



SANKALP
REHABILITATION TRUST
Never, never, give up

ANNUAL REPORT 2016-2017



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Directors Note



Dear Friends,

We have completed 22 years of serving the most marginalized population of street Drug Users and those among them with HIV and Hep C. Even after 22 years we find it difficult to bring in resources for this marginalized group since there is very little empathy in public for them. We have the empathy because a lot of our staff come from similar backgrounds and realize the struggle they have been through. Those who have known us personally are the ones who continue to support us and it will be our endeavor to increase our contact with our empathetic donors through our 1000 Club.

We are glad to notice that the Injecting Drug Use habit has reduced in Mumbai considerably which is a direct reflection of our good work. Yet groups of street children particularly adolescents have increased in number among those using solvents, with little or no help. This is an area which we will have to plan for with a suitable partner so that we may better understand their needs and establish interventions that benefit them.

For Sankalp Rehabilitation Trust



Eldred Tellis
Executive Director

A Snapshot of Sankalp



Since its inception in 1995 Sankalp has been providing services which are much needed and non-existent. Early in 1997 Sankalp Rehabilitation Trust began family therapy in New Bombay since there were many affected families unable to access help. Sankalp also assisted with setting up a halfway home and skill building units for stand-alone rehabilitation centres which did not offer any follow up.

After a 5 city Rapid Situation Assessment in 1999, Sankalp began its harm reduction activities in Mumbai and has till date covered more than 80% of the IDU population in the city with its activities.

During early the years of discrimination, Sankalp Rehabilitation Trust successfully fought legal battles with Government run institutions for the right to healthcare and has been instrumental in getting the ART programme started in the country. The activism through legal battles with big Pharma Companies like Roche and Gilead has helped make drugs accessible and affordable for those suffering from Hep C.

For the non-injecting population Sankalp Rehabilitation Trust was unable to turn them away and therefore provided treatment through models of abstinence like detoxification and rehabilitation centres. With the strong need of reintegration into society, livelihood programs also took shape and Sankalp Rehabilitation Trust can boast of many of its support group members having benefited from these interventions and becoming productive citizens of the country.

Sankalp Rehabilitation Trust ran the following projects in Mumbai / Pune throughout the year and Leadership

- Targeted Intervention for IDUs supported by MDACS
- Detoxification Centre supported by Inspirasia
- Livelihood Projects associated with Gardening, Computer Skills & Handicrafts
- Rehabilitation Centre with T.C. Model in collaboration with Lords Ranch Trust
- Respondent Driven Sampling – Research Project with Y.R.G Care
- Halfway Home & HIV Care Unit by crowdfunding

Leadership

Sankalp has reached more than 20,000 drug users directly and has impacted many more family members. Sankalp has helped clients return to and support their families, become productive members of society, and even die with dignity, Sankalp has contributed to improvement in the quality of its clients' lives and the lives of their families in numerous ways. Legal decisions achieved through Sankalp's activism and litigation have impacted millions not only in India but around the world.

Milestones & Awards

1997-99 - Three Drop-In Centres opened throughout Mumbai district

- 2002 - Won litigation against the Government of India - Reinstated 'Right to Marry' for HIV positive people
- 2004 - Crisis Care Shelter for IDU's opens
- 2005 - Prison Rehabilitation programme begins
- 2007 - Sustainable Livelihood Programme
- 2007 - Founder and Director Eldred Tellis named an Ashoka Fellow
- 2008 - Received the Red Ribbon Award from UNDP/UNAIDS
- 2008 - Accredited by the National Accreditation Board
- 2009 - Won the Right to Health litigation
- 2010 - Launched the residential Rehabilitation Centre in partnership with The Lords Ranch Trust
- 2011 - Opened a new Detoxification centre in Vasai
- 2011 - Received Global Fund grant to train NGOs in Gujarat, Maharashtra and Goa
- 2012 - Received Certificate of Merit – AmeriCares India
- 2012 - Won litigation against ROCHE Pharma to break the patent of a Hepatitis C drug called Pegalated
- 2014 - Received Global CSR Excellent & Leadership Award
- 2015 - Pre-grant oppositions raised against new Hepatitis C drugs Sofisbuvir and Daclatasvir against Gilead and MBS



Study of Drug Use & Sexual Behavior among drug using Street-based ADOLESCENTS in Mumbai

Authors: Tellis E, Thakur A, Sethi G, Bagwadia J.



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Background

Mumbai has over 3 Lakh adolescents (aged between 10-19) on the streets. These are sometimes children of Drug Users and it is also known that children on the streets experiment with substance use 1-1.5 years earlier than their peers.

Anecdotal information and histories of clients attending Sankalp's drop-in centres indicate that a large number of street based adolescents use drugs. There is little information on these adolescents and their lives. Few seem to have access to information and services related to sexual health. Most drug use interventions focus on Injecting behaviors which may not necessarily be common among adolescent drug users. They are considered to be at heightened risk, related to their health and well-being and sexual health.

Methods

A mixed method study was done using a survey questionnaire, in-depth interviews, key-informant interviews with stakeholders (NGOs, drug sellers, experts) and Focus Group Discussions. All available and willing drug using adolescents were interviewed. Survey questions were adapted from Adolescent Drug Abuse Diagnosis questionnaire and were pre-tested after translation in local language. The areas were mapped to identify locations and time when street children congregate.



Results

Family

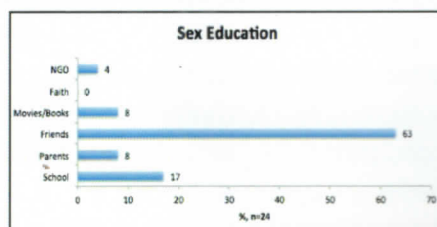
84% had run away from home at least once 47% have no form of family or financial support

Education

Currently only 5% are in touch with education facilities

Social Network

98% of the respondents have close friends who use drugs; 76% have friends who are sexually active

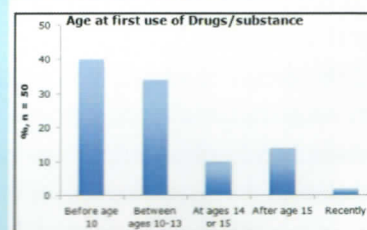


Sexual Behaviour

47% of the sample reported having had sex 70% said they had used substances on the first instance

Drug Use

73% of respondents use Solvents
48% use Cannabis
35% use Brown Sugar



Conclusions

- Only half of the adolescent population has reported engaging in sexual activity. Therefore sex education would be most beneficial for this age.
- Availability of condoms for those under the age of 18 needs to be examined.
- Juvenile homes and children homes should have linkage with NGOs that provide detoxification and rehabilitation services for children who are abusing substances along with comprehensive knowledge dissemination.
- Most have been through the Juvenile Justice System and NGOs but very few had any knowledge of the impact of drugs on their health and well being.

Our Programmes

Targeted Intervention – Drop-In Centre

Sankalp's Drop-in Centre (DIC), spearheaded by outreach workers and peer educators, is at the heart of our harm reduction efforts in the community of Injecting Drug Users (IDUs). The Centre offers a multitude of low-threshold services including health education, counselling, and Opioid Substitution Therapy (OST), all designed to lower the negative consequences and risks associated with drug use. The environment of acceptance, peer support, and continued care is vital in motivating IDUs towards recovery and reintegration into society. Staff members consistently follow



up with clients to provide consistent support, guidance in managing illnesses like TB, HIV, and Hepatitis, and hold daily community meetings to facilitate reflection and sharing about users' experiences. The Drop-in Centre is a lifeline to Sankalp's holistic continuum of care that supports the health and rehabilitation of IDUs. This year, we had **165 new clients**, taking the total number of Injecting Drug Users who benefited from our Harm Reduction programme at the **Drop-in Centre to 1499**.

Key Outreach Services

Sankalp's initial point of contact with the IDU community is through our staff of Outreach Workers (ORWs) and Peer Educators (PEs), many of whom are former or current drug users who are themselves on the road to recovery. Through persistent follow up and daily field visits, they educate users about safe injecting practices, abscess management, and carry out needle and syringe exchange. The latter programme, in which IDUs return used and dirty needles and syringes to Sankalp staff in exchange for new, sterile ones, is a cornerstone of our harm reduction strategy. It helps reduce the spread of blood-borne viruses, decreases the risk of developing abscesses, and creates health awareness amongst the target population. Our outreach efforts also include bi-monthly community meetings in 'hot spots' frequented by IDUs, where staff raise awareness and encourage new clients to utilize Sankalp's key services. Throughout the year, a total of **9282 needles and 4578 syringes** were exchanged among IDUs.

Counselling

The Drop-in Centre offers a range of counselling services that are integral to providing clients with holistic support. Each client is individually counselled to identify and examine the origin and patterns of their drug use, contributing environmental and psychosocial factors, and HIV status and Hep C triggers. Group counseling sessions enable peers to motivate themselves and each other by sharing their life experiences, family relationships, and understanding of harm reduction strategies. Wherever feasible, clients' families are also counselled to bring about reconciliation, encourage healthy support, and thereby assist users' rehabilitation and reintegration into society.

Personal Health

Our Drop-in Centre is equipped with clinics that are attended daily by a doctor and nurse. The medical staff takes care of the various medical needs of our clients, ranging from diagnostics and distribution of medicine to abscess management. The doctor's main responsibility is to monitor each client's induction process and possible tapering off of Opioid Substitution Therapy (OST). Patients who need additional care and treatment for HIV or TB are referred to appropriate community care centres, critical care facilities and local government hospitals. We make sure that those referred to public hospitals are given access to bathing facilities and fresh clothing at the DIC, in order to minimize any discrimination they may face there, and help ensure they are not refused treatment.



Opioid Substitute Therapy

This therapy is the backbone of Sankalp's mission of Harm Reduction, as it helps reduce injecting drug use as well as its associated health risks. It enables IDUs to taper off their opioid use in a safe and effective manner, using an oral substitute that eliminates the use of needles and syringes, and thus eliminates the risk of spreading blood-borne infections and developing abscess. The effects of the oral substitute we dispense, known as Buprenorphine, are long-lasting, do not cause euphoria, and come with a lower risk of dependency and addiction. Opioid Substitution Therapy is a fundamental part of the process of helping clients move towards rehabilitation and re-entry into mainstream society. This year there were **58 new registrations** on OST, taking the total count to **545 clients ever registered** on OST.

Referral Services

Various specialized medical referrals take place at the DIC. Before referring clients for HIV testing, our counsellors perform a risk assessment and educate them on how to interpret test results. Clients are then directed to 'Integrated Counselling and Testing Centre' at Nair Hospital or Gaurabai Hospital. Those who test positive are then assisted by peer educators throughout the pre-registration process for antiretroviral therapy (ART), and are asked to repeat CD4 tests every six months. Until recently, only clients with CD4 levels below 350 were referred for ART, however recent UN recommendations have called for a "test and treat" protocol; Sankalp will work to disseminate this awareness in the community.

Those with complaints of persistent cough are referred to nearby DOTS centres, where they undergo TB screenings. We are also grateful to our network partners, Medicines Sans Frontiers (MSF), who helped us with Hepatitis C testing and treatment. This year, **1242 clients were screened for STIs**, and **344 individuals were tested for HIV** of which **12 were reported positive** and put on treatment.

Mumbai Central Drop-in-Centre Performance Indicator FY 16-17

Services	15-16 (Previous Year)	16-17	% Increase / Decrease
Total clients ever registered			
	1334	1499	12 %
New registrations for the year			
	64	165	158 %
STI & ICTC1			
Clients screened for STI	891	1242	39 %
Tested for HIV	254	344	35%
Condom Distribution			
Condoms Distributed	2225	3404	53%
OST			
Ever registered on OST	444	545	23%
New registrations of OST for the year	45	58	29%
Average individuals regular on OST	68	81	19%
NSEP			
Needles were distributed	22066	9282	- 58%
Syringes were distributed	9120	4578	- 50%



Detoxification Centre: Sankalp Disha



Sankalp Disha, inaugurated in March 2011 with the support of INSPIRASIA, is a twelve-bed residential detoxification centre. Originally located in Vithalwadi, it later moved to Vasai. Sankalp Disha's intensive fifteen-day programme aims to address clients' physical addiction in a supportive and non-judgmental environment. Clients are provided comprehensive medical and psychological care by trained personnel. The use of Buprenorphine for OST is tapered off, and the on-site a doctor treats and manages withdrawal symptoms such as tremors, insomnia, hallucinations and vomiting. All clients attend regular consultations with the psychiatrist.

Sankalp Disha uses a cognitive therapy approach, and follows the '12-Step Recovery Programme' successfully used by Alcoholics Anonymous and Narcotics Anonymous. Relapse triggers, emotional and stress management, and behavioral and cognitive skill that help in staying sober are all common topics for daily group counselling sessions. Clients are also counselled on a one-to-one basis, where they delve into the circumstances surrounding them at the start of their drug use, family relationships, finances, and motivation for recovery. Since the family support is a substantial driver of successful recovery, our staff conducts home visits as well as joint client-family counselling sessions to strengthen relationships.

Many clients are referred for long-term residential rehabilitation at the 'Good Shepherd Recovery Home', provided by our networking partner, The Lord's Ranch Trust. Regardless of whether or not clients proceed to formal rehabilitation, various follow-up initiatives ensure continued treatment after our clients leave Sankalp Disha.

This year we had a total of **136 clients** admitted to our detoxification centre. We were glad to see that out of these clients; only around **19% were relapse/repeat cases**.

Sankalp Disha	
Total Admitted to Detox	136
New Clients Admitted	110
Clients Readmitted	26
Counselling	
Total Individual Counselling Sessions	1493
Total Group Counselling Sessions	853
Total Family Counselling Sessions	402
Referrals	
Clients referred to rehab	25
Clients referred to hospital	5

Good Shepherd Recovery Home

Good Shepherd Recovery Home (GSRH), set up in January 2010, is our rehabilitation centre located in the peaceful and scenic surroundings of Pune, near the Warasgaon Dam. Here, clients undergo a four-month long structured and comprehensive rehabilitation experience, where our well-trained, experienced, and dedicated staff introduces them to a range of therapeutic approaches to recovery. GSRH accepts clients from every strata of society and age group, from 18 to 70 years of age, but primarily aims to serve the most marginalized individuals, including HIV positive drug users.



The rehabilitation programme at GSRH is based on Evidence Based Programmes (EBPs). EBP tools and strategies are implemented in various sessions every week, and are designed to restore the self-image and self-respect that drug users or alcoholics tend to lose during their using period. This Sankalp-run residential programme on the premises of the Lords Ranch Trust includes individual and group counselling sessions, therapeutic listening and problem solving programmes, and also tackles individuals' specific life situations with tailored strategies. The staff also organizes a range of therapies and tutorials for the mind, body, and soul through team games, physical exercises, meditation sessions, intensive group therapy, sharing experiences and stories with others in recovery, and exposure to the Narcotics Anonymous programme.

In addition to the psychological and social support that clients receive, work therapy is an important part of the rehabilitation process. Clients participate in vegetable gardening, poultry farming, cooking, maintenance, and cleaning. During these work therapy sessions, the supervisor or counsellor's keen eye easily detects clients' hidden talents, aptitudes, and skills. This is essential for encouraging, training, and further equipping clients when they are ready to enter mainstream society.

In conjunction with clients' participation in GSRH, family involvement is highly recommended, since positive and healthy relationships are a vital source of support during an addict's recovery process. Therefore, a trained family counsellor from Sankalp Rehabilitation Trust holds monthly meetings with families following a self-help model, with the counsellor acting as a facilitator and encouraging families to cooperate and help each other. These meetings are held at Sankalp's head office at Charni Rd, Mumbai, on the third Thursday of every month. Depending on a patient's progress, families are invited to the GSRH centre once they have completed three months of the programme. These activities help family members learn to address their own issues that may have contributed to the patients' drug use, and provide a positive environment for clients returning home from the Rehabilitation Centre.

This year, we had a total of **32 new clients** enter the rehabilitation programme. Out of these, a majority of them are in touch with Sankalp, and are living clean, responsible, and healthy lives.

Community Care Centre

The Community Care Centre's Nivara Project and Hunar Project are fundamental to providing clients a continuum of care. The Nivara Project provides a place to stay for HIV positive individuals starting ART treatment, until they can manage on their own back on the streets. Patients receive support for testing, registration, and coping with the initial and often uncomfortable side effects. At this time, there is no external funding for Nivara, so Sankalp is only operating the centre for those who are in urgent need or showing positive strides in their recovery.

Another integral component of the Centre was Project Hunar, which offered livelihood training activities to clients, many of whom gained useful IT skills. The

intention is to empower drug users with confidence reinforcement and proper incentives – which they achieve by successfully and relatively independently completing their work – so that they are able to function as purposeful and integrated members of society. In addition, the residential nature of the Project ensures the consistent availability of medical, psychological and peer support, thereby creating a holistic environment in which to grow.

The batch that took the opportunity to utilize the service made remarkable progress throughout their training, not just in learning and developing new skills, but also in their overall image of themselves. The sessions have helped increase their confidence and self-esteem and have made them more disciplined and responsible human beings. Our main aim which was to teach participants the skills they need to in order to earn a small income and empower them to transition into mainstream society was achieved. Several clients have reconnected with their families, some even returning to their villages. Two clients have got a job at Wankhede Stadium as housekeepers, while another is working with a networking partner "The Lords Ranch", while others have been accepted back into their homes to work in the family business.

This year, Nivara and the Hunar project supported and helped **21 clients**.



Nivara and Project Hunar	
Total Clients Registered	21
HIV + Clients	7
Clients on Opioid Substitution Therapy	13
Service & Referrals	
Specialised Care at Municipal Hospital	13
Orthopaedic Follow-up	3
Optometrist Follow-up	3
ICTC & STI Screening	11

Service & Referrals	
CD4	7
On ART	5
Municipal Hospital for Critical Care	6
Individuals Counselling	21
Group Counselling Sessions	490
Group Family Counselling Session	12
Support Group Meetings for HIV + patients	12
Referred to Detoxification	18

Halfway Home

Many who are recovering from substance abuse issues find that to remain sober immediately following treatment they must immerse themselves in a sober living environment (Halfway Home). For many patients, living in a Halfway Home that offers a positive, drug and alcohol-free, group living environment can be a helpful and crucial step along the way to ultimate recovery. Whether referred to as a sober living home, halfway home or sober house, all of these names refer to a drug and alcohol-free, community living environment intended as a transitional living phase for those who have attended a residential rehab facility for drug or alcohol addiction.



Those in recovery who have lost a lot during active addiction would definitely benefit from having a transitional period to ensure that they are stable in their recovery before going home to deal with the stressful situation left behind. Especially those coming to Sankalp, most of whom are street drug users and need to start life from scratch. Spending time at a Halfway Home can increase the chances of long-term recovery because it further prepares a person for dealing with real-life situations once again.

Keeping in mind this need, it was decided that we would utilize additional space above our Detoxification Centre premises as a Half-way Home to support those in treatment, who are without a home in Mumbai. A top floor was constructed which houses 6 beds for these clients.

The Half-way Home was inaugurated on the occasion of our 22nd Anniversary. For this special occasion, all Sankalp Staff were invited to the Detoxification Centre. Trustees from both Sankalp and Nirashritashramata Trust were also invitees. Ms. Joyce Miranda did the honours of cutting the ribbon and was accompanied by Mr. Joe Fernandez and Mr. William Mendonca from Nirashritashramata Trust. Sankalp Trustees Mr. B.N. Bhagwat, Dr. Saroj Jha, and Ms. Sujata Ganega were pleased to conduct the ceremonial lighting of the lamp.

The objective is to offer a positive place for recovering addicts to find recovery support in their peer group and allow residents to work on their unique recovery programme with the goal of becoming completely self-supportive and reintegrated into mainstream society. The services that are offered at the half way houses is very similar to that of treatment but because they allow one more freedom to live a normal life, you have the immediate opportunity to take what you are learning and apply them to real life situations. Whether one is successful or not in their daily dealings, one can take their experiences back to a stable and positive environment where a counsellor, doctor, or therapist can help analyze it.

This Half-way Home is yet another step closer in delivering a comprehensive and integrated continuum of services to our clients. During the 6 months since its inauguration, **9 clients** have already utilized this service and have greatly benefited from it.

Networking and Advocacy

Sankalp Rehabilitation Trust puts great emphasis on networking with other NGOs. In fact this is one of the strengths of the organization that we do not aspire to do everything ourselves but go to those who have experience and strength in their primary field.

We are glad the BMC provides space wherever possible to be able to reach many more from this marginalized population. Also through the Directly Observed Treatment Short (DOTS) programme, we can make TB treatment available to those who need it among the DU population. The specialized care provided by B.Y.L. Nair Hospital, L.T.M.G. Hospital, J.J. Hospital, Central Hospital (Ulhasnagar) and TB Hospital at Sewree is of immense help to our clients.



Sankalp was the secretariat of the Mumbai AIDS Forum - a network of more than 30 civil society organizations including individual activists living with HIV in Mumbai. After a successful stint of over 2 years of being secretariat, Sankalp handed over the responsibility to CCDT. Members of the Forum appreciated the work of Sankalp in organizing meets and taking issues forward.



This year on World AIDS Day, Sankalp joined the Mumbai AIDS Forum Press Conference to Protest against the phrase "as far as possible" from the HIV/AIDS Bill. This phrase was added so that there is no pressure on the Government to provide Treatment to ALL those who were infected. The members of the FORUM found it unacceptable. It was important to have treatment for ALL as treatment was an integral part of Prevention.

Sankalp has been networking with MSF to access treatment for Multi-Drug Resistant Tuberculosis (MDR-TB) clients and also for those with HIV and HCV Co-infection. There is also a strong bond with MSF in their Access Campaign

where we work to get justice from multinational pharmaceutical companies such as Gilead and Roche. Lawyers Collective have helped us through our litigation with many pharma companies to challenge patents or file pre-grant oppositions.

We will continue to strive for better treatment of our clients by actively extending our networking activities with a larger group of organizations.

Respondent Driven Sampling

Research Project with Y.R.G Care

YRGCARE, Chennai and Sankalp Rehabilitation Trust established collaboration in 2012 to participate in a cluster randomized multi-site trial that test if Integrated Care to IDU population would offer stigma free environment leading to enhanced uptake of HIV continuum of care and thus reduce the community level viral load for the baseline assessment, during 2013. 1002 individuals through respondent driven sampling participated in the behavioral and biological assessment. The outcome of this baseline showed HIV prevalence of around 10% and HCV prevalence of around 35%.



Since this was a randomized trial, Mumbai turned out to be a control site (where existing standard of care will be compared with intervention sites that had Integrated care) to measure outcomes. Impact assessment was initiated in Sep 16, however due to prevalent situations such as low IDU population in Mumbai, coupled with exemplary work by Sankalp Rehabilitation Trust, enrollment was frustratingly slow. Additionally, issues around potential evacuation of Sankalp Rehabilitation Trust from the BMC premises complicated matters. Hence the enrollment was aborted at around 750 level and thus the site prematurely exited from prospective processes related to this and any other trial involving IDU in Mumbai (with YRGCARE).

Events & Highlights



Masterclass with Mr. Tellis along with Director, Abhishek Chaubey, Writer, Sudip Sharma, Uda Punjab & Subhash Ghai at Whistling Woods International



Sankalp Rehabilitation Trust marks the International AIDS Candlelight Memorial 2016



Inauguration of Drug Awareness Programme at Patuck School



Inner Wheel Club Members spending Raksha Bandhan with Sankalp Clients



Volunteers Aishwariya & Naomi through our partner Omprakash



Mr. Tellis at the AIDS conference in Durban

Our Staff & Management



Staff Details:

Gender	Paid (Part Time)	Paid (Full Time)
Male	13	16
Female	0	10
Total	13	26

Volunteer Details:

Gender	Paid	Unpaid
Male	0	2
Female	0	2

Distribution of staff according to payment levels (as on March 31, 2017)

	Male	Female	Total
<=5000	16	0	16
5001-10000	7	6	13
10001-25000	6	4	10
Total	29	10	39

* Except for Eldred Tellis (Founder Trustee and Executive Director) Rs. 15859/- Towards travel costs for day to day monitoring of all centres (including railway pass and auto fares) Rs. 3584/- for medicines

* Total cost National Travel by Board Members/Staff/ Volunteers on behalf of organisation: Nil

Total cost of International Travel by Board Members/Staff/ Volunteers on behalf of Organisation : Nil

Our Finance (Balance Sheet & I&E & R&P)

Balance Sheet as on 31 MARCH 2017

LIABILITIES	2016 - 2017				ASSETS	2016 - 2017			
	Rs.	Ps.	Rs.	Ps.		Rs.	Ps.	Rs.	Ps.
Trust Funes or Corpus					Computer				
Balance as per last Balance Sheet	2,196,105.75				Balance as per last Balance Sheet	34,408.04			
Additions during the year	144,000.00		2,340,105.75		Add: Addition during the year	22,800.00			
						57,208.04			
Income and Expenditure Account					Less: Depreication for the year	27,479.00		29,729.04	
Balance as per last Balance Sheet	4,119,326.59								
Add: Assets incorporated of Closed Projects	-				Electrical & Other Equipments				
Less : Unutised Grant Returned	-				Balance as per last Balance Sheet	42,920.91			
Add/Less: Surplus /Deficit	474,040.47		4,593,367.06		Add: Addition during the year	-			
					Less: Depreication for the year	42,920.91			
Endowment Fund						6,438.00			
36,482.91									
Balance as per Balance Sheet	853,313.35				Furniture & Fixtures				
Additions during the year	-		853,313.35		Balance as per last Balance Sheet	123,241.27			
Current Liabilities					Add: Addition during the year	-			
Audit Fees Payable	25,000.00		25,000.00		Less: Depreication for the year	123,241.27			
TDS Payable	10,652.00		10,652.00			12,325.27		110,916.00	
Unutilised Grant - MDACS I	177,780.00		177,780.00						
					Motor Vehicle				
					Balance as per last Balance Sheet	692,556.23			
					Less: Sold during the year	40,000.00			
					Less: Depreication for the year	-			
						103,884.00		548,672.23	
					Investments				
					Accued Interest on Investment	143,349.57			
					Fixed Deposit with Syndicate Bank	866,834.23			
					Fixed Deposit with Axis Bank	1,664,809.00			
					Fixed Deposit with Citizen Cre. Co Op Bank Ltd.	766,050.00			
					Fixed Deposit with Deutsche Bank	293,462.49			
					Fixed Deposit with HDFC Bank	1,045,340.00		4,779,845.29	
					Current Asset				
					TDS Receivable AY 17-18			14,769.37	
					Prepaid Rent			23,819.00	
					FD Int Receivable			3,840.00	
					Receivable from Electrocraft			5,652.00	
					Receivable from Saldhana International Academy			5,000.00	
					Deposits				
					Deposits for Nutan Gas Agency	2,900.00			
					Deposit for Office Premises	110,000.00			
					Deposit for Bharat Gas	950.00		113,850.00	
					Cash and Bank Balances:				
					Cash-in-Hand	7,308.08			
					Cash at Bank	2,320,334.24		2,327,642.32	
TOTAL			8,000,218.16		TOTAL			8,000,218.16	

Income and Expenditure Statement for the year ending 31 MARCH 2017

Income	Total Amt. in Rs.	Expenditure	Total Amt. in Rs.
By Interest (accrued)		To Establishment Expenses (See Annexure B)	6,684
On Bank Accounts		To Depreciation	150,126
Fixed deposit with Banks	338,500	To Expenditure on object of the trust	
Bank Accounts	94,772	(a) Religious	
By Grant Received	5,123,869	(b) Educational and Medical Relief (See Annexure C)	8,989,400
By Income from other Sources		(c) Relief of poverty	
Profit on sale Bonds		(d) Other Charitable Objects	
Other receipts- (See Annexure A)	4,063,110	To Surplus carried over to Balance Sheet	474,040
	9,620,251		9,620,251

Receipts & Payments for the year ending 31 MARCH 2017

Receipts	Total Amt. in Rs.	Payments	Total Amt. in Rs.
Opening Balance	12,402	Expenses for the object of the Trust	8,620,209
Cash		Purchase of Fixed Assets	22,800
Bank	2,260,197	Investment with Bank	489,252
Grants Received	5,294,942	Decrease in Current Liabilities	915,673
Other Receipts	188,620	Increase In Assets	37
Bank Interest	103,681	Closing Balance	
Interest on Investments	118,028	Cash	7,308
Donations	3,859,856	Bank	2,320,334
Sale of Fixed Assets	40,000		
Corpus Fund Received	144,000		
Investments	274,659		
Decrease in Current Assets	79,227		
	12,375,613		12,375,613

Chartered Accountants:
 S D Medadkar & Co.
 Mr. Sandeep S Shrikhande, Partner

Sankalp Rehabilitation Trust
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SANKALP

REHABILITATION TRUST

Never, never, give up

Contact US

Registered and Administrative Office

Project Nivara-Community Care Centre

1st Floor, S. S. Bengali School, Thakurdwar Road, Charni Road (E), Mumbai - 400 002. India

Tel.: +91 22 6525 2685 email : sankalp.trust@gmail.com

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Sankalp Chhaya

(I) Bodyguard Lane Near RTO,
Mumbai - 400 034.

(II) Gokuldharm Co-Op. HSG. Soc. Ltd. (Walintine View),
Shop No. 22, Sane Guruji Marg, Tardeo, Mumbai - 400 034.
Contact No.: +91 22 6575 9545

Detoxification Centre

Sankalp Disha

Father Bobacha Ashram
Bamboo House, Near Huseini Colony, Babola Bangali Road,
Vasai (W), Thane. Contact No.: 0250-2021270