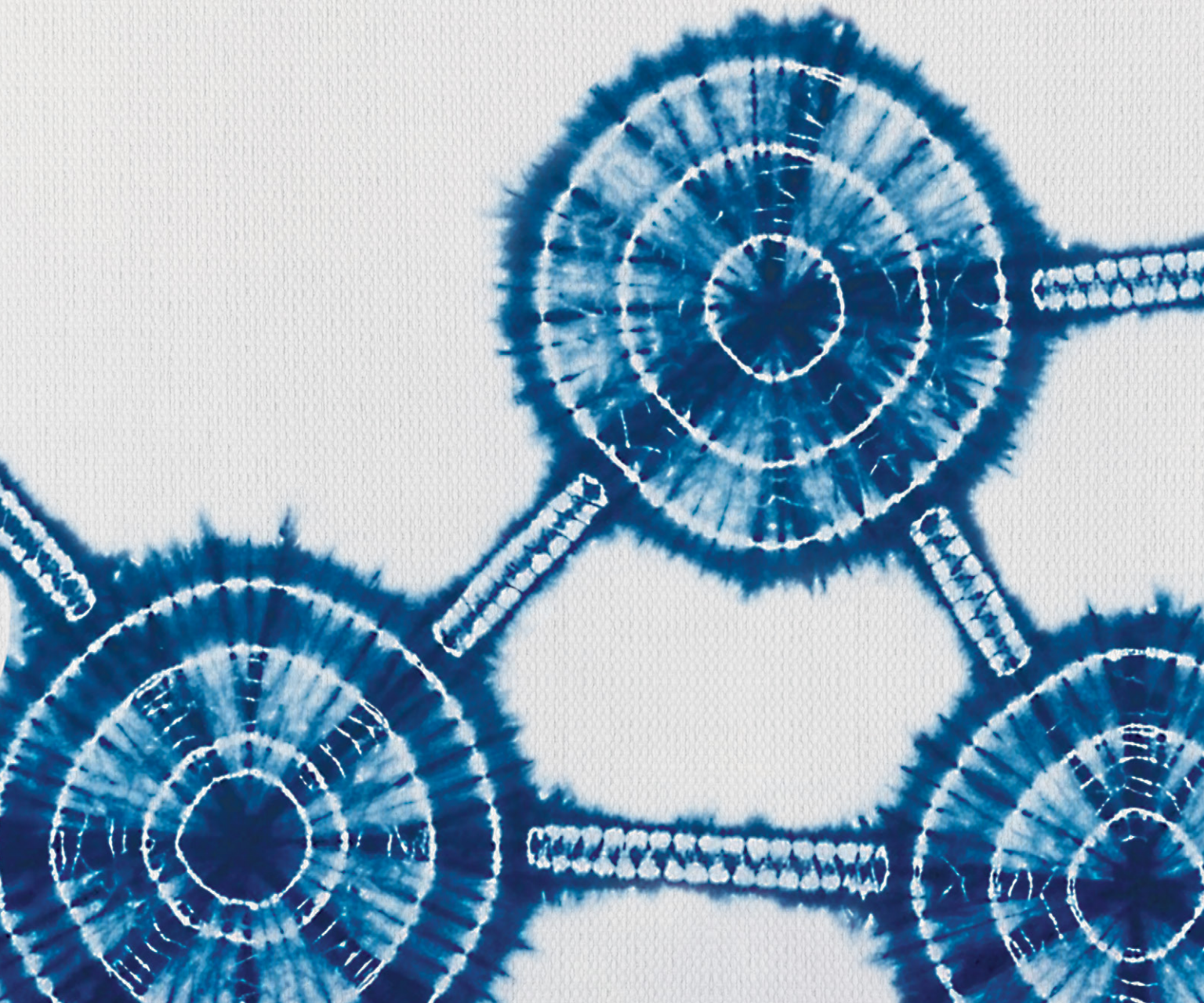




# #TOGETHER *with our* PARTNERS

ANNUAL REPORT 2025-26





#TOGETHER  
*with our* PARTNERS

*The cover illustration draws inspiration from the traditional tie-dye art of Bandhani—  
a craft where careful, intentional tying by artisans shapes outcomes with care and patience.*

*It reflects the strength of our collaborations, anchored in shared values and purpose.  
Rendered in Navodyam's signature blue, the design conveys the collective impact we are  
building together with our partners.*

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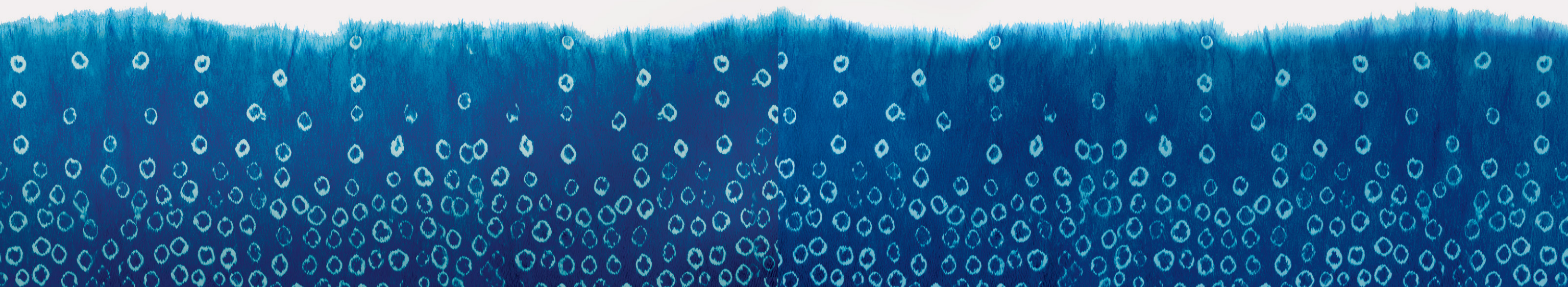
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## CO-FOUNDER'S Foreword



Dear Reader,

India's development landscape is witnessing steady economic and social progress. This has brought together a wider set of actors contributing to social development in varied and complementary ways. Within this, philanthropic efforts are playing a more considered role, with growing recognition that their effectiveness lies not only in the resources committed, but in the clarity and purpose with which they are deployed.

In practice, this is less about the extent of support, and more about how it is shaped—through long-term commitment and close engagement with organizations working on the ground. It also calls for collaboration on solutions that are rooted in context and capable of sustaining and scaling with consistency over time.

This perspective has steadily shaped how we engage through our social efforts at Navodyam—an initiative of the Sita Devi Malhotra Charitable (SDMC) Trust. At its core is a conviction aligned with our vision of a just and equitable society—that progress is meaningful only when it translates into sustained outcomes in people's lives.

Over the past sixteen years, our work has reached more than 3.8 million individuals. During this year alone, we touched the lives of 1,171,339 people across

10 states of India—530,939 directly by Navodyam and 640,400 through our like-minded co-funders. These figures reflect the scale of our engagement, but behind them are more consequential shifts in everyday outcomes—whether children are learning with greater confidence, whether healthcare is more accessible, whether incomes are becoming more stable, and whether safe drinking water is more reliably available within communities. These outcomes reflect the focused priorities that guide our work—strengthening the basic and fundamental conditions that most directly shape everyday life—primary education, primary healthcare, livelihoods, and access to safe drinking water.

In Primary Education, our work with Pratham Delhi Education Initiative across 18 municipal schools has focused on strengthening foundational literacy and numeracy for 6,465 children, while working with teachers and education officials to embed these practices within classroom systems. In Gurugram, Shiksha Bharti School, implemented by Aniket Ashray Society, continues to support 350 children from underserved communities with consistent access to quality education, with emphasis on retention and smooth transition to higher grades. In Uttarakhand, we have partnered with Rocket Learning—a new partner this year to support over 11,000 young children in structured early learning, alongside capacity building for 1,100 frontline workers, with a clear focus on strengthening learning foundations in the earliest years.

In Primary Healthcare, our long-standing partnership with the Rural Health Care Foundation (RHCF) has supported 10 of 21 centres across West Bengal, facilitating 427,004 patient visits this year along with preventive outreach reaching 78,687 individuals. The Sita Devi Malhotra Charitable Dispensary and Mobile Medical Unit in Himachal Pradesh provided care to over 24,550 patients, reinforcing the value of dependable, locally accessible services in underserved regions. In Odisha, our partnership with The/Nudge

Institute through the InSight project has addressed near-vision impairment for more than 30,000 individuals, improving daily functioning, productivity, and livelihoods.

In Livelihoods, our work with The/Nudge Institute across West Bengal and Tripura is supporting 6,000 vulnerable households through the Graduation Approach, with early signs of progress in income diversification and financial inclusion. In Odisha, our partnerships with Women Organization for Rural Development (WORD) and Prastutee are focusing on 1,039 women farmers across 20 villages, supporting a shift towards collective, market-linked agriculture, strengthening both household incomes and participation in economic decision-making.

In Safe Drinking Water, our partnerships with the Society for Leprosy Amelioration and Rehabilitation (SOLAR) and WaterAid India have expanded access to iron-free drinking water solutions across 30 villages in Odisha, through systems designed for community ownership. The fluoride mitigation pilots in Nuapada, Odisha further demonstrate that even complex water quality challenges can be addressed through locally appropriate and community ownership-based solutions.

We remain deeply grateful to our implementation partners, co-funders, and the communities we work with. Their trust, persistence, and spirit of collaboration continue to shape this journey in meaningful ways.

Looking ahead, our focus remains on staying the course on what works, collaborating with credible organizations that can carry progress forward, and deepen solutions that are impactful, long-lasting and scalable, so that they quietly and steadily improve the everyday lives of people and the possibilities they can hope for.

A handwritten signature in dark ink, appearing to read 'Rakesh Malhotra'.

**RAKESH MALHOTRA**

Co-Founder and Trustee, SDMC Trust

## MANAGING TRUSTEE'S Message



Dear Reader,

This year's annual report is titled '#Together with Our Partners,' reflecting how our work has evolved and grown over time. At its core, our work has been shaped by the people and institutions we partner with, including NGO partners, co-funders, government institutions, community members, and the community cadres who drive this work on the ground. Each of these relationships is distinct in its form, yet aligned in purpose. In our experience, partnerships are not simply a means to extend reach; they are central to how we advance our mission and purpose.

Over the years, we have come to see our work as a sum of the choices, capabilities, and commitments of the organizations and individuals we work alongside creating a 'network of shared purpose'. This year marks sixteen years of our journey. Together with 27 NGO partner organizations, across primary education, primary healthcare, livelihoods, and safe drinking water, our combined efforts have contributed

to providing better opportunities for more than 3.8 million people. These numbers are not milestones in themselves; they reflect the accumulation of many localized efforts, sustained over time. Each of our partnerships brings its own context and strengths, shaping how the work results in impact, sustainability and scale. In this year alone, we worked with 10 NGO partners.

Another important dimension of our work has been our co-funding partnerships for scale-up—an approach that extends beyond what we could achieve through our own resources alone. Over the years, together with our NGO partners, we have catalyzed additional funding through collaborations with like-minded co-funders across the private sector and government, including continued momentum this year. This is not merely about expanding funding; it reflects a shared commitment to the issues at hand and enables the work to deepen and scale further in a sustained, consistent manner.

Our partnerships have also increasingly engaged with government systems. Through our NGO partner organizations, we have collaborated with the Municipal Corporation of Delhi, the National Rural Livelihoods Mission, and State Rural Livelihood Missions in West Bengal. This year, we have also begun working with the Government of Uttarakhand on foundational learning and Government of Tripura on improving livelihoods opportunities. Working within public systems has allowed our efforts to reach populations at scale and be sustained beyond individual programs, becoming part of existing systems.

At the community level, partnerships take a more tangible form. Under our safe drinking water program, water committees manage infrastructure, usage, and local accountability. In our livelihoods work, farmer groups and Farmer Producer Companies are organizing production and market linkages with increasing independence. In primary education, teachers working with Pratham are shaping how foundational skills are taught in Grades 1 and 2, drawing from their classroom realities. In our healthcare programs, the doctors, pharmacists, optometrists and paramedical service providers continue to deliver care under demanding conditions. In each of these instances, community members and frontline teams are not just participants—they play a central role in sustaining our efforts.

As we look ahead, we will continue to focus on the needs that matter most to individuals and communities, working closely with partners who bring their unique strengths and share our sense of purpose and values. Over the years, one lesson has remained consistent—that meaningful change does not come from isolated effort, but from sustained collaboration, shaped by shared purpose and trust.

I would like to express my gratitude to all those who have collaborated with us this year, directly and indirectly, including our NGO partners, co-funders, government institutions, and community members who remain closely engaged in the work. I would also like to acknowledge the contribution of our team at Navodyam, for their efforts to make this year truly a year of #Together with Our Partners.

A handwritten signature in black ink, appearing to read 'P. Pradhan', written in a cursive style.

**PARESH PRADHAN**  
Managing Trustee, SDMC Trust

# About us

Navodyam is an initiative of the SDMC Trust, a family foundation established in 2009 by the promoters of the SAR Group. The group owns popular brands such as Livguard, Livfast, Livpure, and Lectrix.

## OUR VISION

To contribute towards creating a just, equitable, and prosperous society. Our work is guided by core values of upholding Accountability, Trust & Transparency, Empathy, Learning Agility, and Collaboration in all our endeavors

## OUR MISSION

To impact the lives of 5 million individuals by 2029 through sustainable programs and projects in the areas of **primary education, primary healthcare, livelihoods, and access to safe drinking water**, creating equitable opportunities for inclusive development. We strive to achieve this in collaboration with implementing partners and co-funders.

Our programs and projects align with the Sustainable Development Goals (SDGs), guided by the spirit of ensuring no one is left behind, and reflecting our commitment to creating transformative and lasting social impact.



## FOUNDERS AND TRUSTEES



Late Mr. Madan Lal Malhotra  
(Founder)



Mr. Rakesh Malhotra  
(Co-Founder and Trustee)



Mr. Paresh Pradhan  
(Managing Trustee)



Mrs. Nirupama Malhotra  
(Trustee)



Mr. Navneet Kapoor  
(Trustee)



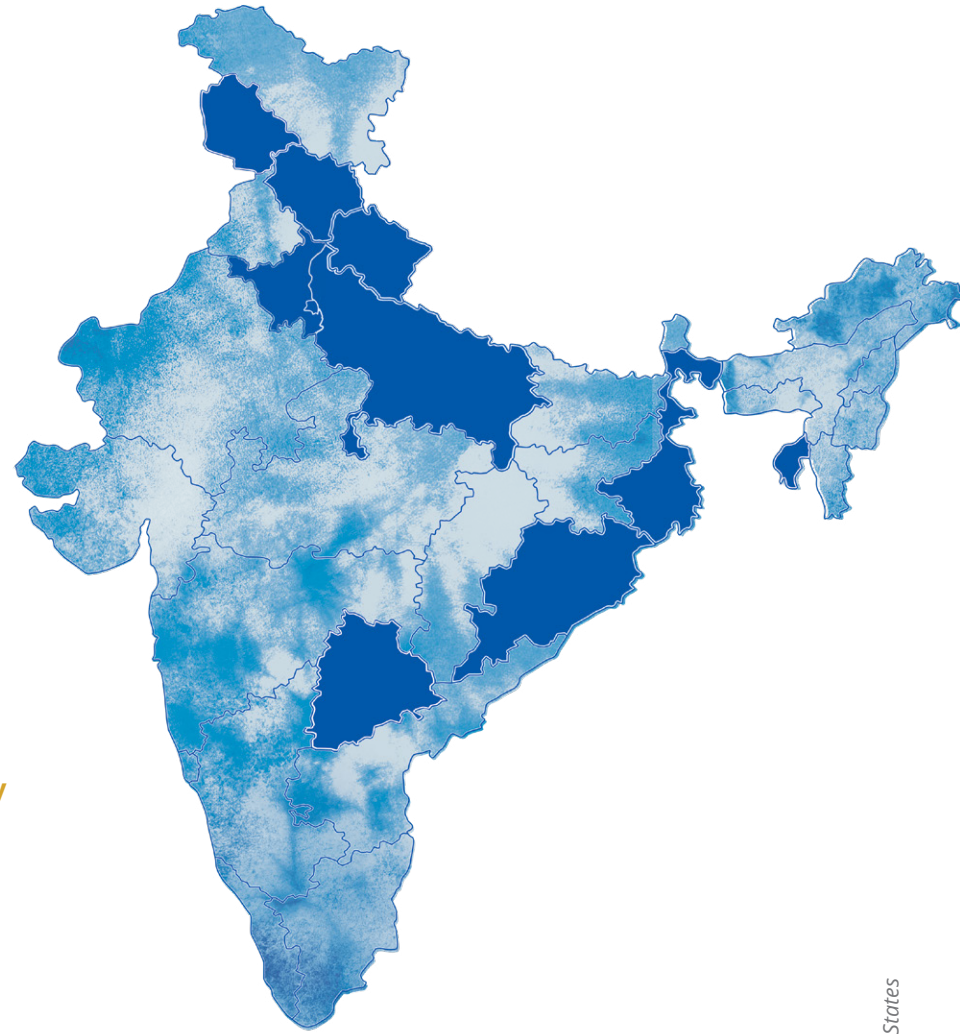
Mrs. Rashmi Nayar  
(Trustee)



## GUIDING PRINCIPLES

Our work is guided by three interconnected principles of **Impact, Sustainability, and Scalability**. We begin by building programs that deliver impact, which is measured through robust monitoring frameworks. To make this impact last, we focus on sustainability, ensuring that stakeholders take ownership and that our initiatives can continue without external support. With a solid foundation in place, we strive to scale-up successful models by working alongside co-funders.

**1.1 million+**  
*(1,171,339 People Reached)*



● Program States

Primary Education

**421,915** children

Primary Healthcare

**666,096** Patients

Livelihoods

**66,529** Community Members

Safe Drinking Water

**16,799** Community Members

**16**  
*Years of impact*

**3.8 million+**  
*(3,861,599 People Reached)*

Primary Education

656,245

Primary Healthcare

2,960,924

Livelihoods

103,046

Safe Drinking Water

141,384

OUR DIRECT REACH **530,939**

in the states of Delhi, Haryana, Himachal Pradesh, Odisha, Tripura, Uttarakhand, and West Bengal

REACH THROUGH OUR CO-FUNDERS **640,400**

in the states of Jammu & Kashmir, Odisha, Telangana, Tripura, Uttar Pradesh, and West Bengal

PRIMARY  
**E**ducation

**4** QUALITY  
EDUCATION



### *Beyond the Numbers...*

Seven-year-old Shivangi, a first-generation learner at Municipal Corporation of Delhi School, B-2, Nand Nagri, began Grade 1 with limited foundational literacy skills. She was able to recognize only a few letters and was hesitant to participate in class. Her family had migrated from Mainpuri, Uttar Pradesh, to Delhi in search of better opportunities, but her learning gaps limited her ability to fully benefit from schooling.

Through Project Ankur, Pratham introduced 'Balvachan', an activity-based learning approach focused on letter recognition, phonetic practice, and Barakhadi. Story reading, picture description, and simple writing exercises became part of her daily classroom routine, supported by regular parent engagement to strengthen learning at home.

Today, Shivangi reads words, writes simple sentences independently, and actively participates in Grade 2 with confidence, illustrating how structured early intervention can help children achieve age-appropriate learning levels and engage meaningfully with education.



SHIVANGI, 7-year-old, Delhi

our  
**FOCUS**

is to enhance  
the learning  
outcomes  
of children in  
**Primary  
Education**

**6,815**

*Children reached*

**231**

*Teachers/ Instructors*

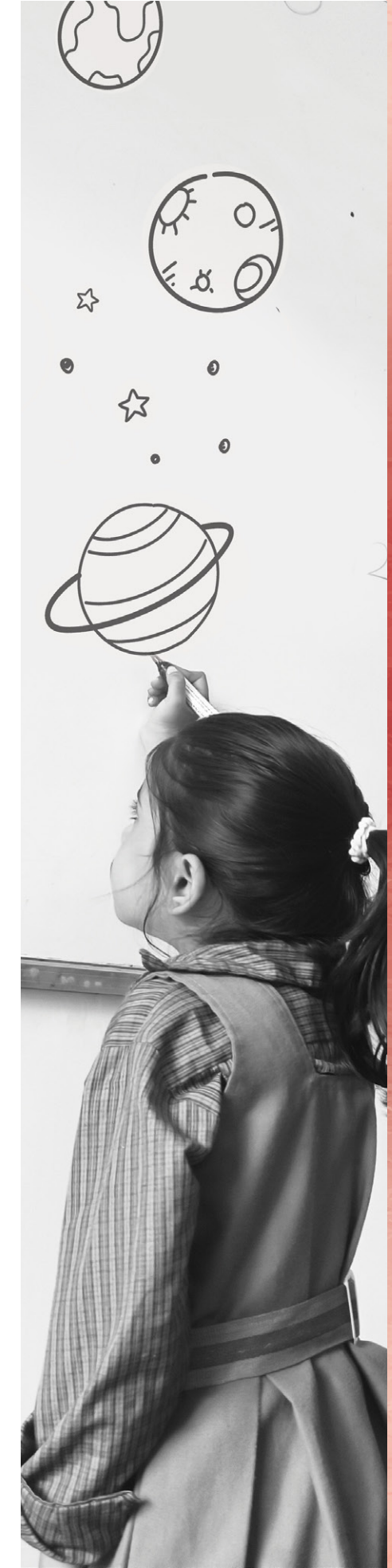
**668**

*Mothers engaged*

**19**

*Schools*

PARTNERS



our direct  
**IMPACT**



# PROJECT ANKUR, DELHI

*Bridging The Learning Gap*

## OVERVIEW

Building on the progress made during the first three years, Project Ankur continued as a partnership between Navodyam and the Pratham Delhi Education Initiative, to support foundational literacy and numeracy (FLN) among primary-grade children in 18 selected Municipal Corporation of Delhi (MCD) schools across three zones, namely Rohini, North Shahdara, and South Shahdara. Aligned with National Education Policy 2020 and the National Initiative for Proficiency in Reading with Understanding and Numeracy (NIPUN Bharat) mission, Project Ankur's approaches contribute to strengthening FLN outcomes among primary-grade children.

Now in its fourth year, the project also focused on institutionalizing key learnings and approaches, that can build and

sustain, foundational skills among children. Our partner, Pratham Delhi Education Initiative, established in 1999 as a nonprofit organization, is a leading learning organization committed to improving the quality of education. It focuses on high-quality, low-cost, and scalable interventions to address gaps in the education system.

**18** selected Municipal Corporation of Delhi (MCD) schools across three zones

## OBJECTIVES

**I. To build the capacity of teachers through structured training and mentoring support to sustain the teaching methodologies for 'Grades 1–2' aimed at improving foundational learning in 18 project schools.**

**II. To support the expansion of the 'Grades 1–2' teaching methodology across other MCD schools in the three zones, through teacher training and system-level engagement.**

## KEY ACTIVITIES

**'Balvachan' for Grades 1–2**

### Classroom-Based Foundational Learning Support

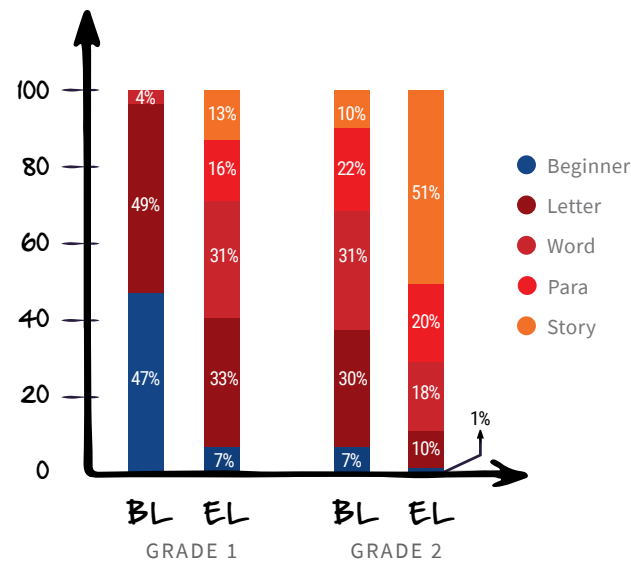
Dedicated instructors continued classroom-based support across 18 project schools, focusing on the holistic development of Grade 1 children and strengthening foundational language and math skills for Grade 2 students. The 'Leap Forward' approach called 'Balvachan'—comprising warm-up, emergent, and foundational phases—guided early literacy and numeracy development. To sustain learning levels, month-long summer camps were conducted. In total, 1,287 children were reached during the year.

### Parent and Community Engagement

School Readiness Melas were organized across all 18 schools to strengthen parental engagement, particularly for Grade 1 children. These platforms showcased children's development across five domains—physical, socio-emotional, cognitive, language, and creative—while encouraging active parental participation. This year, 864 children and their parents participated. Mothers' groups were also mobilized to support learning at home. Organized into small groups, mothers were oriented on simple, home-based learning activities using everyday materials. This year, we engaged approximately 668 mothers through Mothers' groups.

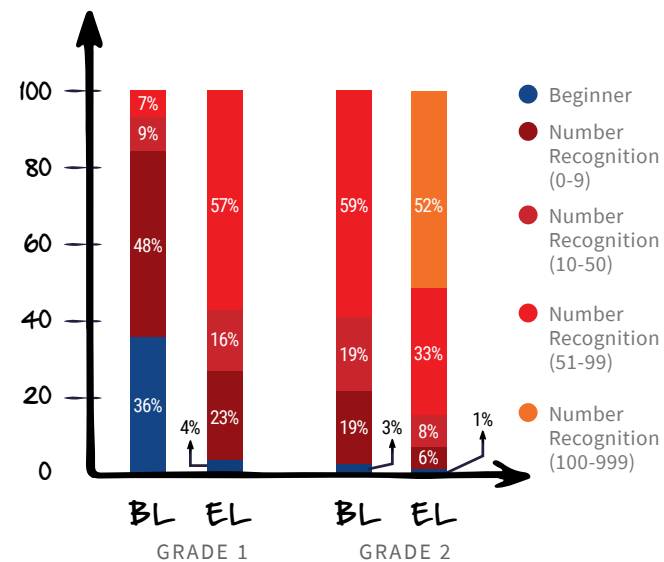


**GRADE 1&2 TOTAL CHILDREN: 999<sup>1</sup>**



**PROGRESS OF READING LEVEL<sup>2</sup>**

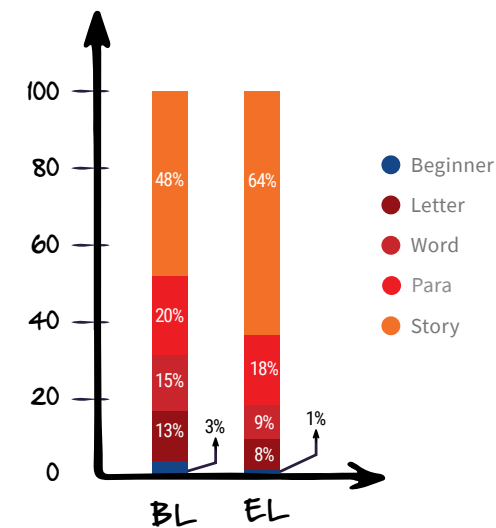
At baseline (BL) assessment, 47% of Grade 1 and 7% of Grade 2 were at beginner level (unable to recognize letter), whereas, by endline (EL) assessment, only 7% of Grade 1 and 1% of Grade 2 children remain at beginner level<sup>3</sup>



**PROGRESS OF MATH LEVEL<sup>2</sup>**

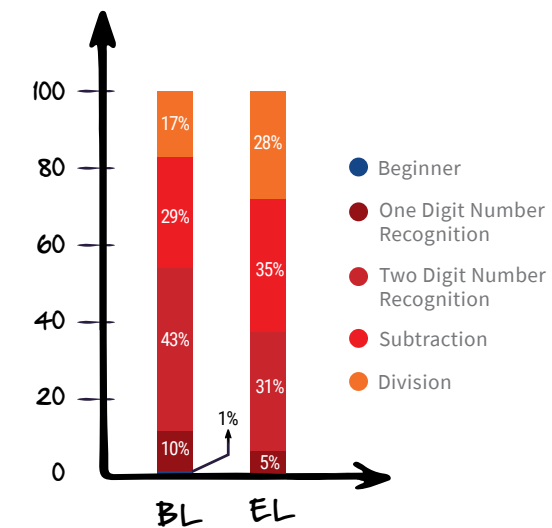
At baseline assessment, 36% of Grade 1 and 3% of Grade 2 were at beginner level (could not recognize single-digit number), whereas, by endline, only 4% of Grade 1 and 1% children of Grade 2 remain at beginner level<sup>3</sup>

**GRADE 3-5 TOTAL CHILDREN: 2,140**



**PROGRESS OF READING LEVEL<sup>2</sup>**

At baseline assessment, 68% of the children in the cohort could read either a paragraph or a story, whereas by endline, 82% could read a paragraph or a story



**PROGRESS OF MATH LEVEL<sup>2</sup>**

At baseline assessment, 29% of children in the cohort could perform subtraction and 17% could solve a division, whereas by the endline, 35% could perform subtraction and 28% could solve divisions

Unlike last year's direct intervention by Pratham instructors in Grade 3-5, the above results were achieved through MCD teachers (141) trained by the Pratham team

**'Teaching at the Right Level' for Grades 3-5**

**School-Based Reading Activities**

Supported by volunteers, activities such as storytelling, art, and role play helped sustain reading habits and strengthen children's comprehension skills. Parents' Engagement Melas were also held at the beginning and end of the academic year to assess children's language and numeracy levels using the ASER assessment tool. This year, a total of 2,140 children were assessed, while the process also deepened parental engagement through volunteers at school.

**Community Learning Platforms**

Children's clubs promoted peer learning and self-directed exploration, with 240 active clubs for Grades 3-5 and 44 for Grades 6-8. In addition, 89 community volunteers supported learning through mohalla libraries, engaging children aged 3-14 years.

**Efforts towards Institutionalization and Wider Adoption**

To embed effective practices within classrooms, the project prioritized sustained teacher capacity-building across the 18 project schools. For Grades 1-2, six training sessions were conducted for 58 teachers, with participation from headmasters, mentors, and special educators. These were complemented by practice sessions, ongoing mentoring, and the provision of teaching-learning materials. For Grades 3-5, 141 participants—including teachers and system-level functionaries—were trained to strengthen foundational learning practices.

A total of 6,465 children were reached both directly through classroom instruction (1,287 children in Grades 1-2) and indirectly through teacher training (818 children in Grades 1-2 and 4,360 children in Grades 3-5).

At the system level, efforts focused on enabling wider adoption. In alignment with the MCD, a cohort of Master Trainers was developed through a cascade approach, with 45 Mentor Teachers and Academic Coordinators trained in December.

This created a foundation for scaling these approaches beyond the project schools. The project team also maintained regular engagement with senior MCD officials to facilitate approvals and advocate for the integration of Project's methodologies to strengthen FLN outcomes at scale.



**Empowering Teachers to Strengthen Foundational Learning**

Training for Grades 1-5 teachers across 18 MCD schools was successfully completed during the year. Teachers responded positively to the content and pedagogical approaches, engaging actively in the sessions and demonstrating a strong willingness to adopt new practices. Teachers of Grades 1-2 showed notable enthusiasm, applying the activities introduced during the training in their classrooms. Continuous mentoring and targeted follow-up support by Pratham instructors throughout the year helped reinforce the application of these methods. Many teachers reported that the training was practical and contributed to improvements in classroom practices aimed at strengthening children's foundational learning.

<sup>1</sup>Number of children assessed out of the total number children intervened in Grade 1&2

<sup>2</sup>Total percentage may not equal 100%, as decimal values are excluded from the graph

<sup>3</sup>Since, the majority of Grade 2 children have undergone one year of intervention, the baseline learning levels are higher



# EARLY CHILDHOOD EDUCATION PROGRAM, UTTARAKHAND

*Building Stronger Foundations for Early Learning*

## OVERVIEW

This year marked the launch of a three-year partnership between Navodyam and Rocket Learning, working closely with the Government of Uttarakhand to contribute to early childhood education efforts in the state. The program focuses on improving early learning within the existing Anganwadi system for children aged 3–6 years in Pithoragarh district, while also providing state-level technical support across all 13 districts of Uttarakhand. The overarching goal is to strengthen foundational literacy and numeracy outcomes as children transition into primary grades.

Uttarakhand’s geography presents distinct challenges in ensuring consistent early learning support. Remote and hilly terrain, along with dispersed habitations, makes it difficult to maintain regular classroom practices and continuous support for Anganwadi Educators.

The program addresses these constraints by leveraging technology and community-based digital channels to deliver curriculum-aligned daily learning activities and strengthen Anganwadi Educator capacity through blended training and mentoring. A dedicated state-level Program Management Unit (PMU) is being established to provide structured, ongoing support for early childhood education at the systems level.

Rocket Learning, our implementing partner, is a nonprofit organization founded in 2020 to ensure access to quality early learning for every child by strengthening community-led early childhood development and public systems at scale.



## OBJECTIVES

**I. To improve school readiness for children aged 3–6 years in Pithoragarh by strengthening classroom practices and building the capacity of Anganwadi Educators.**

**II. To contribute to early childhood education systems in Uttarakhand through a state-level PMU supporting planning and monitoring across all 13 districts.**

## KEY ACTIVITIES

### Onboarding and Platform Integration

Rocket Learning introduced a statewide digital platform for Anganwadi Educators across Uttarakhand to support program delivery. WhatsApp groups were created across Anganwadi clusters to ensure coverage of all Anganwadi centres in Pithoragarh district. This was followed by a statewide YouTube Live orientation session in which Anganwadi Educators were introduced to the program’s approach, tools, and expectations.

This year, 88% of the 1,100 Anganwadi Educators were onboarded onto the platform, and 79% are actively participating. This has enabled a consistent, scalable system for delivering daily learning content and strengthening regular two-way communication between the program team and Anganwadi Educators.

### Daily Curriculum-Aligned Classroom Activities

Anganwadi Educators receive daily activity plans through WhatsApp, aligned with Aadharshila, India’s national Early Childhood Care and Education (ECCE) curriculum for children aged 3–6 years. Each plan follows an integrated theme incorporating gross motor development, fine motor skills, vocabulary building, and cognitive development within a single, theme-based learning experience. This approach supports structured daily classroom routines and promotes developmentally appropriate learning practices.

### Blended Training and Development of Anganwadi Educators

A weekly digital certification program was introduced to strengthen Anganwadi Educator capacity. Each week, Anganwadi Educators receive an instructional video and assessment quiz through the platform, enabling continuous learning and improved classroom practice. Participation is tracked through an internal dashboard, allowing for early identification of low engagement and targeted follow-up support.

The digital program is complemented by structured in-person training sessions. This year, two training modules (Introduction to ECCE and Understanding How Children Learn) were completed. These sessions reinforce concepts introduced through digital learning and focus on classroom application. Anganwadi Supervisors participated alongside Educators to strengthen mentoring support during regular field visits.

### Expected Outcomes

Over the next three years, the program aims to deliver measurable improvements in early childhood education outcomes across Uttarakhand, with a focus on the following results :

- Structured daily learning routines implemented in 95% of

Anganwadi centers in Pithoragarh, reaching over 11,000 children annually.

- 80% of children demonstrating improved school readiness, reflected in gains in foundational literacy, numeracy, and socio-emotional skills.

- 70% of Anganwadi Educators demonstrating improved

knowledge, attitudes, and classroom practices.

- Improved systems to plan, implement, and monitor quality early childhood education.

- Adoption and scale-up of early learning interventions through existing government systems.



# SHIKSHA BHARTI SCHOOL, HARYANA

*Inclusive and Quality Learning Opportunities*

## OVERVIEW

Established in 2009 by the Aniket Ashray Society, Shiksha Bharti School provides pre-primary and primary education in Palam Vihar, Gurugram. Since 2017, Navodyam has supported the school in its efforts to deliver quality education to children from socio-economically vulnerable communities.

Aniket Ashray Society is a nonprofit organization committed to improving the lives of people who have been neglected and belong to underprivileged section of society, primarily through education.

**350**  
students including  
195 girls and 155  
boys, were enrolled  
and received  
education at  
the school

## OBJECTIVES

To support the holistic development of children in the pre-primary and primary years by providing quality learning opportunities.

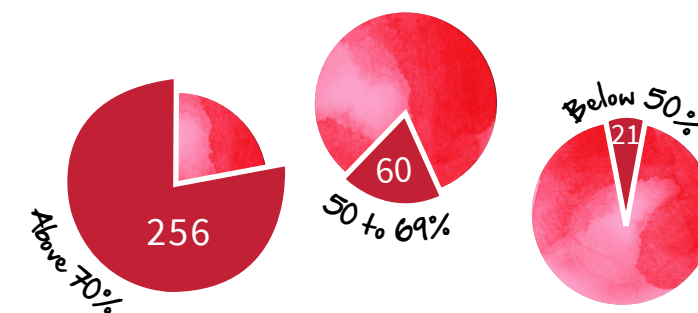
## KEY ACTIVITIES

### Ensuring Quality Educational Opportunities

Shiksha Bharti School continued to provide quality education to children from financially vulnerable and migrant communities. The school offers a supportive learning environment through qualified teachers, appropriate learning materials, and teaching approaches that integrate both modern and traditional methods. Alongside academics, students participated in art, sports, robotics, and awareness programs to foster creativity and holistic development.

The school campus maintains inclusive learning facilities, including well-equipped classrooms, a library, a computer lab, regular school meals, and adequate sanitation. This year, 350 students including 195 girls and 155 boys, were enrolled and received education at the school.

## STUDENTS SCORING 70% OR ABOVE



Of the 337 students who appeared in the annual exam, 256 scored above 70%, indicating strong overall academic performance. Only 21 students scored below 50%

### Parent and Community Participation

The school maintained close engagement with parents and the local community to support children's education. Teachers and parents remained in regular contact through structured meetings and ongoing communication to support children's learning continuity and reduce the risk of dropout. Support from families and the community contributed to a safe and positive learning environment. Students' progress was monitored through periodic assessments, with parents actively involved to support consistent attendance and continuity in education.

### Supporting Students Beyond Primary Education

The school continued to support students' transition beyond Grade 5 by collaborating with nearby government and private high schools. This year, 34 students were supported in securing admission to the next level of schooling. The school also maintained engagement with alumni pursuing education in colleges and other higher education institutions, providing guidance and mentorship as needed. Scholarship support was extended to meritorious alumni pursuing higher education after completing high school.



PRIMARY  
**H**ealthcare

**3** GOOD HEALTH  
AND WELL-BEING



### *Beyond the Numbers...*

Urmila Devi, a 74-year-old widow from Rapoh village in Una district of Himachal Pradesh, had lived independently for many years. Over time, severe fatigue, persistent joint inflammation, breathlessness, and chronic pain began to limit her mobility, leaving her increasingly dependent on others for daily needs.

Eight months ago, the SDMC Trust's Mobile Medical Unit (MMU) reached her during a village camp and found her in critically weak condition. Tests revealed severely low hemoglobin levels, along with serious joint and cardiac concerns that placed her at high risk of losing mobility. Immediate treatment was initiated, followed by sustained medical supervision and continuity of care, through the MMU's structured periodic visits to her village.

Today, Urmila Devi walks independently, with significantly reduced joint inflammation and improved breathing, and she is able to manage her daily life. Her recovery demonstrates how timely, community-based primary healthcare can restore not only physical health but also dignity, independence, and hope, particularly in remote and hard-to-reach communities where access to care remains limited.



**URMILA DEVI, 74-year-old,**  
Himachal Pradesh

our  
**FOCUS**

is to enable  
equitable access  
to quality and  
affordable  
primary  
healthcare

**481,554**

*Patients served*

**13**

*Villages reached through  
Mobile Medical Unit*

**11**

*Rural Healthcare Centres*



PARTNERS

**THE/NUDGE**  
INSTITUTE



our direct  
**IMPACT**



# RURAL HEALTHCARE CENTRES, WEST BENGAL

*Affordable, Accessible, and Equitable Primary Healthcare*

## OVERVIEW

Navodyam has partnered with the Rural Health Care Foundation (RHCF) since 2015 to expand access to quality primary healthcare in West Bengal. The collaboration focuses on delivering patient-centered primary healthcare through centres that are accessible, affordable, and responsive to the primary health needs of local communities. This year, we supported ten rural healthcare centres across seven districts of West Bengal including Birbhum, Bankura, Hooghly, Murshidabad, Purba Bardhaman, Nadia, and South 24 Parganas. Two of these centres were newly established, this year in Kirnahar, Birbhum district and Onda, Bankura district.

RHCF is a nonprofit organization based in West Bengal, founded in 2009, committed to providing affordable and accessible primary healthcare to underserved rural populations. Through its network of primary healthcare centres, RHCF bridges critical gaps in healthcare access, ensuring that quality services reach communities that need them most, closer to their homes.



## OBJECTIVES

- I. To provide affordable, patient-centered primary healthcare services through well-equipped centres offering general, eye, and dental care.
- II. To enhance outreach in rural communities to promote preventive healthcare and enable timely, proactive health-seeking behaviors.

# 427,004

patient visits were supported this year across ten centres



## KEY ACTIVITIES

### Strengthening Access to Rural Primary Healthcare

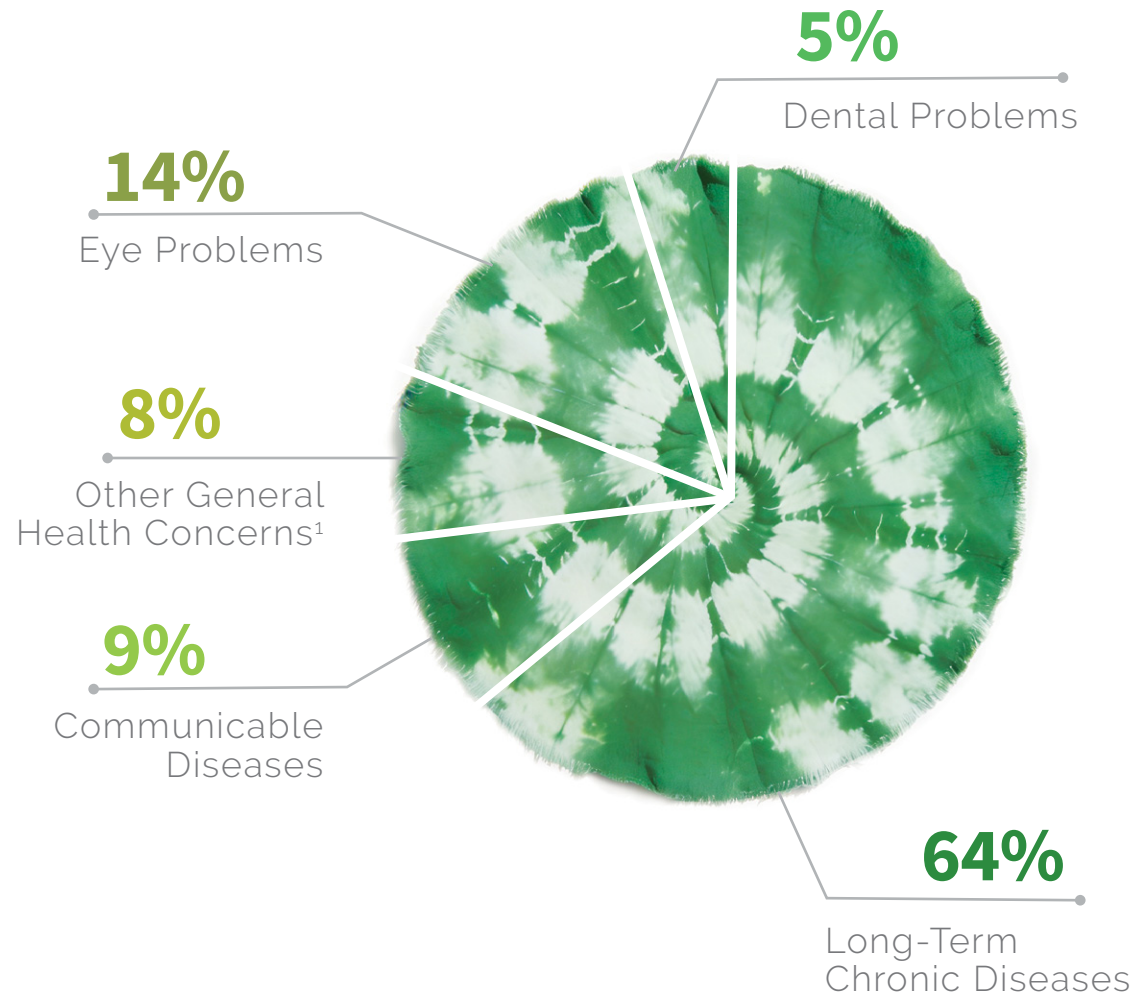
RHCF centres provide essential primary care in underserved areas where medical services are limited. Each centre is staffed with qualified general practitioners, optometrists, dentists, supported by pharmacists who manage on-site pharmacies and ensure continuity of treatment. A few centres also have homoeopaths to provide wider treatment choices to patients.

Patients receive comprehensive, low-cost outpatient care, including consultations, a seven-day supply of prescribed medicines, and access to diagnostic tests at affordable costs. Dental care, and corrective eyewear are also available, as needed. This integrated model is particularly important for patients managing chronic conditions, supporting treatment follow-up and continuity of care. This year, these ten centres facilitated 427,004 patient visits, including 31,344 reached through blood-sugar test for diabetes screening.



### Referrals for Advanced Treatment

Patients requiring specialized care, including for cataract and pterygium—are referred to other charitable hospitals for further treatment. RHCF also facilitates post-operative follow-up at its centres, ensuring continuity of care. This year, 1,306 patients were referred to other charitable eye care institutions.



**TOTAL PATIENTS :**  
**395,660**

*The majority of patients were treated for non-communicable diseases (64%), including diabetes, hypertension, and cardiovascular disease, with ongoing efforts toward patient follow-up for continued care*

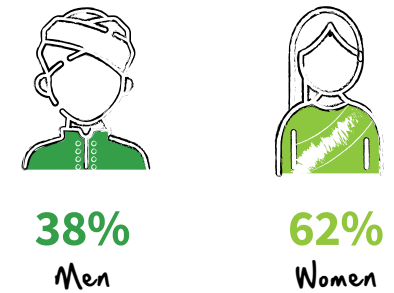
<sup>1</sup>Includes mild injuries, pain management etc., primarily treated through homeopathy



### Community Outreach Program

Complementing the centre-based services, Rural Healthcare Assistants conduct door-to-door preventive health screenings in surrounding villages. These screenings cover blood sugar, blood pressure, vision, and dental conditions, enabling early detection of communicable, non-communicable, and other preventable diseases. This year, 78,687 individuals were screened across the surrounding villages of six centres, improving awareness of timely care.

### GENDER PROFILE OF PATIENTS



*Women account for 62% of patients served, reflecting the RHCF model's ability to reach those who often faced barriers to accessing care*

### A Growing Partnership for Rural Healthcare Access

Since 2015, our partnership with RHCF has grown from supporting three centres to ten, significantly expanding access to primary healthcare for underserved communities in West Bengal. A key milestone this year was the establishment of two new centres in Kirnahar, Birbhum district and Onda, Bankura district, extending primary healthcare access to communities not previously covered under the program. Both centres became operational within the first quarter of the financial year and have been consistently delivering quality care. Today, RHCF operates 21 centres in West Bengal with support from Navodyam and other organizations, continuing its work to address gaps in access to quality primary healthcare across rural communities.



# SITA DEVI MALHOTRA CHARITABLE DISPENSARY & MOBILE MEDICAL UNIT, HIMACHAL PRADESH

Access to Primary Healthcare: Our Legacy Project

## OVERVIEW

SDMC Trust began its journey in 2009 with the establishment of a charitable dispensary in Gagret, Una district, Himachal Pradesh, to respond to the primary healthcare needs of migrant laborers, factory workers, and surrounding communities in a developing industrial area.

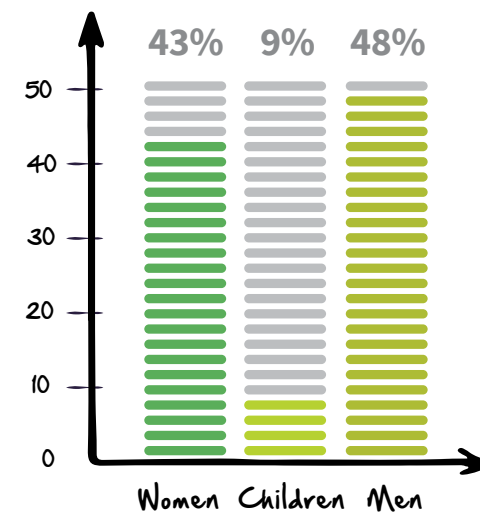
Over the years, the initiative has enabled access to primary healthcare for more than 145,000 patients through qualified doctors, free medicines, and affordable diagnostic services. This year marks 17 years of continuous service through the Sita Devi Malhotra Charitable Dispensary, reflecting a sustained commitment to affordable primary healthcare for vulnerable populations. In 2022, a Mobile Medical Unit (MMU) was introduced, to extend essential

Enabling access to primary healthcare for more than  
**195,000**  
patients since inception

primary healthcare to remote rural populations with limited access to formal health systems reaching 50,500 patients additionally. The initiative continues to be directly implemented by the SDMC Trust through a dedicated team of healthcare professionals based in Gagret, ensuring continuity of care, service quality, and the strong community trust built over many years.



## GENDER-WISE DISTRIBUTION OF PATIENTS SERVED ACROSS MMU AND DISPENSARY



Of the 24,550 patients treated this year, women (43%) and children (9%) constitute the majority

## OBJECTIVES

I. To address the local community's needs for accessible, affordable, and quality primary healthcare services through the charitable dispensary.

II. To extend essential healthcare services to remote rural geographies through a well-equipped Mobile Medical Unit.

## KEY ACTIVITIES- THE DISPENSARY

### Primary Outpatient Care

The dispensary operates six days a week, providing free consultations and medicines. This year, 10,850 patients accessed primary healthcare services—reducing dependence on distant facilities and lowering out-of-pocket expenditure for vulnerable households while ensuring timely care.

### Affordable Diagnostic Services

The in-house laboratory offers 24 essential pathological tests at subsidized rates, ensuring timely and affordable diagnosis. This year, 1,659 patients used these services, enabling early detection, faster clinical decision-making, and improved treatment outcomes while significantly reducing financial barriers.



## Emergency and Primary Clinical Care

Services such as dressing, wound care, and basic emergency procedures supported 987 patients during the year, ensuring timely response to accident-related and urgent medical needs and strengthening first-level care within the community.

# 13,700

patients accessed services closer to home—improving continuity of care, early diagnosis, and reducing access barriers

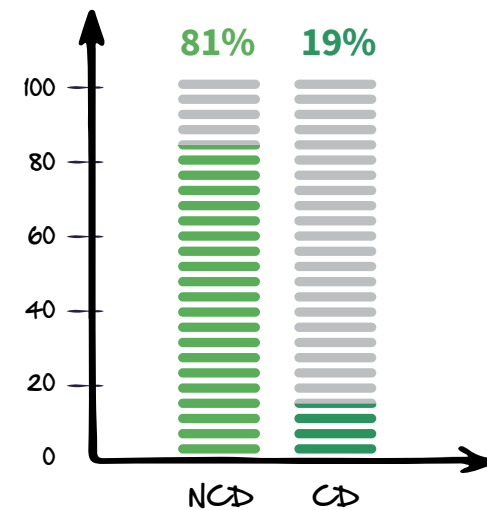


## KEY ACTIVITIES – MOBILE MEDICAL UNIT

### Healthcare at the Doorstep

The MMU addresses last-mile gaps by delivering primary healthcare directly to remote villages. Each location is visited twice a month by a team comprising an MBBS doctor and a pharmacist, with referrals for advanced care as needed. This year, 13,700 patients accessed services closer to home—improving continuity of care, early diagnosis, and reducing access barriers.

### DISEASE PROFILE OF PATIENTS REACHED THROUGH DISPENSARY AND MOBILE MEDICAL UNIT



A large majority (81%) of patients were treated for non-communicable diseases (NCD), while 19% had communicable diseases (CD), indicating a higher burden of chronic health conditions in the population served

### Free Essential Medicines

Provision of free essential medicines at outreach camps ensured timely treatment and improved follow-up, contributing to better health outcomes and reducing the financial burden on underserved populations.



### Taking Healthcare to Remote Communities

This year, the MMU in Una district expanded primary healthcare outreach across 13 villages, covering a service radius of 30 kilometers in remote areas with limited medical access. Through routine visits across Amb and Gagret blocks, the MMU provided essential diagnostic, preventive, and curative care for both communicable and non-communicable diseases, ensuring continuity of treatment and timely detection in underserved populations, while coordinating with other providers to maximize reach.



# INSIGHT PROJECT, ODISHA

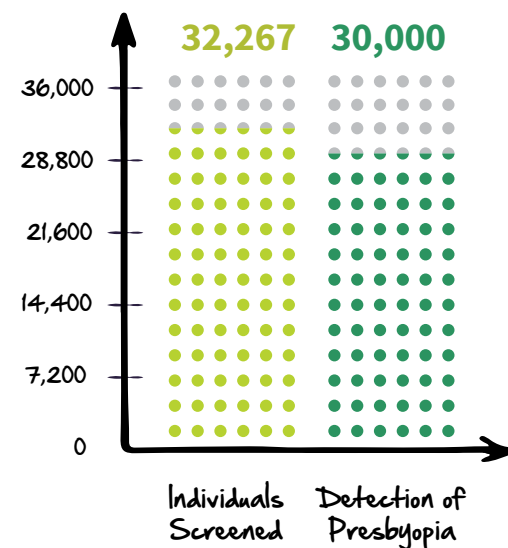
Last-Mile Access to Near-Vision Care

## OVERVIEW

In partnership with The/Nudge Institute, Navodyam supported the InSight Project to address uncorrected presbyopia among underserved communities in Keonjhar district, Odisha. Presbyopia is an age-related decline in near vision that typically affects nearly one in three adults over 30 in India. For close to 45% of this population, near vision is essential for their livelihoods, particularly in rural settings where access to affordable eye care remains limited.

Over a six-month period, the project focused on improving access to near-vision care through community-led screening, targeted awareness, and last-mile delivery of reading glasses across Jhumpura, Keonjhar Urban, and Swampatna blocks of Keonjhar district. By leveraging existing frontline systems—including Community Resource Persons (CRPs) and Accredited Social Health Activists (ASHAs), the intervention ensured that services were accessible, low-cost, and scalable within public systems.

### NO. OF PEOPLE REQUIRED NEAR-VISION GLASSES



A presbyopia prevalence detection rate of 92.97% highlights both the significant unmet need and the effectiveness of the screening approach

## OBJECTIVE

To reduce the burden of uncorrected presbyopia through community-led screening, awareness, and timely provision of reading glasses.

## KEY ACTIVITIES

### Community Cadre Mobilization and Training

A network of 565 frontline workers—CRPs from the Odisha Livelihoods Mission and ASHAs under the National Health Mission—was mobilized and trained. Of these, 489 cadres actively led implementation on the ground. Equipped with practical skills in vision screening and awareness building, they became local champions of eye health—driving demand, enabling early identification, and ensuring last-mile delivery. This strengthened community ownership while embedding the intervention within existing public systems.

### Community Vision Screening

Screenings were conducted across 416 villages spanning 65 Gram Panchayats, reaching 32,267 individuals. The approach prioritized those most dependent on near vision for their livelihoods, ensuring relevance and equity. A strong conversion rate from screening to prescription ensured that identification consistently led to action.

### Reading Glasses Distribution

A total of 30,000 reading glasses were distributed within communities, eliminating access barriers. This high-impact intervention enabled immediate improvement in near vision—enhancing individuals' ability to work, read, and manage daily tasks.

Beyond functional benefits, it restored confidence and independence, addressing a critical and often overlooked gap in rural primary eye care.

# 30,000

reading glasses distributed within communities

In summary, the InSight Project demonstrates that integrating simple, cost-effective solutions within community systems can deliver disproportionate impact—improving livelihoods at scale while strengthening pathways for sustainable, inclusive healthcare delivery.



# Livelihoods

1 NO POVERTY



2 ZERO HUNGER



5 GENDER EQUALITY



## *Beyond the Numbers...*

In Kadamguda, a tribal village in Koraput district, Odisha, women farmers have long relied on small landholdings and seasonal labor, with limited returns from ginger cultivation despite intensive effort. With no access to storage, grading, or reliable market information, most were compelled to sell to local traders at low prices, often leaving little surplus after meeting cultivation costs.

In 2025, the Women Economic Empowerment Project —led by our partner, Women’s Organisation for Rural Development (WORD) catalyzed a shift from individual struggle to collective strength. Through sustained engagement, women formed a producer group in January 2026 and established market linkages with Dhartani Farmer Producer Company. Training in cultivation and post-harvest practices enhanced both quality and market readiness.

Pooling 2,448 kilograms of ginger, 30 households secured ₹56 per kilogram, up from ₹43, while also reducing marketing costs. Beyond increased incomes, women are exercising greater agency—making informed economic decisions, strengthening leadership, and shaping more secure futures for their households.



FARMER PRODUCER  
COMPANY MEMBER  
*Koraput, Odisha*

our  
**FOCUS**

is to create sustainable livelihood opportunities and improve annual incomes of women and their households

**35,029**  
*Individuals*

**7,039**  
*Households*

**5**

*Blocks of West Bengal,  
Tripura & Odisha*

PARTNERS



**THE/NUDGE**  
INSTITUTE



our direct  
**IMPACT**



# ECONOMIC INCLUSION PROGRAM, WEST BENGAL

Strengthening Livelihoods for Economically Vulnerable Communities

## OVERVIEW

Navodyam, in partnership with The/Nudge Institute, is implementing a three-year project based on the Graduation Approach, a structured intervention designed to support the most excluded households in moving out of poverty within a defined timeframe. Anchored in a sequenced, evidence-based model, the project works closely with community women (Didis) as primary change agents, strengthening their capacity to improve household resilience, income, and agency.

Now in its second year, the project is transitioning from foundational work to full-scale implementation. It is being implemented among the Lodha Sabar community in Nayagram and Jhargram blocks of Jhargram district, West Bengal—one of the most

socio-economically vulnerable communities formally classified among denotified and nomadic tribal groups. Over three years, the project aims to support 4,000 households in building sustainable livelihoods in close collaboration with the West Bengal State Rural Livelihoods Mission.

The/Nudge Institute, established in 2015, is an action institute committed to building resilient livelihoods as a pathway to alleviating poverty. It works closely with women, farmers, tribal communities, and youth across rural development, agriculture, skilling, and economic inclusion, in collaboration with central and state government partners.

## OBJECTIVES

- I. To enable the most excluded households to graduate out of extreme poverty within the project period.
- II. To build resilience and self-reliance through social inclusion and protection.
- III. To promote diversified and sustainable income sources.

## KEY ACTIVITIES

### Building Livelihoods Grounded in Evidence and Community Priorities

A livelihood research study conducted this year across 522 households in 10 villages revealed the depth of economic vulnerability—91% of households reported annual incomes below ₹15,000, with heavy dependence on daily wage labor.

Importantly, the study also surfaced strong community preference for livestock-based livelihoods, particularly goat rearing, alongside moderate interest in pig rearing.

These insights directly informed project design, ensuring that livelihood interventions were aligned with local capabilities, cultural practices, and market realities—thereby increasing the likelihood of sustained adoption and income generation.

## HOUSEHOLDS WITH DIVERSIFIED LIVELIHOOD (Atleast Two)



Of 4,000 selected households, 95% (3,815) started two diversified livelihood activities from the project's Livelihoods Support Grants

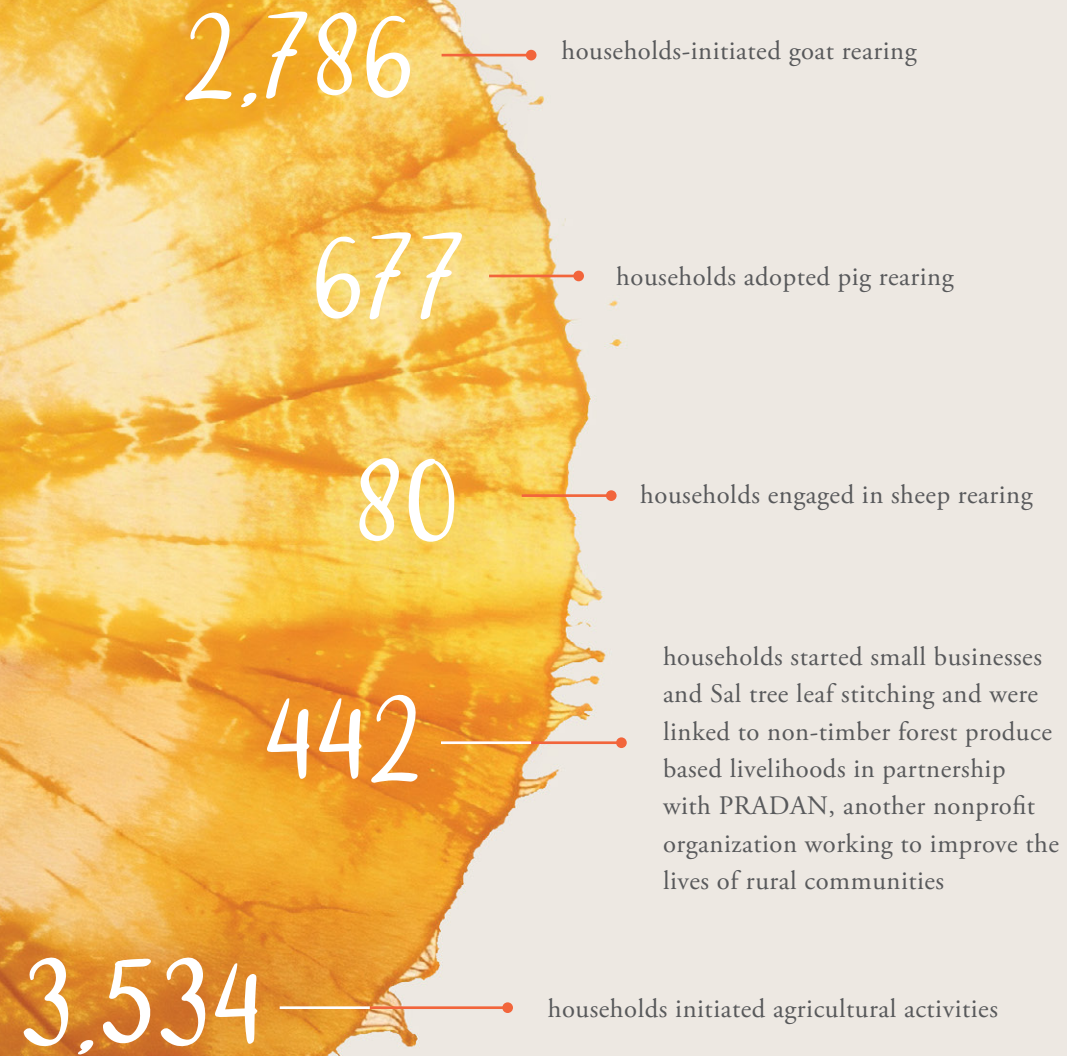


## SOCIAL SECURITY AND INCLUSIONS

No. of households enrolled in Insurance Schemes	3,028
No. of households included in Self-Help Groups, Village Organizations, Cluster Level Federations	3,213

## Enabling Income Generation and Diversification

Building on the livelihood research findings, households were supported in initiating diversified livelihood activities with the potential to generate an additional annual income of approximately ₹10,000 per household per year. During this year:



This diversified portfolio reduces dependence on a single income source, strengthens resilience, and creates pathways for sustained income growth.



## Deepening Convergence with Government Systems

The project strengthened linkages with government institutions to improve access to technical expertise and public services. Collaboration with the West Bengal Livestock Development Corporation enhanced the quality and management of livestock assets, while partnerships with the Department of Horticulture, Government of West Bengal supported the development of kitchen and herbal gardens. This convergence ensures that households are integrated into existing systems—improving sustainability and scale.

## Building Community Institutions and Agency

Sustained change is anchored in strong community systems. During this year :

499

small groups of Didis were formed to enable weekly coaching and peer learning

3,213

households were mobilized into Self-Help Groups, strengthening savings practices and financial inclusion

11

modules on food, nutrition, health, and wellbeing were delivered to build awareness and agency. These platforms are enabling women to make informed decisions, & adopt improved practices

## Scaling Economic Inclusion

The Economic Inclusion Programme has entered a decisive scale-up phase, moving from pilots to embedded partnerships with state and central governments. In Tripura, 8,000 ultra-poor households are being supported through a ₹40 crore allocation under a 90:10 Central–State model, as part of Phase IV expansion targeting 45,000 households across five states under the Samaveshi Aajeevika Yojana. Nationally, a ₹500 crore commitment—₹305.05 crore already approved for FY 2025-26—signals strong policy confidence. Strategic philanthropic capital, such as support from Navodyam, continues to play a catalytic role in program design and systems strengthening, while government funding ensures sustainability and impact at large.



# ECONOMIC INCLUSION PROGRAM, TRIPURA

*Strengthening Livelihoods for Economically Vulnerable Communities*

## OVERVIEW

Building on its partnership with The/Nudge Institute to implement the Economic Inclusion Program, Navodyam expanded its support to Tripura this year for a three-and-a-half-year engagement. Similar to the project in West Bengal, the Tripura project adapts the proven Graduation Approach to enable the most excluded households to move toward sustainable livelihoods and long-term economic inclusion. Rooted in a sequenced, evidence-based model, the initiative places community women (Didis) at the center—strengthening their capacity to improve household resilience, income, and agency.

Across Tripura, the project is designed to reach 8,000 underserved households. Navodyam directly supports 2,000 households from the Reang (Bru) tribal community in Dhalai

district, in partnership with the National Rural Livelihoods Mission and the Tripura Rural Livelihood Mission (TRLM). Dhalai presents a complex operating context, marked by ecological vulnerability, dependence on shifting cultivation (jhum farming), and limited access to diversified livelihoods. These constraints make pathways out of poverty both urgent and difficult, reinforcing the need for a structured, high-touch approach to economic inclusion.

The project strengthens state capacity through a dedicated Project Management Unit that provides technical and implementation support to TRLM. This ensures consistent adoption of the Graduation Approach, stronger systems for delivery, and the institutional capacity to sustain outcomes beyond the project lifecycle.

## OBJECTIVES

- I. To enable the most excluded households to graduate out of extreme poverty within the project period.
- II. To build resilience and self-reliance through social inclusion and protection.
- III. To promote diversified and sustainable income sources.

## KEY ACTIVITIES

### Selection of Geographies and Project Planning

A rigorous assessment of poverty indicators, community exclusion, and system readiness informed the selection of four blocks across two districts. A Detailed Project Report—articulating objectives, delivery frameworks, financing, and outcomes—was developed and submitted to the Ministry of Rural Development, aligned with state priorities and convergence opportunities.

### Institutional Alignment and Capacity Building

Eight Block Leads were onboarded to anchor last-mile delivery and trained on project design, reporting, and coordination. A state-level workshop

aligned district and block TRLM teams, while Cluster Level Federations and Village Organization leaders were engaged to ensure transparency and community ownership.

### Identification of the Most Excluded

A robust, community-led process identified 2,000 of the most excluded households in Dhalai district. Trained Community Resource Persons conducted surveys, validation meetings, and indicator-based assessments over 30–45 days, ensuring accurate and inclusive targeting.

### Community Cadre Strengthening

A frontline cadre of three Master Change Makers and 70 Change Makers was recruited through a structured process and trained through intensive residential programs. They play a critical role in mentoring households, tracking progress, and sustaining engagement.

### Preparation for Consumption and Livelihood Support Grants

To ensure timely provision of consumption and livelihood support grants to Didis, ₹7 crore was transferred to Cluster Level Federations for decentralized disbursement. This approach strengthened local institutions while ensuring the direct flow of benefits to households.

## Expected Outcomes

By the end of the project period, the following improvements are targeted for the 2,000 selected households :

**70%** of households increase income by at least 80% over baseline levels

**95%** of households are connected to formal financial services, including banks and Self-Help Groups

**100%** of households achieve food security, with at least two meals a day and improved dietary diversity

**100%** of households access at least two government entitlements, including social protection schemes

Together, these outcomes reflect a shift from vulnerability to resilience—where households are able to meet their basic needs while building the assets, capabilities, and institutional linkages required to sustain progress over time.



# ECONOMIC EMPOWERMENT OF WOMEN FARMERS, ODISHA

*Strengthening Pathways to Sustainable Livelihoods*

## OVERVIEW

In 2023, Navodyam partnered with two NGOs—WORD and Prastutee—to implement a three-year project titled, “Economic Empowerment of Women through Women-Led Vegetable Farming,” in Koraput district, Odisha. The project focuses on enhancing household incomes across Semiliguda and Potangi blocks by strengthening women-led agricultural livelihoods and improving access to structured markets.

This phase builds on a strong foundation of evidence of improved productivity, collective action, and market access. The current expansion reflects a strategic effort to deepen

impact and extend reach in collaboration with like-minded co-funders. By strengthening proven models and institutional platforms, the project aims to address livelihood challenges at scale while ensuring long-term sustainability.

The project now covers 20 villages across Semiliguda and Potangi blocks, engaging 1,039 women farmers from 1,039 households. These women are supported to enhance productivity, adopt improved practices, and participate more effectively in markets—resulting in more stable and diversified incomes.

A key pillar of the project is the strengthening of women-led collectives. Building on earlier efforts, Women Farmer Producer Groups (WFPGs) are being nurtured as platforms for collective action, while existing Farmer Producer Organizations (FPOs)—Dhartani Women Farmer Producer Company and Dakri Ghati Mahila Agro Producer Company—are being further strengthened to enable aggregation and improved market linkages.

Our NGO partners, WORD, established in 1990, collaborate with socially excluded and economically deprived tribal communities, guiding them toward self-reliance and empowerment and Prastutee—symbolizing preparing for development founded in 1997, is a nonprofit organization founded by a group of dedicated social activists committed to supporting poor and marginalized communities.

## OBJECTIVES

- I. To double the annual income of 1,000 women farmers through vegetable cultivation.
- II. To build the capacity of women farmers, strengthen women collectives, and expand market opportunities.

# 1,039

women farmers  
from 20 villages  
engaged in the  
project

## KEY ACTIVITIES

### Identification and Mobilization of Households

Twenty villages were selected through a structured assessment of income levels, landholding size, and livelihood patterns. Prastutee identified 10 villages in Sombai Gram Panchayat of Potangi block, while WORD selected 10 villages across Renga, Pakojhola, Doleiguda, and Hatoguda Gram Panchayats.

A total of 1,039 women farmers were identified as direct participants, with between 35 to 65 women per village. This was complemented by village meetings and household interactions to build awareness, strengthen participation, and ensure community ownership.

## Formation and Strengthening of Women Farmer Producer Groups

During the year, 20 WFPGs were established, each comprising between 35 and 50 women farmers. These groups enable collective planning, knowledge sharing, and market engagement.

Women farmers collaborate on crop planning and resource utilization, improving bargaining power and reducing costs. Notably, five WFPGs submitted applications to local authorities for improved drinking water access and road connectivity, reflecting growing leadership and collective agency.

## Capacity Building of Farmers

To strengthen local capacities, 60 lead farmers were trained by experienced agriculture experts and project teams. Training focused on crop planning, organic manure preparation, and adoption of improved seed varieties for crops such as potato and ginger.

These efforts are contributing to reduced input costs, improved productivity, and more sustainable farming practices. Lead farmers further serve as resource persons within their communities, ensuring continued knowledge dissemination.

## Baseline Assessment for Outcome Tracking

A baseline survey across 1,000 households established key benchmarks, capturing data on income levels, farming practices, migration, access to government schemes, market linkages, and women's role in decision-making.

This provides a strong foundation for tracking progress and ensuring that project interventions remain responsive and outcome-focused.

## Expected Outcomes

By the end of three years, the project aims to achieve the following outcomes :

100%

increase in household income through enhanced vegetable cultivation and market access

80%

increase in collective production and marketing through strengthened group-based approaches and FPO engagement

Leveraging government scheme benefits worth at least

₹1 CRORE

for participating households

30%

At least women farmers demonstrating improved skills in marketing, negotiation, and entrepreneurship

480

trained lead farmers driving sustained adoption of improved practices

Through this project, women farmers are strengthening not only their incomes but also their voice and agency within their communities. The project reflects a clear shift toward collective, market-oriented livelihoods—laying the foundation for sustained economic resilience and inclusive development.



SAFE DRINKING

Water

6 CLEAN WATER  
AND SANITATION



## *Beyond the Numbers...*

In Dehurimunda—the last village on the trail in Golabandha Panchayat, Debagarh district—53 households, primarily from Scheduled Tribe and OBC communities, relied on water sources rendered unusable by severe iron contamination, with levels recorded at 26.6mg/L.

The consequences were immediate: food spoiled within hours, time was lost to boiling water, and already fragile livelihoods were further strained. A pre-monsoon water quality test quantified the challenge, catalyzing collective community action.

A solar-powered iron removal plant, led and managed by a community Water User Committee, now ensures uninterrupted access to safe drinking water for all 53 households—independent of electricity supply.

The impact is transformative as food loss has been eliminated, women's time has been reclaimed, and children now carry safe water to school. More than anything, this demonstrates that even the most remote village need not be left behind—bringing dignity, reliability, and equity to the very edge of access.



VILLAGERS OF DEHURIMUNDA  
Debagarh, Odisha

our  
**FOCUS**

is to improve  
sustainable  
access to  
safe drinking  
water for rural  
communities

**7,541**  
*Individuals*

**1,907**  
*Households*

**34**  
*Villages with safe  
drinking water facility*

PARTNERS



our direct  
**IMPACT**



# IRON-FREE DRINKING WATER, ODISHA

Long-Term Solution for Safe Drinking Water

## OVERVIEW

Since 2017, through the Livpure Foundation, Navodyam have advanced a sustained response to iron contamination in rural Odisha—an issue that directly affects the health, time, and dignity of community members. Over this period, Iron Removal Plants (IRPs) have been installed across 136 villages in five high-burden districts, ensuring consistent access to safe drinking water for rural households and reducing dependence on unsafe sources.

This year, we deepened our commitment through partnerships with the Society for Leprosy Amelioration and Rehabilitation (SOLAR) and WaterAid India, expanding the intervention to 30 additional villages in Puri and Debagarh districts.

Village selection was guided by contamination levels and validated through community engagement, ensuring that the project reached populations with the greatest need and vulnerability.

SOLAR, founded in 1985 and known for its strong grassroots presence, has evolved from its origins in leprosy rehabilitation to a broader focus on water, sanitation, natural resource management, and climate resilience. Jal Seva Charitable Foundation—also known as WaterAid India was registered in 2010 and brings technical expertise and scale, working across states to improve access to safe water, sanitation, and hygiene. Together, these partnerships have strengthened both reach and long-term sustainability.



## OBJECTIVES

**I. To provide sustainable, community-owned filtration solutions to remove iron and other contaminants from groundwater, ensuring reliable access to potable water.**

**II. To build community capacity to manage, operate, and sustain water systems independently over the long term.**

## KEY ACTIVITIES

### Community Mobilization and Selection of Villages

Villages were selected based on iron contamination levels exceeding 0.3 mg/L, in line with Bureau of Indian Standards guidelines, alongside the availability of reliable water sources capable of meeting year-round demand. Site selection for IRPs was finalized through consultations with communities and panchayats, ensuring local ownership and accountability from the outset.

All 30 IRPs were installed at public water points to maximize accessibility for all households, particularly the most vulnerable. Each plant balances operational efficiency with community ownership—both critical for sustainability and consistent usage.

### Affordable and Efficient Technology

The IRPs deploy a robust filtration system that removes iron, turbidity, pathogens, and other contaminants. Each unit comprises two tanks with a purification capacity of approximately 2,800 litres per day, meeting daily drinking water needs of 55 to 60 households in a reliable and consistent manner.

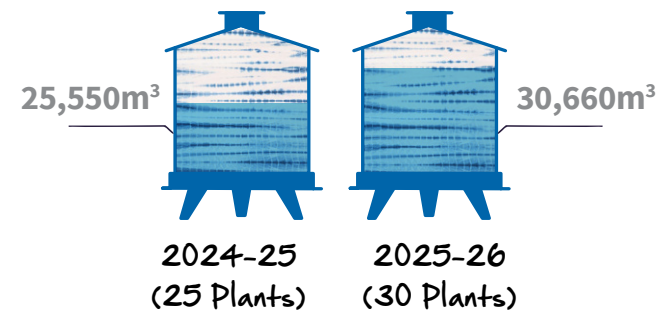
Powered by solar energy, the systems operate without chemicals, are easy to maintain, and remain functional during disruptions or extreme weather events. Developed by CSIR-IMMT Bhubaneswar, the technology combines scientific rigor with field-level adaptability, ensuring reliability in resource-constrained and remote settings.



30

IRPs have been installed in two high-burden districts this year

### ANNUAL CAPACITY OF CLEAN DRINKING WATER CREATED THROUGH IRON REMOVAL PLANTS



This year, the annual capacity of clean iron-free drinking water created was 30,660 m<sup>3</sup>—a 20% increase over the previous year

One plant serving 365 days = 10,22,000 Litres which is = 1,022 m<sup>3</sup> per year

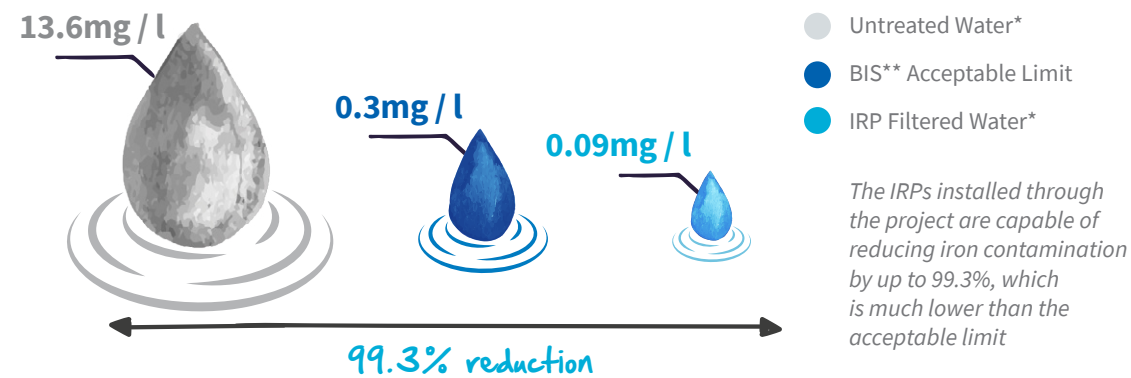
## Community Ownership

Sustainability is anchored in strong community ownership. Village Water Committees (VWCs) were established in all project villages, with women comprising over 50% of members. These committees were trained to oversee operations, manage user contributions, and ensure routine maintenance of the systems.

This year, 30 VWCs were formed and 300 community members were trained. Beyond operations, these community groups are strengthening local leadership, increasing accountability, and embedding resilience in how communities manage and prioritize their water resources over time.



### REDUCTION IN IRON CONTAMINATION OF DRINKING WATER



\*Lab test results of water samples | \*\*BIS - Bureau of Indian Standards

## Where Evidence Drives Scale

On 24 July 2025, a state-level workshop titled “Safe Water, Stronger Communities: Learnings from the Iron-Free Safe Drinking Water Project” was convened in Bhubaneswar. The platform brought together key stakeholders, including Livpure Foundation, WaterAid India, and CSIR-IMMT—to share evidence, insights, and pathways for scale.

A key milestone was the approval by the Office of the Chief Engineer, Government of Odisha, allowing installation of IRPs in tube wells with excess presence of iron across 10 districts. This policy endorsement marks a shift from isolated interventions to systemic adoption—accelerating scale, reinforcing long-term sustainability and enabling wider community access to safe drinking water.

## Independent Evaluation: Evidence of Sustained Impact

An independent evaluation of IRPs installed between 2017 and 2023 across Puri, Jagatsinghpur, and Jajpur districts provides strong evidence of sustained impact. The findings reflect not only improved water access, but also meaningful shifts in time use, gender roles, and community confidence.

Access to safe drinking water increased from 55% to

100%

with 88.9% of households reporting year-round availability

The burden on women reduced considerably, with sole responsibility for water collection declining from 83% to

49%

Daily time spent fetching water decreased from 137.9 minutes to

65.5 minutes

enabling households—especially women—to redirect time toward livelihoods and caregiving

The intervention achieved a Social Return on Investment of 36:1, increasing to

58:1

when health benefits are included

Community ownership remains strong, with

64%

of households contributing to maintenance

and 94.6% rating local governance as highly effective

Satisfaction with water quality rose significantly, from 27% to

82%

reflecting both improved taste and trust in the source

These outcomes demonstrate that access to safe drinking water is not only a public health intervention—it is a catalyst for dignity, productivity, improved well-being, and gender equity at the household and community level.



# FLUORIDE-FREE DRINKING WATER, ODISHA

*Piloting a Scalable, Community-Led Solution*

## OVERVIEW

Nuapada district in Odisha continues to face a severe groundwater crisis, with fluoride contamination levels nearly four times the permissible limit. Prolonged exposure to contaminated water has led to widespread fluorosis, significantly affecting the health, mobility, and quality of life of rural communities.

Navodyam through the Livpure Foundation and in partnership with WaterAid India, initiated a pilot in 2024 to test a sustainable, technology-driven solution for fluoride removal. The pilot introduced nano-technology-based filtration systems designed to reduce fluoride levels while retaining essential minerals in drinking water.

During the initial phase, two Fluoride Removal Plants were installed. Building on early evidence of community acceptance and operational feasibility, two additional plants were installed this year in the most affected villages. Together, these systems now provide access to safe drinking water for nearly 184 households.

Each plant serves 40 to 50 households, offering a decentralized, community-managed model that addresses both water quality and long-term sustainability. Early outcomes indicate improved access to safe water, reduced health risks, and increased community ownership—demonstrating the potential for replication in similarly affected geographies.

## OBJECTIVES

I. To provide sustainable and effective filtration solutions to remove fluoride and other contaminants, ensuring reliable access to potable water.

II. To enable community ownership by building local capacity to manage, operate, and maintain water systems independently.

## KEY ACTIVITIES

### Simple and Affordable Technology

The fluoride purification system integrates nano-material technology with natural adsorbents to deliver safe, reliable drinking water in high-contamination settings. At its core are nano-coated limestone pebbles infused with Fluorosorb—a proprietary material that selectively absorbs fluoride ions from groundwater.

Unlike conventional systems, this solution preserves essential minerals, ensuring the water remains safe and nutritionally beneficial. The unit is solar-powered and designed to operate in low-resource settings without dependence on continuous electricity. Its low-maintenance, durable design makes it both cost-effective and suitable for long-term deployment in remote areas.



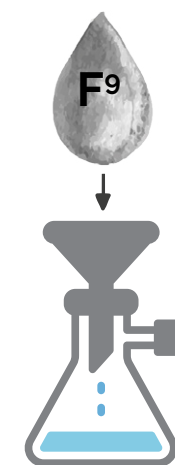
# 184

households now have access to safe drinking water through sustainable systems

The purification process follows a two-stage approach:

### Stage 1

Fluoride-contaminated water is stored with Fluorosorb-coated pebbles for 8–12 hours, enabling effective absorption of fluoride ions

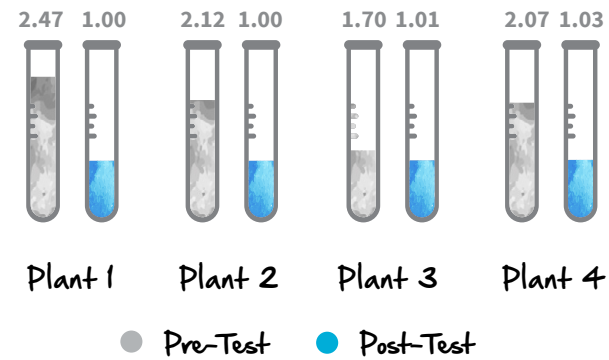


### Stage 2

The partially treated water passes through a Terafil filtration unit, which removes residual impurities, including pathogens and heavy metals



### REDUCTION IN FLUORIDE CONTAMINATION LEVEL IN FILTERED WATER



The permissible limit for Fluoride in drinking water is 1mg/L and in absence of alternate source of drinking water the limit is 1.5mg/L

All Four Fluoride plants installed over past two years, are located in communities with a single source of drinking water and no alternate source available

### Community Mobilization and Capacity Building

## 4 VWCs

were established across project villages, with

at least **50%** representation of women

Sustainability is anchored in strong community ownership. Four VWCs were established across project villages, with at least 50% representation of women to promote inclusive and equitable water governance.

Local technicians training was initiated to undertake routine maintenance and address minor repairs, reducing downtime and dependence on external support. The VWCs meet regularly to oversee operations, including user fee collection, water distribution schedules, and day-to-day plant management. WaterAid India continues to work closely with technology partners to ensure timely availability of filtration materials at the local level. This approach strengthens supply chain reliability and reinforces long-term functionality.

Together, these efforts have built a locally managed, accountable system—ensuring that access to safe drinking water is not only achieved but sustained over time.



## CAPACITY BUILDING OF NONPROFIT PROFESSIONALS ON FUNDRAISING

Our partnership with the **India Leaders for Social Sector (ILSS)** continues to strengthen leadership and fundraising capabilities across the social sector. In partnership with Navodyam, the Centre of Excellence for Fundraising is addressing the need to enhance institutional fundraising capacity among nonprofits in India.

This year, The ILSS Fundraising Program trained 78 professionals through its 10th and 11th cohorts, bringing the alumni network to 366. Alumni are integrating fundraising into organizational strategy, improving donor retention, and contributing to greater financial resilience. A key milestone was the introduction of a hybrid format—the first for the program—combining online learning with a three-day in-person convening in Delhi, enabling deeper peer exchange and cross-organizational learning. Participants brought significant experience, with an average of 13.2 years of overall work experience and 5.1 years in fundraising, reflecting the program’s growing relevance for mid-to senior-level professionals positioned to drive institutional change.

## SUPPORT FOR THE TREATMENT OF CHILDREN WITH CRITICAL ILLNESS

**The Sachin Tendulkar Foundation** works to expand access to quality healthcare for children by strengthening partnerships with government and municipal hospitals. With support from Navodyam, the Foundation collaborated with Ekam Foundation this year to enable life-saving treatment for 350 children across 18 states. Interventions included critical surgeries—primarily for congenital heart conditions—along with advanced diagnostics and neonatal intensive care support. In partnership with the Inga Foundation, a further 100 children underwent surgeries for cleft and craniofacial conditions in Bengaluru and Srinagar. These interventions support not only physical recovery but also confidence and social inclusion.

Together, these efforts reflect a continued commitment to improving equitable access to essential healthcare, with a focus on timely intervention and sustained outcomes for children and their families.

## COMMUNITY MEAL DISTRIBUTION INITIATIVE

**ISKCON** extends its work beyond spiritual engagement through social initiatives such as “Food for Life,” aimed at addressing hunger among vulnerable communities. In collaboration with Navodyam, a community-driven effort was undertaken this year to improve access to food and nutrition for underserved populations across Delhi.

The initiative reached urban slum residents, daily wage workers, elderly individuals in care homes, and children in special schools. Over 30,000 wholesome meals (*prasadam*) were distributed across multiple locations.

Meals were served in biodegradable *donas*, integrating environmental responsibility with community outreach. The effort sought to ensure consistent access to nutritious food while reinforcing values of dignity, care, and collective responsibility.

## SUPPORTING LEARNING THROUGH ACTIVITY-BASED TOOLS

**Isha Vidhya** focuses on enhancing the quality of education by creating engaging and inclusive learning environments for children. With support from Navodyam, activity-based learning cards were provided to make classroom learning more interactive and experiential.

These tools are designed to strengthen foundational learning by encouraging active participation, improving conceptual understanding, and making lessons more engaging. Teachers are supported in integrating these materials into daily classroom practices, enabling a more child-centered approach to learning. Early responses indicate strong interest from both teachers and students, with the tools expected to contribute to improved classroom engagement over time.

This initiative reflects a step toward creating learning environments where children can engage with curiosity, confidence, and joy.

# SDGS

The Sustainable Development Goals (SDGs) provide a shared global framework for addressing critical social, economic, and environmental challenges. Navodyam's programs contribute to six of the 17 SDGs, translating global priorities into measurable, community-level impact. Across our focus areas of primary education, primary healthcare, livelihoods, and safe drinking water, our programs are designed to ensure that local interventions contribute to national and global development outcomes.

## SDG TARGETS\*

## PROJECTS

### PRIMARY EDUCATION



**4.1** Ensure that all girls and boys' complete quality primary education leading to relevant and effective learning outcomes

**4.2** Ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education

- Project Ankur, Delhi
- Shiksha Bharti School, Haryana

- Early Childhood Education Program, Uttarakhand

### PRIMARY HEALTHCARE



**3.8** Achieve universal health coverage, including access to quality essential healthcare services and access to safe, effective, quality, and affordable essential medicines for all

- Rural Healthcare Centre, West Bengal
- SDMC Trust Dispensary, and Mobile Medical Unit Himachal Pradesh
- InSight Project, Odisha

### LIVELIHOODS



**1.1** Eradicate extreme poverty for all people everywhere, currently measured as people living on less than \$2.15 a day

- Economic Inclusion Program, West Bengal
- Economic Inclusion Program, Tripura



**2.3** Double the agricultural productivity and incomes of small-scale food producers, in particular women, and Indigenous peoples, including through productive resources and inputs, knowledge, financial services, markets, and non-farm employment

- Economic Empowerment of Women, Odisha



**5.5** Ensure women's full and effective participation and equal opportunities for leadership at all levels of decision-making in economic and public life

### SAFE DRINKING WATER



**6.1** Achieve universal and equitable access to safe and affordable drinking water for all

**6.b** Support and strengthen the participation of local communities in improving water and sanitation management

- Iron-Free Drinking Water, Odisha
- Fluoride-Free Drinking Water Project, Odisha

\*Note: Relevant excerpts from the SDGs target are mentioned above

## OUR PARTNERS



## OUR PEOPLE

### CORE TEAM

Paresh Pradhan  
*Managing Trustee*

Upahar Pramanik  
*Vice President*

Amrita Nayak  
*AGM & Sector Lead*

Khushbu Chourasiya  
*Program & Communications Manager*

Shakti Kumar Singh  
*Program Manager, Monitoring & Evaluation*

Santanu Kumar  
*Asst. Manager, Admin*

### PROJECT TEAM, Himachal Pradesh

Dr. Vijay Joshi  
*Chief Medical Officer*

Dr. Kanvi  
*Medical Officer*

Natrajan Sharma  
*Pharmacist*

Diksha  
*Pharmacist*

Rajeev  
*Laboratory Technician*

### FINANCIAL ADVISOR

Harsh Dhanuka

DISCLAIMER-This Annual Report is based on data available with the SDMC Trust. While every effort has been made to ensure accuracy of the information presented, the Trust is not responsible for any errors, omission, or discrepancies. Photographs appearing in this report have been shared with us by our nonprofit partners with the consent of the individuals depicted.



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