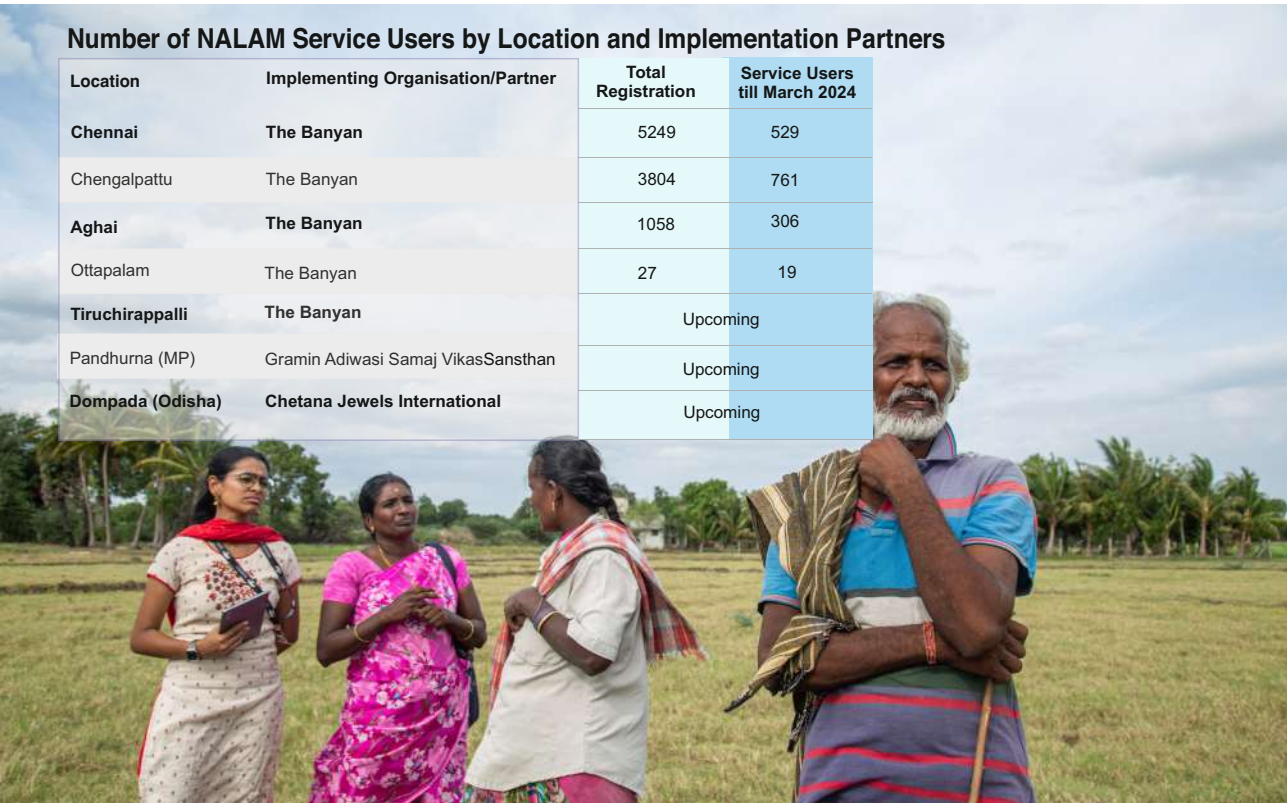
Centre for Mental Health and Social Sustainability (CMHSS) operationalises NALAM (meaning 'well-being' in Tamil), a community mental health approach that combines clinical interventions with social entitlements and local village or urban community-level alliances. This approach utilises grassroots action through locally recruited and trained mobilisers and multidisciplinary outpatient teams at proximal locations, such as Primary Health Centres to deliver a diverse range of services from identification and early intervention, access to wide array of social care options, lay counselling and support groups for those facing distress, home-based care and follow up, and learning centres anchored interventions for children and parents.

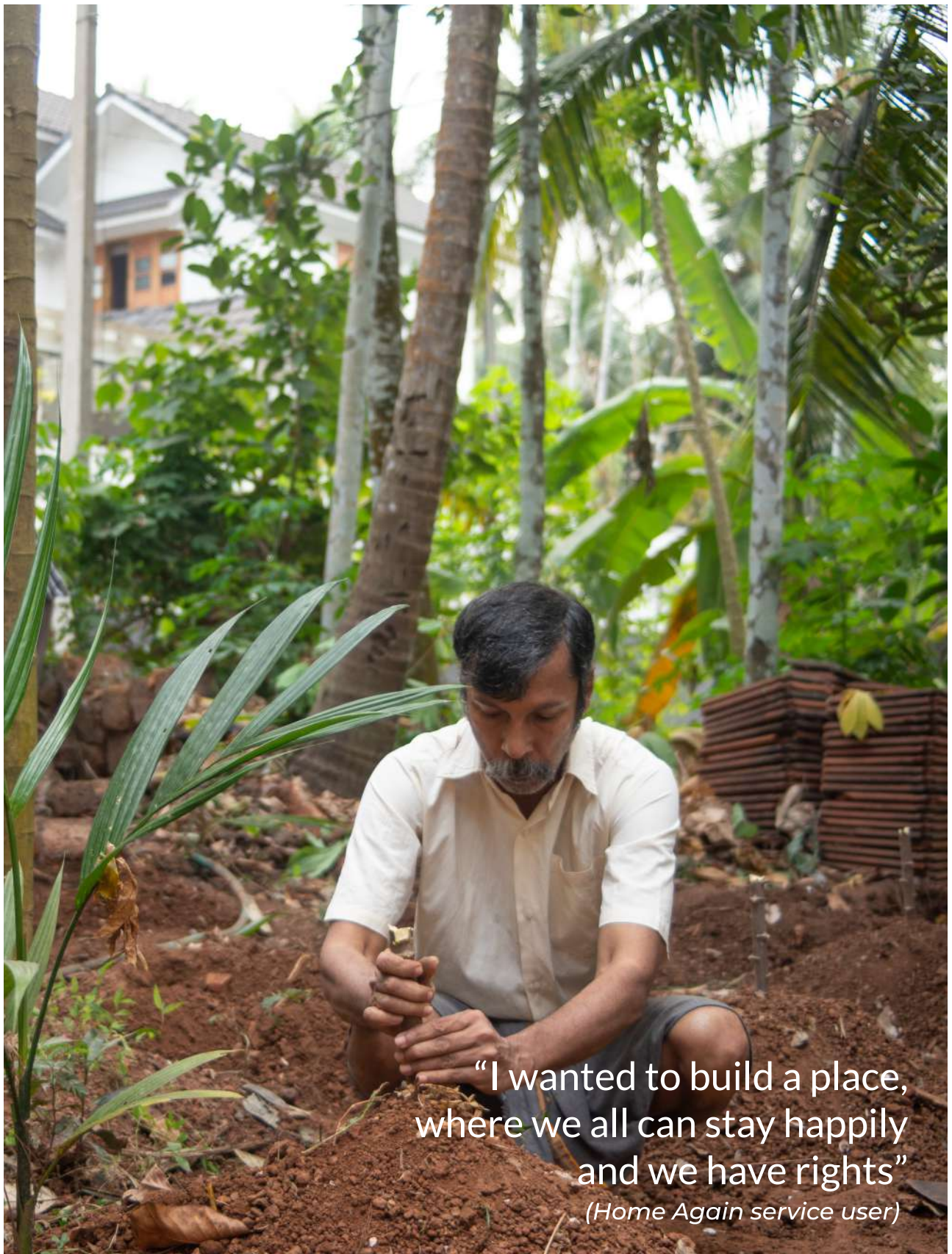
CMHSS facilitates access to citizenship rights, welfare schemes and livelihoods for service users across inpatient settings as well. The Centre leverages grassroots action and partnerships with diverse stakeholders across India to offer continued care and homelessness prevention supports for those who move back to homes and communities from inpatient settings. In January 2024 the NALAM programme received the support of Infosys Foundation to strengthen and scale up across six sites in Tamil Nadu, Maharashtra, Odisha and Madhya Pradesh where the locations are a mixed group of urban, peri-urban and rural geographies, focusing on reaching out over four years to over 20,000 persons from low-income settings through access to outpatient mental healthcare, social care and mental health related awareness.

With the support of Cholayil, Cognizant Foundation and individual supporters, NALAM is currently operational in Chengalpattu, Aghai and Chennai delivering aftercare services for discharged clients across the country. Starting from January 2024, with the support of Infosys Foundation, NALAM is being strengthened and scaled up across six sites in four states, out of which four are directly implemented by The Banyan, and two are being run in partnership with local CSOs.

Number of NALAM Service Users by Location and Implementation Partners

Location	Implementing Organisation/Partner	Total Registration	Service Users till March 2024
Chennai	The Banyan	5249	529
Chengalpattu	The Banyan	3804	761
Aghai	The Banyan	1058	306
Ottapalam	The Banyan	27	19
Tiruchirappalli	The Banyan	Upcoming	
Pandhurna (MP)	Gramin Adiwasi Samaj VikasSansthan	Upcoming	
Dompada (Odisha)	Chetana Jewels International	Upcoming	





“I wanted to build a place,
where we all can stay happily
and we have rights”

(Home Again service user)

Centre for Mental Health and Inclusive Development (CMHID) operationalises Home Again (HA), a housing approach with supportive services for people with mental health conditions experiencing long-term care needs. In this approach, people are supported to rent homes in urban or rural neighbourhoods and live in groups of 4-5 women with on-site assistance for various needs. These needs range from self-care, employment, and accessing social and political rights, such as voting, to fostering relationships in the neighbourhood. Home Again has been recognised as a model of care in the Lancet Commission on Global Mental Health and Sustainable Development, as well as by the World Health Organisation (WHO).

In 2024, The Banyan is working towards enhancing advocacy of the Home Again programme through research and stakeholder engagement, especially in the North of India, to strengthen the services offered, include adaptations and collaborations such as hostel-like co-living to cater to differing preferences of service users, with the overall aim to address the needs of those who continue to remain in psychiatric facilities for over a year or more.

With the support of Rural India Supporting Trust, Grand Challenges Canada and Bajaj Finserv, The Banyan has been able to sustain the Home Again programme in directly run sites of Tamil Nadu, Kerala and Maharashtra, as well as replicate the programme across eight other Indian states – in partnership with local NGOs – and to low-and-middle-income-countries of Sri Lanka and Bangladesh.

Number of Home Again Service Users by Location and Implementation Partners

Location	Implementing Organisation/Partner	Homes	Service Users as on March 2024	Location	Implementing Organisation/Partner	Homes	Service Users as on March 2024
Chennai	The Banyan	13	56	Pune	Schizophrenia Awareness Association	1	8
Chengalpattu	The Banyan	14	60	Vishakapatnam	The Banyan	3	13
Kovandakurichi	The Banyan	10	51	Mehsana	The Altruist	3	14
Gunaseelam	Prasanna Venkatachalapathy Temple Trust	5	20	Mysore	Green Dot Trust	6	26
Kanchipuram	Rural Development Council	8	37	Dompada	Chetana Jewels International	3	14
Villupuram	Menadora Foundation	5	24	Indore	Gramin Adiwasi Samaj Vikas Sansthan	4	22
Tirunelveli	Real Social Organisation of Youth Academy	8	39	Assam	Ashadeep	5	25
Kerala	The Banyan	19	88	Nagaland	Ashadeep	3	13
Kerala	Mehac	4	16	Jaffna	Mental Health Society of Jaffna	4	22
Kerala	Mariasadanam	4	18	Bangladesh	Sajida Foundation	7	40
Ratnagiri	The Banyan	5	32		TOTAL	134	638

Collaboratively-Driven Care

Providing public access to comprehensive mental healthcare remains a crucial piece of the puzzle for addressing the needs of homeless persons living with mental illness. Moreover, this access needs to be decentralised and be provided for at nodal locations across geographies that will allow for a wider outreach and impact in servicing these needs. The public-private partnership between The Banyan, National Health Mission and Azim Premji Foundation

towards establishing ECRCs across the districts of Tamil Nadu is an important step towards providing this care.

In 2021 When Lurthmary found herself at the Erode ECRC, one among eight collaboratively run district-level ECRCs in Tamil Nadu, located within the Erode district government hospital, she began to put together the pieces of her shattered life from thirty years ago -



Finding a way back Home

When Lurthmary first developed symptoms of a mental health condition, her family sought help at a neighbourhood Dargah, a sacred place of healing. For six months, Lurthmary seemed to improve, but the symptoms of her mental health condition lingered, resurfacing in waves. In 1994, she experienced her first bout of homelessness, wandering the streets for six months before being found and brought back to the safety of her home. For two years, she remained there, receiving multiple treatments.

But the years that followed were punctured by pain and loss. In 1995, Lurthmary's eldest daughter fell victim to a brutal rape and murder, an unspeakable tragedy that shattered what little remained of Lurthmary's precarious resolve. She wandered away once more, her mind adrift in a sea of disconnected thoughts and memories. Her family traced her and brought her home, but in 2009, after the marriage of her youngest daughter, Lurthmary disappeared again, leaving her loved ones to suffer in her absence.

Lurthmary lived on the streets for decades before she received stable and consistent care at the Erode ECRC. She had several physical health issues, coupled with her mental illness. For

specialised care, she was eventually transferred to the ECRC in Kovalam (Chengalpattu district) where she slowly but surely began to improve.

It was during a conversation with a mental health professional that a spark of recognition ignited in Lurthmary's eyes. The names she uttered, the details she shared, were like long-lost puzzle pieces, pointing to a place not far from her hometown of Chengalpattu.

Saraswati, a NALAM mobiliser, took up the challenge of retracing her lost family. She navigated the winding streets of Chengalpattu, searching tirelessly for Lurthmary's family. And then, she found it—a home with a familiar address.

Lurthmary's eventual reintegration with her family of origin was an emotional moment. While her family had persevered in searching for her, their scope and resources could only extend that far. Lurthmary comes within the aftercare programme of The Banyan to ensure that her care is provided for even as she returned to live with her family*.

With a sustained node-to-node care network that is being built across district-level ECRCs and local CSOs, people like Lurthmary and their families, have an increased chance at being reintegrated.

**At the time of writing, Lurthmary is no longer with us. She passed away recently, with her family surrounding her. Her family is grateful that they were reunited with Lurthmary and got to spend time with her before she passed.*



Community-Driven Care

Social care and mental healthcare services offered in the NALAM programme are often curated outside of conventional mental health care architectures to suit the specific need of a family/community member at risk or living with mental illness; or a larger community need that is impacting their mental health overall.

Water Ambulance

During focus group discussions with community members and panchayat representatives in Aghai Village, Maharashtra, the NALAM mobilisers uncovered significant challenges faced by residents of Borala and Rajpuri villages. The primary issue highlighted was the lack of a reliable communication system, exacerbated by the geographical isolation of these two villages, which are separated from the mainland by Tansa Lake.

This geographical barrier severely limits accessibility to essential services such as primary healthcare facilities, The Banyan outpatient clinics, markets, panchayat offices, and schools, all available on the mainland of Aghai Village. Villagers have had to undertake arduous treks of up to 15 kms during the rainy season, carrying essential provisions and supplies to sustain themselves for four months at a time. Medical emergencies have been particularly daunting, with patients being transported on makeshift stretchers or by a traditional mode of transport known as the 'Tarafa' – a handmade boat constructed with PVC pipes. Mental health concerns

have further compounded the challenges faced by the community.

To address this pressing issue, the community members and NALAM mobilisers arrived at a temporary solution – to establish a rowboat service for the village members cut off from mainland Aghai.

It is significant to note that the community members requested for a rowboat (and not a motorboat, which would've been faster) owing to the biodiversity of the region and Tansa Lake, where, to curb pollution, motorboats are not allowed. The community members deliberated multiple options for purchasing a boat – including constructing a new one from scratch – but eventually settled with a retrofitted boat that was wider than longer – to accommodate more persons at one go. This exercise took several months to complete, and its inauguration was undertaken with proud community members, members of the panchayat and NALAM mobilisers.

The boat has been a catalyst for positive change, offering not only a means of transportation but also extending much-needed psychological assistance to the villagers.



Building Trust – One step at a time

"When I came to the hospital, I thought you would judge me if I opened up about my illness," Shanti confided to the social worker after three such visits. "But you came to my home, sat with me, and walked with me, which made me feel comfortable and happy, like I'm not just a patient."

- Shanti, service user, NALAM

Her words laid bare the failings of the wide system that had made her feel reduced to a problem, a sentiment echoed in her brother's dismissal of her as "mental" without any attempt at understanding. At 16, Shanti lost her parents within the same year - her mother to illness and her father in an accident. This devastating double loss left her grappling with immense grief and the onset of depressive symptoms that eventually led to a diagnosis. Shanti's daily life, once filled with the promise of education and growth, ground to a halt. She sought refuge in the home she shared with her grandmother and

brother. Yet, solace proved elusive. The generational divide left her grandmother ill-equipped to understand Shanti's needs, while her brother, consumed by his own studies and part-time job, could offer little support.

When Shanti first registered for outpatient treatment, she faced numerous challenges in opening up. The social worker assigned to Shanti's case recognised the need for an unconventional approach. In a bid to break through the barriers, they began conducting home visits, accompanying Shanti on walks to quiet spots where conversation could flow more freely. Away from the clinical setting of the hospital, in the familiarity of her own surroundings, Shanti began to find her voice.

The patience and creativity of the social worker in building rapport through home visits played a crucial role in Shanti's progress. By meeting her where she was, literally and figuratively, the social worker fostered trust and created a space where Shanti could engage with her clinical care and now looks ahead to resuming her education.

Shanti's story highlights how home visits can be an effective approach in mental health treatment, particularly when clients face barriers to seeking help in clinical settings. By meeting clients where they are, building trust, and showing empathy, practitioners can pave the way for successful engagement in the recovery process.



Value-Driven Care

The values that drive the Home Again programme form the bedrock of its implementation across geographies – celebrating diversity, establishing trust, respecting choice, challenging norms that don't serve the purpose, accepting pain along with the happiness, and treasuring interdependence over 'independence'.

With the replication of the programme across the country, in partnership with CSOs with regional focus, the major outcomes of this programme include, predominantly, a reduction in the recurrence of symptoms of residents and improved health, an increase in their sense of agency and freedom, re-gaining economic freedom, and a paradigm shift in the mindset of Home Again staff and the community-at-large towards mental health. In 2023, the Home Again programme was also formally adopted by the Tamil Nadu government to be initiated in five districts.

When life gives you lemons, make chai!

Jayashree is very entrepreneurial; operates a food cart in Ratnagiri. You can see her happily interacting with customers, embracing her newfound independence and skills she has acquired during her time at Home Again.

Jayshree's resilience and determination have transformed her life, empowering her to lead the life she has always dreamed of. But that is today. It was not always like this.

Jayshree's life was marked by challenges from an early age. She lost her father, a peon in the National Cadet Core (NCC) office to tuberculosis when she was young. Despite this tragic loss, Jayshree stepped into her father's shoes and took up his position at the NCC office to support herself and her mother. After three years of dedicated service, she was promoted to be a clerk. The happiness did not last long.

Her mother developed blood cancer in the 1980s, and Jayshree became her sole caregiver, sacrificing the prospect of marriage despite receiving proposals. After her mother's passing, Jayshree lived alone, dedicating herself to her work at the NCC office for 18 years. In 2016, a high fever landed her in the hospital for six to seven months, and her life took an unexpected turn. A cousin admitted her to the Regional Mental Hospital in Ratnagiri in 2017, a decision that would shape her future. Abandoned by her brother, and with limited support from her cousin, Jayshree found herself in a vulnerable position. However, her resilience and determination shone through as she was brought to Ratnagiri Home Again from the Regional Mental Hospital in October 2019.

Initially timid and reserved, Jayshree gradually gained confidence and trust during her stay at Home Again. She learned to administer medications, maintain registers, and actively

participate in meetings and day care activities. Her newfound skills and independence proved useful when she became an integral part of a supported housing program, handling petty cash, household duties, and medication for other clients. Jayshree's unwavering spirit and drive for self-sufficiency and service gave her enormous confidence.

Last year, with the support of the RMH team, she underwent a fitness test, hoping to return to her former position at the NCC office. Jayshree had been eagerly anticipating her fitness test appointment with the NCC at age 56; she was hopeful to prove her capabilities and continue her clerk position before retirement. However, she remained silent and was unable to articulate even a single response to the questions asked in the labor court. Though heartbroken, she nurtured her dream to be independent.

Jayshree's journey took an exciting turn when Home Again launched its first social enterprise, a food cart near the Infield office in Ratnagiri. Jayshree's enthusiasm and ideas played a crucial role in the planning process, and she embraced the opportunity to work at the food cart, even obtaining a food license in her name - a story of immense hope and unstoppable. She recently said this of her life - "Throughout my journey, I have foregone many things and acquired a wealth of knowledge. However, I now understand that self-reliance is inherent to who I am, and I can strive towards that aim regardless of circumstances".

SUPPORTERS

Alpha Educational Society

Angappan Vijayalakshmi

Ashwin Thomas

Azim Premji Foundation

Bajaj Finance Limited

Bharat Petroleum Corporation Ltd

Breadsticks Foundation

C.H.Robinson Worldwide Freight India Private Ltd

Capco Technologies Private Limited

Chennai Mission Trust

Cheralathan Associates

Cholayil Trust

Cognizant Foundation

District Rural Development Agency
Thiruvallur District

Dr. Gandhimathi

Dr. Jeni Pillai

Dr. K.V. Kishore Kumar

Estate of Alison Earls

Friends of The Banyan USA

Give Foundation

Grand Challenges Canada

Greater Chennai Corporation

HCL Foundation

Infosys Foundation

Integrate Marketing Technologies
India Private Limited

IRIS KPO Resourcing India Pvt Ltd

J. Abid Ali

K. Krishnan

MA PL Ramanathan Chettiar Trust

M. Mahadevan

National Philanthropic Trust

N George Educational Trust

Nilpeter India Private Limited

Online Giving Foundation (india)

PVR Limited

Ralia Abid

Raunaq Umesh Rao

Rotork Controls (India) Pvt. Ltd

Rural India Supporting Trust

Sandeep Talwar

Sneham Social Welfare Foundation

Sujatha Ramesh

Sundar Shankar Charitable Trust

Swadhar Greh
Ministry of Women And Child Development

The Sathyanarayana Charitable Trust

The UK Online Giving Foundation

VS&B Domestic Container Solutions Pvt. Ltd

Zilla Parishad, Ratnagiri

GOVERNANCE

Strengthening our internal services is important for maintaining checks and balances within the organisation, ensuring a feedback loop between all teams working on and off the ground towards our programmes, and adhering to all statutory compliances to ensure transparency and accountability. This is achieved through internal and external audits, regular programmatic reviews as well as HR, Admin and Financial management reviews including updating of policies (like POSH, procurement, vendor on-boarding etc.), creating new policies when the need is identified, and informing all employees on policy changes and decisions.

Annual board meetings are held four times a year

where updates on all our work are presented to the board members and advice sought on challenging tasks, and successes celebrated.

In addition, Executive Committee meetings are held on a monthly basis for all governance related matters including initiation of new projects and approvals for budgetary allocations and procurements, HR management, and programme updates.

Pulse meetings and social audit reviews are organised on a quarterly basis. Pulse meetings are an internal programmatic huddle for sharing, ideation, and discussing the emergence of important research and addressing training needs; while social audit reviews are in-person visits to programme locations to monitor and evaluate the effectiveness of the programme and address course corrections wherever required.

Board of Trustees

*Dr. Vandana Gopikumar – Founder Trustee

Ms. Vaishnavi Jayakumar – Founder Trustee

Mr. A. Sankara Narayanan – Chairperson

Mr. Balraj Vasudevan [MD, Autopumps & Bearing Co. Pvt. Ltd.] – Treasurer

*Mr. Senthil Kumar [Director, Qube Cinema Technologies Pvt. Ltd.] – Trustee

Mr. Amarnath Reddy [MD, Shoetek Agencies] – Trustee

Mr. Bijoy Paulose [Chairman, VSB Containers] – Trustee

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Mr. V.S. Pradeep, MD, Cholleyil Group - Trustee

Ms. Arathi Krishna, Managing Director, Sundram Fasteners Ltd - Trustee

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Mr. Vijay Anand – Trustee

Ms. Revathy Asha Kelunni - Trustee

Ms. Sowmya Rajan, Founder & CEO, Waterfield Advisors - Trustee

Retd. Justice Prabha Sridevan - Trustee

** Note that Dr. Vandana Gopikumar is married to Mr Senthil Kumar. Both were independent members prior to their marriage.*

Salary Details

Gross salary plus benefits (INR per month)	Men	Women	Total
10,000-25,000	75	188	263
25,000-50,000	11	36	47
50,000-1,00,000	7	8	15
1,00,000>	2	4	6
Total	95	236	331

Total monthly payments made to consultants (in Rs)	Number of consultants
10,000 - 25,000	37
25,000 - 50,000	7
50,000 - 1,00,000	7
1,00,000>	1
Total	52

Travel Details

Total cost of National travel by Board members/staff/volunteers on behalf the organisation for 2023 - 24 is **INR 45,03,471/-**

Total cost of International travel by Board members/staff/volunteers on behalf the organisation for 2023 - 24 is **INR NIL**

Board of Trustees Meeting 2023-24

Date	Attendance
10 th June 2023	7
9 th September 2023	12
9 th December 2023	7
9 th March 2024	6

Registrations

Permanent Account Number(PAN)/GIR No: AAATT0468K

Registered u/s 12A, Application No: 291/93-93 dated 8/12/1993

FCRA Registration No: 075900624, dated April 1998

Darpan Unique ID :TN/2017/01 16803 | CSR Registration No: CSR00001155

Auditor

Mr. Viji Joseph
G Joseph & Co,
Chennai – 600 031

Internal Auditor

T R Chadha & Co LLP
Chennai 600 002

How can you help?

Every penny towards our work counts. The Banyan's work since 1993 is built on the foundation of 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:

Donation Options	Details
Meals on Time Initiative	INR 700,000 Covers meals for 100 clients for 52 days in a year, one day per week
Special Occasion Scheme All meals in a day Breakfast Lunch or Dinner	INR 13,500 INR 3,000 INR 5,500/INR 13,500 (with a meat dish of choice) Fresh meals cooked and served in our premises for 100 residents to celebrate or in memory of an occasion.
Monthly Membership Scheme	Starting from INR 1,000 onwards to any amount that you choose credited monthly to the cause of The Banyan for 12 months
Stay Well Incentive	INR 18,000 per client Covers an incentive equivalent to a disability allowance for one client for a year
Support Medicine for a Client	INR 6000 Covers medicines of one client for a year
Stay in School Scheme	INR 20,000 to INR 50,000 covers annual tuition fees for school/higher education of one child or young adult living with parental mental illness
No Strings Attached	Any amount of your choice

Gently used clothes, accessories and household articles

FCRA Money Transfer Details

For FCRA Name & Address of the Beneficiary	The Banyan
Account No.	40121845535
Type of A/c (CA / SB)	Saving Bank
Name&Address of Bank Branch	State Bank of India FCRA Cell, 4th Floor Sansad Marg, New Delhi 110 001
Branch Name & CodeCode :	New Delhi Main Branch, 00691
SWIFT No.	SBININBB104
IFSC Code of the Bank Branch for RTGS mode	SBIN0000691
IFSC Code of the Bank Branch for NEFT mode	SBIN0000691

NON – FCRA Money Transfer Details

Name and address of the Beneficiary	The Banyan
Account Number of Beneficiary	0287104000117616
Account Classification (CA/CC/SB) as per Cheque leaf	Saving Bank IDBI Bank
Name and address of the Bank Branch	No.80,New Avadi Road Opp to Lifeline Hospital, Kilpauk, Chennai - 600010,Tamil Nadu
Branch Name/Code	Kilpauk Branch, Chennai (TN) Code:287
The 9 Dight 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 ashok.kumar@thebanyan.org

Consolidated Balance Sheet for the year ended March,2024

LIABILITIES	As on March 31,2023	Non-FCRA	FCRA	APF	GCC	TOTAL
General Fund	6,05,69,984	5,07,67,735	9,87,72,512	3,65,63,229	45,02,753	19,06,06,230
Corpus Fund - APF	1,00,00,00,001	-	-	1,00,00,00,001		1,00,00,00,001
Corpus Fund - RIST	14,89,23,992	-	14,89,23,992			14,89,23,992
Corpus Fund - NPT		-	30,00,00,000			30,00,00,000
Corpus Fund - NRTT	6,45,34,981	6,50,33,571	-			6,50,33,571
Corpus Fund - Bajaj	6,00,00,000	6,00,00,000	-			6,00,00,000
Corpus Fund - Others	1,92,31,489	1,92,30,540	949			1,92,31,488
Corpus Fund - Endowment Fund	15,00,000	15,00,000	-			15,00,000
TOTAL	1,35,47,60,446	19,65,31,846	54,76,97,453	1,03,65,63,230	45,02,753	1,78,52,95,282
ASSETS						
Fixed Assets	5,75,25,324	4,56,92,104	1,13,08,568	12,86,273	9,37,499	5,92,24,443
CURRENT ASSETS , LOANS & ADVANCES						
Current Assets	1,03,21,33,777	59,28,303	1,24,92,639	87,04,964	10,97,000	2,82,22,906
Balance in Banks & Cash-in-hand	30,57,54,750	17,66,56,757	52,69,92,115	1,02,80,32,000	26,30,948	1,73,43,11,819
Sub Total	1,33,78,88,527	18,25,85,060	53,94,84,754	1,03,67,36,964	37,27,948	1,76,25,34,726
Less : Current Liabilities	4,06,53,405	3,17,45,317	30,95,869	14,60,006	1,62,694	3,64,63,887
Net Current Assets [(A) - (B)]	1,29,72,35,122	15,08,39,742	53,63,88,885	1,03,52,76,957	35,65,254	1,72,60,70,839
TOTAL	1,35,47,60,446	19,65,31,846	54,76,97,453	1,03,65,63,230	45,02,753	1,78,52,95,282

Consolidated Receipts & Payments statement for the year ended March,2024

RECEIPTS	Non-FCRA	FCRA	APF	GCC	TOTAL
Opening Balances :-			-	-	
Cash-in-hand	67,736	1,605			69,341
Bank Accounts					
Axis Bank- 083010100136983 Rec	11,25,124				11,25,124
Axis CA 923020011940669			1		1
Axis SB 923010010763594			8,05,304		8,05,304
HDFC Bank Ltd - 50100092343049	49,921				49,921
ICICI Bank-602701202072 Corpus	40,874				40,874
ICICI Bank-602701209343 Rec	99,286				99,286
ICICI Bank A/C : 032901000114	17,196				17,196
ICICI Grameena Bank : 602705038223	29,349				29,349
IDBI Bank -0287104000117616	31,90,591				31,90,591
IDBI Bank - 0287104000256308 - APPI			21,97,956		21,97,956
IDFC-10099749880			4,10,651		4,10,651
IDFC - 10104855831			1,57,12,689		1,57,12,689
Kotak Bank-A/C:-8413114703- Bajaj	42,788				42,788
Kotak Mahindra - 6011581033 NRTT Corpus Grant	4,04,719				4,04,719
Kotak Mahindra Bank - 6011155807	(75,15,280)				(75,15,280)
Kotak Mahindra Bank - 6011291253 HCL	17,177				17,177
RBL Bank - 300040004004 (CTS)	33,234				33,234
RBL Bank - 400040004004	1,63,167				1,63,167

RECEIPTS	Non-FCRA	FCRA	APF	GCC	TOTAL
RBL Bank - 309013087711			6,67,752		6,67,752
SBI - 10408452644 Rec	40,858				40,858
SBI 10408452859 Building Fund	25,277				25,277
SBI - 10408453115- SWADHAR	1,07,816				1,07,816
FCRA					
SBI Bank - 40121845535 - FCRA Ac		43,10,135			43,10,135
RBL - 309015735955		43,79,059			43,79,059
RBL -309015735885		69,37,020			69,37,020
Kotak Mahindra Bank - 8411876887		39,52,846			39,52,846
Kotak Mahindra Bank (F C) - 6011155791 - GCC				46,26,394	46,26,394
Donation and Programme Receipts (Non - FCRA)	10,63,17,929		2,47,88,364		13,11,06,293
Foreign Contribution Received		9,26,40,528		1,44,36,011	10,70,76,539
Corpus fund received	4,98,590	30,00,00,000			30,04,98,590
Interest Income	1,04,91,808	2,64,77,777	7,63,39,253	85,412	11,33,94,250
Other Income	2,52,216				2,52,216
Rent Deposits Recovered		52,500		35,000	87,500
Programme Advances				53,45,019	53,45,019
Sundry Creditors	60,730				60,730
Outstanding liabilities	54,21,868				54,21,868
Deposits	74,786				74,786
TOTAL	12,10,57,760	43,87,51,469	12,09,21,970	2,45,27,836	70,52,59,035

PAYMENTS	Non-FCRA	FCRA	APF	GCC	TOTAL
Emergency Care & Recovery Centre- Mogapair	85,57,223	13,16,406	2,20,83,542		3,19,57,171
Emergency Care & Recovery Centre- Chengalpattu	9,97,454	8,71,969	1,48,30,935		1,67,00,358
Emergency Care & Recovery Centre- Chennai		3,30,713	53,21,295		56,52,008
Emergency Care & Recovery Centre- Kerala	2,57,207	1,56,750	29,38,378		33,52,335
Emergency Care & Recovery Centre- Bangalore	13,323		36,33,625		36,46,948
Emergency Care & Recovery Centre- Thiruvallur	40,09,595		1,95,255		42,04,850
Emergency Care & Recovery Centre- Gunasheelam			7,22,548		7,22,548
Emergency Care & Recovery Centre- Others		4,10,720	43,905		4,54,625
Emergency Care & Recovery Centre- Replication Sites	3,27,165		79,01,873		82,29,038
Centre for Social Needs and Livelihoods - Rural	43,69,457				43,69,457
Centre for Social Needs and Livelihoods - Urban	52,67,971				52,67,971
Centre for Social Needs and Livelihoods - Maharashtra	43,75,796				43,75,796
Centre for Social Needs and Livelihoods - Kerala	3,31,432				3,31,432
Centre for Social Needs and Livelihoods - (NALAM)	6,32,006	38,44,756			44,76,762
Centre for Social Needs and Livelihoods - Trichy	2,78,079				2,78,079
CMHSS Chengalpattu			1,96,266		1,96,266
CMHSS Trichy			95,800		95,800
Home Again - Chengalpattu	5,33,582	83,37,749			88,71,331
Home Again - Chennai	1,20,907	68,83,598			70,04,505
Home Again - Trichy	7,72,985	73,04,870			80,77,855

PAYMENTS	Non-FCRA	FCRA	APF	GCC	TOTAL
Home Again - Kerala	5,54,154	1,16,64,478			1,22,18,632
Home Again - Thirunalveli & Villupuram	4,69,065	17,90,667	47,32,125		69,91,857
Home Again - Maharashtra	88,42,595		57,400		88,99,995
Home Again - Gujarat, Karnataka, A P, Etc	1,45,231	18,74,138		2,16,34,953	2,36,54,322
Shelter for Men	29,17,993				29,17,993
Aftercare / Rehab.project expenses	10,38,053	12,23,568	3,07,590		25,69,211
Skills Development	20,73,425	15,70,643			36,44,068
Research and Training		3,18,336			3,18,336
Other Programme Expense	86,07,762	3,75,302			89,83,064
Administrative Expenses	71,76,771	71,68,959	27,18,031		1,70,63,761
Assets Maintenance	41,58,782	74,198			42,32,980
Capacity Building / Replication Travel Expenses			18,98,454		18,98,454
Sub Grant	4,13,000		71,86,530		75,99,530
Fixed Assets	18,18,993	14,16,453	3,60,067	2,61,935	38,57,448
Fixed Deposit	4,57,05,482	34,53,39,660			39,10,45,142
Rent Deposit			1,30,000		1,30,000

PAYMENTS	Non-FCRA	FCRA	APF	GCC	TOTAL
Other Deposits		14,650			14,650
Loans Repaid	22,35,935				22,35,935
Sundry Creditors			12,36,368		12,36,368
Loans & Advances (Asset)	1,99,238	56,25,949	2,14,241		60,39,429
Outstanding Liabilities			13,92,377		13,92,377
T D S Receivable	10,63,424	24,81,962	75,19,787		1,10,65,173
Grant Returned			71,73,578		71,73,578
TDS to Be Reimbursed to FCRA A/C	21,52,780				21,52,780
Closing Balances :-					
Cash-in-hand	8,922	746			9,668
Bank Accounts					
Axis Bank- 083010100136983	47,364				47,364
Axis CA 923020011940669			1		1
Axis SB 923010010763594			2,68,80,143		2,68,80,143
HDFC Bank Ltd - 50100092343049	51,438				51,438
ICICI Bank-602701202072 Corpus	45,909				45,909
ICICI Bank-602701209343 Rec	22,94,923				22,94,923

PAYMENTS	Non-FCRA	FCRA	APF	GCC	TOTAL
ICICI Bank A/C : 032901000114	17,196				17,196
ICICI Grameena Bank : 602705038223	29,349				29,349
IDBI Bank -0287104000117616	6,25,860				6,25,860
IDBI Bank-0287104000256308			49,384		49,384
IDFC-10099749880			77,144		77,144
IDFC - 10104855831			46,750		46,750
Kotak Bank-A/C:-8413114703- Bajaj	1,87,716				1,87,716
Kotak Mahindra - 6011581033 NRTT Corpus Grant	6,51,590				6,51,590
Kotak Mahindra Bank Ltd A/C 6011291253	(42,88,776)				(42,88,776)
Kotak Mahindra Bank - 6011291253 HCL	1,34,418				1,34,418
RBL Bank - 300040004004 (CTS)	2,08,358				2,08,358
RBL Bank - 400040004004	3,51,268				3,51,268
RBL Bank - 309013087711			9,78,578		9,78,578
RBL -309015735885		77,808			77,808
RBL - 309015735955		38,065			38,065
RBL Bank - 309023484153		2,73,19,172			2,73,19,172
SBI - 10408452644 Rec	41,975				41,975
SBI 10408452859 Building Fund	25,967				25,967

PAYMENTS	Non-FCRA	FCRA	APF	GCC	TOTAL
SBI - 10408453115- SWADHAR	2,07,417				2,07,417
SBI Bank - 40121845535 - FCRA Ac		5,86,567			5,86,567
Kotak Mahindra Bank-8411876887		3,32,618			3,32,618
Kotak Mahindra Bank (F C) - 6011155791 - GCC				26,30,948	26,30,948
TOTAL	12,10,57,760	43,87,51,469	12,09,21,970	2,45,27,836	70,52,59,035

for **THE BANYAN**

Balraj Vasudevan
Honorary Treasurer

Place : Chennai
Date : September 23, 2024

for **G . JOSEPH & CO**
Chartered Accountants

Viji Joseph
Partner
Membership No : 027151
FRN: 001383S

Consolidated Income & Expenditure statement for the year ended March,2024

INCOME	Year Ended 31.03.2023	Non-FCRA	FCRA	APF	GCC	TOTAL
Donation and Programme Receipts (Non - FCRA)	11,20,89,027	10,63,17,929		2,47,88,364		13,11,06,293
Foreign Contribution Received	7,44,50,206	-	9,26,40,528			10,70,76,539
Interest Income	2,13,05,152	1,04,91,808	2,64,77,777		1,44,36,011	3,70,54,997
Other Income	5,35,300	2,52,216		7,63,39,253	85,412	7,65,91,469
GCC Donation Transfer From FCRA Main A/c	1,82,88,035	-				
FCRA Penalty Refund	11,95,173	-				
TOTAL (A)	22,78,62,893	11,70,61,953	11,91,18,305	10,11,27,617	1,45,21,423	35,18,29,298
EXPENDITURE	Year Ended 31.03.22	Non-FCRA	FCRA	APF	GCC	TOTAL
Emergency Care & Recovery Centre- Mogappair	3,26,20,590	85,57,223	12,30,635	2,20,83,542		3,18,71,400
Emergency Care & Recovery Centre- Chengalpattu	1,45,52,131	9,97,454	7,17,313	1,48,30,935		1,65,45,702
Emergency Care & Recovery Centre- Chennai	1,78,189	-	2,90,029	53,21,295		56,11,324
Emergency Care & Recovery Centre- Kerala	27,62,903	2,57,207	1,42,277	29,38,378		33,37,862
Emergency Care & Recovery Centre- Bangalore	58,25,486	13,323	-	36,33,625		36,46,948
Emergency Care & Recovery Centre- Thiruvallur	34,20,697	40,09,595	-	1,95,255		42,04,850
Emergency Care & Recovery Centre- Gunaseelam		-		7,22,548		7,22,548
Emergency Care & Recovery Centre- Others	1,55,072		3,94,776	43,905		4,38,681
Emergency Care & Recovery Centre- Replication Sites	37,07,534	3,27,165	-	79,01,873		82,29,038

EXPENDITURE	Year Ended 31.03.22	Non-FCRA	FCRA	APF	GCC	TOTAL
Centre for Social Needs and Livelihoods - Rural	61,37,365	43,69,457				43,69,457
Centre for Social Needs and Livelihoods - Urban	32,81,724	52,67,971				52,67,971
Centre for Social Needs and Livelihoods - Maharashtra	40,14,728	43,75,796				43,75,796
Centre for Social Needs and Livelihoods - Kerala	1,79,795	3,31,432				3,31,432
Centre for Social Needs and Livelihoods (NALAM)	19,90,915	6,32,006	35,82,215			42,14,221
Centre for Social Needs & Livelihoods Trichy	-	2,78,079				2,78,079
CMHSS Chengalpattu						1,96,266
CMHSS Trichy						95,800
Home Again - Chengalpattu	80,08,103	5,33,582	82,58,493			87,92,075
Home Again - Chennai	85,43,713	1,20,907	69,47,745			70,68,652
Home Again - Trichy	64,06,692	7,72,985	71,35,514			79,08,499
Home Again - Kerala	1,20,17,586	5,54,154	1,16,40,783			1,21,94,937
Home Again - Villupuram & Tirunelveli	14,97,421	4,69,065	19,04,591	47,32,125		71,05,781
Home Again - Maharashtra	1,01,30,053	88,42,595	-	57,400		88,99,995
Home Again - Gujarat, Karnataka, A P, Etc	2,34,72,590	1,45,231	18,73,517		2,11,49,893	2,31,68,641
Shelter for Men	74,74,346	29,17,993	-			29,17,993
Aftercare / Rehab. Project expenses	43,27,449	10,38,053	11,21,343	3,07,590		24,66,986
Skills Development	51,36,447	20,73,425	15,56,348			36,29,773

EXPENDITURE	Year Ended 31.03.23	Non-FCRA	FCRA	APF	GCC	TOTAL
Research and Training	1,24,051	-	3,90,779	-		3,90,779
Other Programme Expense	3,62,125	86,07,762	3,75,302	-		89,83,064
Administrative Expenses	1,51,70,351	71,76,771	75,43,840	27,18,031		1,74,38,642
Assets Maintenance	58,86,262	41,58,782	12,80,408	2,94,454		57,33,644
Coved 19- Expenses	29,46,125	-	-	-		-
Capacity Building / Replication Travel Expenses	8,96,008	-	-	18,98,454		18,98,454
FCRA GCC Donation Transfer GCC A/c	1,82,88,035	-	-	-		-
Sub Grant	20,50,000	4,13,000	-	71,86,530		75,99,530
Grant Returned	-	-	-	71,73,578		71,73,578
TOTAL (B)	21,15,64,486	6,72,41,013	5,63,85,907	8,23,31,584	2,11,49,893	22,71,08,397
EXCESS OF EXPENDITURE OVER INCOME [(B) - (A) = C]					66,28,470	
EXCESS OF INCOME OVER EXPENDITURE [(A) - (B) = C]	1,62,98,407	4,98,20,940	6,27,32,397	1,87,96,033	—	12,47,20,901

for **THE BANYAN**

Balraj Vasudevan
Honorary Treasurer

Place : Chennai
Date : September 23, 2024

for **G . JOSEPH & CO**
Chartered Accountants

Viji Joseph
Partner
Membership No : 027151
FRN: 001383S

INDEPENDENT AUDITOR'S REPORT

Opinion

We have audited the financial statements of The Banyan ("the Trust") which comprise the Balance Sheet at March 31, 2024, and the Income and Expenditure Account for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements give a true and fair view of the financial position of the Trust as at March 31, 2024 and of its excess of income over expenditure for the year then ended in accordance with the Accounting Standards issued by the Institute of Chartered Accountants of India (ICAI).

Basis for Opinion

We conducted our audit in accordance with the Standards on Auditing (SAs) issued by the Institute of Chartered Accountants of India (ICAI). Our responsibilities under those Standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Trust in accordance with the Code of Ethics issued by the Institute of Chartered Accountants of India and we have fulfilled our other ethical responsibilities in accordance with the Code of Ethics. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charged with Governance 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 Trust in accordance with the accounting principles generally accepted in 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.

In preparing the financial statements, management is responsible for assessing the Trust's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Trust or to cease operations, or has no realistic alternative but to do so.

The Trustees are responsible for overseeing the Trust's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with SAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with SAs, we exercise professional judgement and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Trust's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Trust's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements

or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Trust to cease to continue as a going concern.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

We also provide those charged with governance with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, related safeguards.

for **G . JOSEPH & CO**
Chartered Accountants
FRN: 001383S

Viji Joseph
Partner
Membership No : 027151
[UDIN : 24027151BKBWEM4474]

Place : Chennai
Date : September 23, 2024

SUPPORT THE NUTRITIONAL NEEDS OF HOMELESS PEOPLE WITH MENTAL ILLNESS

During their time on the streets, many of our clients have gone days without a meal. Others have had to resort to rummaging through garbage and waste, in order to survive.

It is no wonder that most of our clients have chronic malnutrition and anaemia at the time of their admission.

Meals at The Banyan, go well beyond the basics. Not only do we provide freshly cooked meals that are tailored to the diverse cultural roots of the people we serve, but we also mitigate chronic nutritional deficits by providing food that is healthy and nutritious.

They are a collective experience through which staff and residents alike partake in one of the most basic acts of human connections and bonding. At any given point of time, there are 350 homeless persons with mental health issues at our programmes.



Partner with The Banyan and support the nutritional needs of our clients by committing to our food donation scheme!

The cost of food per client per day is ₹ 120

This includes:

- Breakfast, lunch, dinner
- Tea & snacks twice a day
- Special meals for those with health problems


	ECRC	SHELTER	CGH	HOME AGAIN	TOTAL
# OF CLIENTS	120	30	50	500	700
COST PER PERSON / MONTH	₹3,600	₹3,600	₹3,600	₹3,600	₹3,600
TOTAL COST / MONTH	₹4,32,000	₹1,08,000	₹1,80,000	₹1,80,000	₹9,00,000
TOTAL COST / YEAR	₹51,84,000	₹12,96,000	₹21,60,000	₹21,60,000	₹97,00,000



Please provide a cheque payable to "The Banyan" with "Food Scheme" in the memo line along with this slip. You can also make your donation online at thebanyan.org/donate

- ☐ Cheque
- ☐ Online*
- ☐ Bank Transfer

The Banyan, 6th Main Road, ERI Scheme, Mogappair West, Chennai - 600 037, TN, India
Acc #: 0287104000117616
Name & Address of Bank: IDBI Bank, No. 6/11, Pattery Square , Balfour Road, Kellys, Kilpauk, Chennai - 600 010, TN, India.
Branch/Code: Kiplauk Branch, Chennai (TN), Code: 287
IFSC Code/NEFT: IBKL0000287
Swift Code: IBKLINBB005

A large, leafy tree with a thick trunk and many branches stands in a grassy field. A cow is standing near the base of the tree, partially obscured by its branches. The background shows a flat landscape with some distant trees and a cloudy sky.

Our Vision: “An inclusive, just and humane world that promotes capabilities and participation among persons living with psychosocial distress.”

Our Mission: “Enabling access to comprehensive, integrated, person-centered mental health care for persons living in poverty and homelessness through culturally resonant clinical and social care pathways”