

2021-2022

ANNUAL REPORT

POPULATION SERVICES INTERNATIONAL

INDIA



Healthy life, Happy life



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FINANCIAL BUDGET

Annual Report 2021-2022

The Governing Body is pleased to share Population Services International, India's Annual Report together with the audited statement of accounts for the year that ended on March 31, 2022.

Year Under Review

We are pleased to share PSI India's financials for the Society as shown below:

Financial Results	Year ended March 31, 2022 (Rs.)	Year ended March 31, 2021 (Rs.)
Total income	25,30,03,578	32,52,40,970
Excess of income over expenditure	(1,93,99,873)	3,10,48,741

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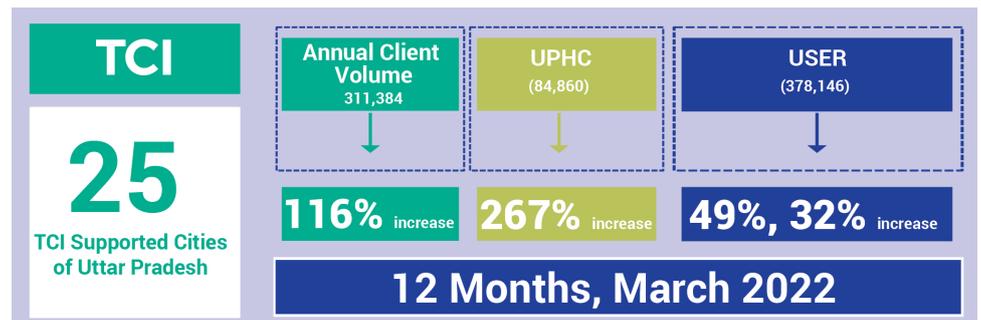
THE CHALLENGE INITIATIVE INDIA

“In the first grant, a population-based Output Tracking survey had informed an mCPR change of 3.7% points in slums. Recently published NFHS-5 findings corroborated the same, thus validating that TCI India model of strengthening existing service delivery platforms works and that high impact approaches do build those capacities in the government system required to increase the uptake of modern contraceptive methods.”

This financial year TCI continued the coaching-mentoring strategy to support government in creating resilient systems. Its “business unusual” approach gained traction from newer states – Jharkhand and Bihar. Six cities from Bihar and five from Jharkhand were finalized by the respective governments following the EOI criteria of TCI model. Besides, TCI sharpened its technical support by working with the governments of 10 cities to “graduate” them out of the model yet provisioning a low-touch on-demand coaching support for them.

Key Accomplishments

“In particular, the 25 TCI supported cities of Uttar Pradesh observed a 116% increase in annual clients availing family planning (FP) products and services. This improvement was even more significant at the UPHC level as it presented an increase of 267% from 84,860 annual client volume at baseline (2017) before TCI implementation to 311,384 annual client volume (calculated basis Gates Institute methodology) in March 2022.



The modeled number of additional users since the implementation of TCI was calculated at 378,146 with a 49% (186,890) short-acting reversible method users, 32% (119,586) IUCD users, and 19% (71,670) permanent method users. In addition, the modeled change in annualized mCPR since TCI implementation is 1.72%, which is an improvement of 0.13% from June 2021 calculated at 1.58% for the 25 TCI supported cities of UP.

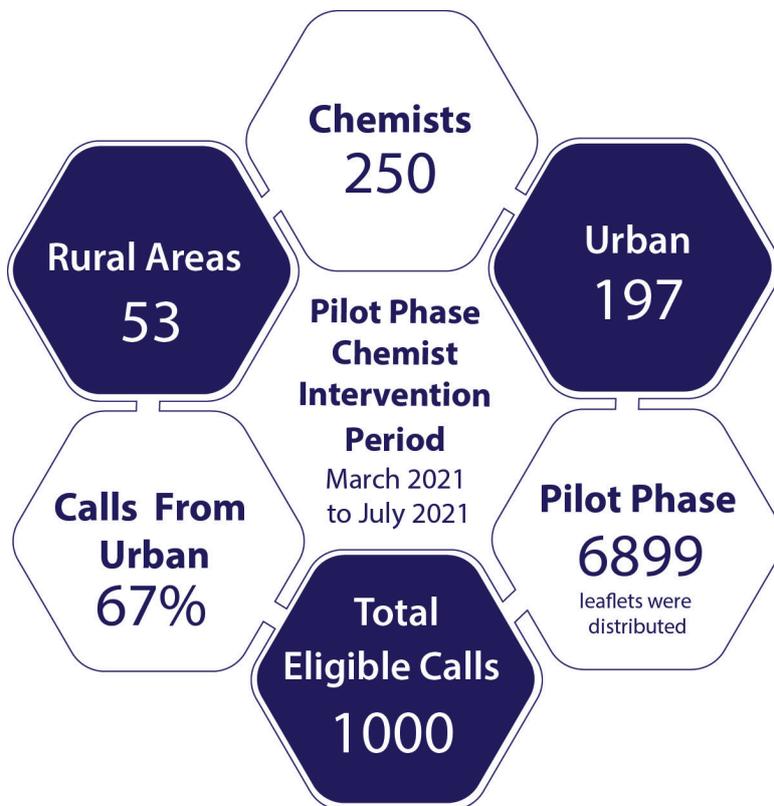
During the bridge period, coaches of graduated cities shined bright as their cities sustained results as per the HMIS data and other indicators measured by the self-assessment RAISE tool. Particularly, the allocation of budget and the budget spent on FP activities had increased in the post-graduated cities.

With support from IPAS Development Foundation, PSI India designed an implementation solution for the uptake and continuation of post-partum contraception in Agra and Lucknow districts of Uttar Pradesh with an intention to reach over 40,000 women and girls. Women self-users and pharmacists/men (partners/husbands of the girls/women) formed the primary and secondary target group of this project. The project had two target groups: the primary group consisted of women who were self-user of medical abortion (MA) drugs, and the secondary group was the pharmacists/men (partners/husbands of the girls/women).

Key Accomplishments

1. Pilot Phase Chemist Intervention

To test two incentive models (15 INR and 10+10 INR) during the pilot phase, 250 chemists were enrolled, and engagement material was provided to them for promoting the helpline among the client. Out of the total 250 chemists, 197 were in the urban areas while the rest 53 were in rural settings. During the pilot phase, 6899 leaflets were distributed by the chemists, and as a result, in total 1000 eligible calls were received at the helpline centre, out of which 67% calls were from urban areas and 33% from rural areas.



Agra chemist’s contribution to helpline calls was 80%, while Lucknow chemist’s contribution was only 20%.

“Uttar Pradesh has a share of 15% Chemists out of more than 800,000 Chemists across the country.

Agra and Lucknow, the intervention cities under Srijan, have 0.01%-0.02% of the total chemist stores. At any given point of time, each of these stores reaches roughly 1500 people in a month. Another study informs that over 11.5 million abortions are being done with the aid of MA drugs outside of the health facility.



Srijan has enrolled more than 50% of this universe of Chemists in the two cities in less than 12 months and reached over 30,000 beneficiaries. This project has demonstrated that the wrong use of MA can be prevented by educating chemists and lives can be saved by connecting clients to operational helplines and health facilities."

2. Full-fledged Chemist Intervention

PSI India started the full-fledged intervention by enrolling 1200 chemists including 988 new enrollments and 212 pilot phase chemists. Among the participants, 655 chemists belonged to the urban area and 545 chemists belonged to rural area. A total of 30,371 leaflets were distributed among the targeted users. Out of all leaflets circulated, the chemists distributed 67% leaflets. To maximize the leaflet conversion to calls, SAKSAM printed helpline number cards were kept with the MA kits, and additionally, the chemists were encouraged to take the MA client's contact number with their consent. As a result, 2769 eligible calls were received by the helpline center.

Public and Private Sector Engagement

Public Sector engagement was ensured by enrolling 95 urban health facilities (63 in Lucknow and 32 in Agra). PSI India provided refresher training to 636 Accredited Social Health Activists (ASHAs) on family planning methods.

In addition, private sector engagement was also ensured by enrolling 55 accredited Hausala Sajheedari private facilities in both the cities. The team conducted follow-up visits with identified accredited private healthcare providers to disseminate the project information and to collect family planning data for the better coverage of clients.

This project supports the government in attaining the goal of universal health coverage.

UNIVERSAL ACCESS TO QUALITY (UAQ) CONTRACEPTION

Sustainable Development Goals 5.6 mentions ensuring/addressing women's sexual and reproductive health and reproductive rights. In tandem, PSI India is implementing "Universal Access to Quality (UAQ) Contraception" project or SARAL (meaning 'simple' in Hindi) in Agra, UP which enables a comprehensive, client-centric, consumer-empowering environment, with a focus on youth and low-income clients.

Key Accomplishments

Broadly, UAQ focuses on demonstrating strategic purchasing as an instrument for universal access to family planning (FP) services. It also propels a client-centric model at the city level. By March 2021, the project co-created a plan with NHM, U.P. to:

- A) Mobilize eligible couples and enroll them in the FP benefit package and promote it as well,
- B) Reassess the network of accredited FP services providers in the project geography,
- C) Create a network of pharmacies for supply of FP products to the beneficiaries of the FP benefit package,
- D) Establish a verification mechanism for FP beneficiaries and FP products and service providers,
- E) Replicate Hausala Sajheedari in Madhya Pradesh and Odisha.

PSI India made progress in collecting information related to community front Line workers (ASHAs), UPHC, population, work area etc.

"People generally seek health services from both public and private sector. A package of health services combining both the sectors can reach mass population and it is at scale where desired modern contraceptive prevalence change rate for India can be achieved. Under UAQ, PSI India has completed eight months of implementation and demonstration. We hope this will establish strong evidence to scale up the initiative."



“Samagra program’s relentless efforts have resulted in improvement in FP and MCH indicator post-COVID-19. It has helped 18 UPHCs in receiving Kayakalp and NQAS accreditations.”

Project Samagra is a USAID supported project, which aims to strengthen the existing urban health system to deliver quality, affordable, accessible, and equitable health services to the urban poor population including adolescents and vulnerable marginalized populations in Indore. PSI India’s model of technical assistance supported the local government in reshaping the entire health system, which disarrayed in the times of COVID-19 pandemic and had negatively affected maternal child health, FP, and outreach services.

Key Accomplishments

1. Improved Quality Standards of Health Facilities and Services

With PSI India support, four UPHCs received NQAS certification and 18 UPHCs received Kayakalp certification. To top it, one of the UPHCs in Indore also received a cash prize of Rs 200,000. In addition, the Department of Health with support of PSI India standardized the SoPs and checklists of Kayakalp and NQAS and has built staff capacity based on these standardized guidelines.

2. Upgraded Maternal and Child Health Services at the Facility and Outreach Level

PSI India assisted in Pradhan Mantri Surakshit Matritava Abhiyan (PMSMA) services in 29 health facilities, where over 1700 ante-natal checkups were done. Of these, 110 women at high risk were identified and provided with a therapeutic dose of iron sucrose. The team facilitated 678 UHND sessions during the pandemic, ensuring that COVID-19 protocols were followed during the sessions and that messages regarding COVID-19 vaccination were percolated along with FP and immunization-related counseling sessions.

3. Support in Organizing Various Outreach Activities

The team supported in organizing key community events like World TB Day, Adolescent day, and National Immunization Day. The purpose of such events was to involve the community and frontline workers/counselors to ensure a positive change in the social and behavioral aspects of the provider and the beneficiaries. Moreover, additional COVID-19 vaccine-related counseling was done to reduce “COVID-19 vaccination hesitancy”.



AFTER THE FLUSH (ATF)

Unsafe disposal of fecal waste is a staggering issue in India. In Urban areas, it is estimated that 81% of human excreta is unsafely disposed, which leads to contamination of 90% of surface water. The census data show that 65% of Indian cities do not have the infrastructure and systems in place for the safe collection, disposal, and treatment of fecal sludge. Ironically, the available treatment infrastructure is also underutilized. For addressing the sanitation and waste disposal challenges, a model has been introduced by PSI India in two cities of Uttar Pradesh and Madhya Pradesh under which strategic activities were to organize/map private sector service providers, build their capacities, and integrate these providers into the system to create awareness among citizens.

Key Accomplishments

1. Overall improvement in Safe Disposal Practices and Branding of Tank Operator Business



The intervention could bring a significant improvement in the safe disposal process in the intervention cities of Lucknow and Kanpur. PSI India played a major role in bringing together, the private septic tank operators (PTO) and Municipal Corporation for safe collection and disposal of fecal sludge. This positive association between the public and private sectors helped many PTOs know their rights as entrepreneurs and gave them confidence to generate more revenues. The intervention not only benefitted the fecal sludge management (FSM) market but also elevated the social acceptance of the business by empowering the service providers to ensure the provision of quality customer services.

2. Development of a Rigorous Tracking System for Monitoring the Septic Disposal Activities

PSI India worked with the Jalkal Vibhag, Municipal Corporation to revamp and create a fully functional helpline and a call center to provide a mechanism to provide quality customer service. Besides, with PSI India's support, the government ensured that all treatment plant locations had geo-tagging and all the tankers in Kanpur and Lucknow had a GPS tracking system. Of the total 126 PTO workers, 81 PTO workers had already enrolled in one of the government social security schemes.

“PSI India worked with the urban local bodies and shared the economics of limited disposal locations and the effects on tanker operators leading to unsafe disposal. This resulted in the ULBs agreement on opening 15 feasible disposal locations in Lucknow and five in Kanpur.

The ATF model can be replicated in around 4000 cities where there is existing treatment infrastructure or the government has plans to provide the same soon.”



SAFE DISPOSAL



Jan - June 2021
38.85 Million Litres
July - Dec 2021
44.52 Million Litres

17.29%
Increase



Jan - June 2021
23.8 Million Litres
July - Dec 2021
53.3 Million Litres

130%
Increase



Jan - June 2021
1.07 Million Litres
July - Dec 2021
1.16 Million Litres

PSI India ATF model has resulted in increase in safe disposal by 30 times in Lucknow, 22 times in Kanpur, and six times in Pithampur.

Overall, an enabling environment for the tanker operators has been created to perform their business with dignity and without fear.

ATF Initiative has also supported the ULBs in demand aggregation of cleaning services by establishing a toll-free call center and tracking the tanker operators through geo-fencing of the disposal locations and fixing of GPS in the vehicles.

Lucknow

Though intervention in Lucknow started late but due to- the available learning's from Kanpur, its safe disposal increased significantly from the 38.85 million liters (Jan-June 2021) to 44.52 million liters (July-Dec 2021). This is a 17.29% increase from the previous reporting period.

Kanpur

Safe disposal in Kanpur also improved significantly from the previous reporting period. By Dec. 2021, 53.3 million liters of fecal sludge had been collected against 23.8 million liters collected between Jan and June 2021. This was a remarkable achievement of 130% increase from the last reporting period. As period of engagement in Kanpur was for longer period, so the city is showing excellent results.

Pithampur

In comparison to Kanpur and Lucknow, this city of Madhya Pradesh is small in size and population. Therefore, its results cannot be compared with that of UP. cities. Yet, PSI India's model is turning out to be a great demonstration model for the state of Madhya Pradesh as safe disposal of fecal sludge in Pithampur reached up to 1.16 million liters by Dec 2021.

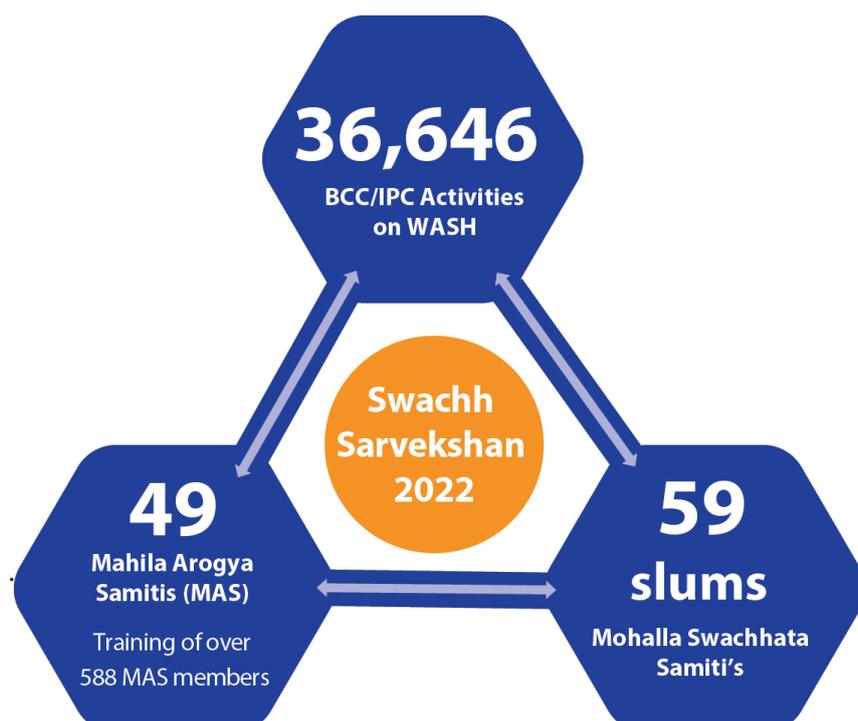
SWACHH UDAY

With support from HCL Foundation and in coordination with Lucknow Municipal Corporation, PSI India successfully implemented Swachh Uday program in 16 wards of Lucknow city. This project focused upon building a sustainable enabling environment of fecal sludge, and waste segregation practices in Lucknow, improving access to potable water supply systems, and increasing segregation of waste (dry and wet) at the household level as per the Swachh Bharat Mission norms.

Key Accomplishments

The project carried out a 'WASH needs assessment' of 16 neighborhoods and also conducted over 900 focus group discussions across 49 slums. These were documented in a report and submitted to the Municipal Commissioner, Lucknow Nagar Nigam to draw his interest on how Lucknow can mitigate these with the support of PSI India and ultimately improve its ranking in the state in Swachh Sarvekshan 2022. Besides, the project created audio-visuals on three thematic topics, to improve awareness among the community. Through this, the project reached out to 36,646 individuals through BCC/IPC activities on WASH improvements in the slums. Additionally, mapping of 600 influential community stakeholders was done for the creation of Mohalla Swachhata Samitis (MSS) across all 59 slums. These stakeholders were trained and empowered for coordinating with Lucknow Nagar Nigam representatives for improving the WASH situation of their respective slums. The project also reached out to forty-nine Mahila Arogya Samitis (MAS) trained 588 members and activated them. This engagement was a pilot strategy, which later resulted in better coordination for sanitation-related activities in respective slums. Hence, PSI India demonstrated yet another successful strategy under Swachh Uday that can be scaled up by the government.

"Behavior change is challenging. It is even more peculiar when it comes to WASH initiatives. Working with the government, PSI India through Swachh Uday has demonstrated a comprehensive BCC strategy in 16 wards of Lucknow city. This public-private strategy has reached more than 80% population (36,646 individuals) through BCC/IPC activities on WASH improvements and shows potential of scale up by the government."



“2873 patients received door-step delivery of the FDC drugs. This number though small speaks volume as it is for the first time ever that a model has effectively worked for a door-step delivery of TB drugs to poor patients by connecting it with the public supply chain of TB drugs. True Power of Digital Solutions!”

PRIVATE SECTOR PARTICIPATION PLUS (SHOPS+)

PSI India contributed to National TB Elimination Program’s strategy by promoting sustainable health outcomes through implementing Private Sector (SHOPS) Plus project. The scope of the project was to improve the access to quality TB services by integration of TB services with urban public health departments. SHOPS plus also assisted in developing of state-specific strategic plans for TB elimination through the private e-pharmacy mechanism. E-pharmacy was an innovative approach in which anti-TB drugs and diagnostic services were provided at the doorsteps of the poor patients staying at the urban areas. The pilot project with Med life was rolled out at the end of December 2019 in three cities of Madhya Pradesh; Jabalpur, Bhopal & Indore through the NTEP-mapped private providers.

Key Accomplishments

SHOPS Plus project harnessed technology to increase access to TB services to patients in the private sector. The SHOPS plus model included activities such as home sputum collection, promoting private notification, and follow-up messaging. TB services provided at doorstep helped a lot of patients to access the TB services and adhere to the treatment regimens and they also reduced the fear of being stigmatized by the community.

PSI India’s e-pharmacy model was approved for the proposed program implementation plan (PIP) of MP NHM, 2021-2022 and a state-specific plan for MP was already disseminated on the MP NHM website. The model includes sample collection, transportation (SCT) services for patients within the 2-4 hours of order placement. Also, these samples were being tested at standardized CBNAAT labs. Over 2873 patients received doorstep delivery of the FDC drugs till August 2021, while the total number of drug deliveries done by Medlife under the e-pharmacy model was 8176. Since its inception in December 2019, over 1000 new TB patients were benefited and received services from the public sector enrolled in the e-pharmacy model for free drug delivery from July 2020 to March 2021. To maintain the patient registry, the project ensured that the verified and updated data of patients were uploaded on the government Nikshay portal as well as Nikshay Aushadhi portal with the help of district M&E consultants from the NTEP program. The project was successfully closed this year.

Sample collection, transportation (SCT) services for patients within the 2-4 hours of order placement

Over 2873 patients received doorstep delivery of the FDC drugs till August 2021

total number of drug deliveries done by med life under the E pharmacy model is 8176.

Since its inception in December 2019, over 1000 new TB patients benefited and received services from the public sector enrolled in the e-pharmacy model for free drug delivery from July 2020 to March 2021

PSI India’s e-pharmacy model
Program Implementation Plan (PIP) of MP NHM, 2021-2022

UTKRISHT

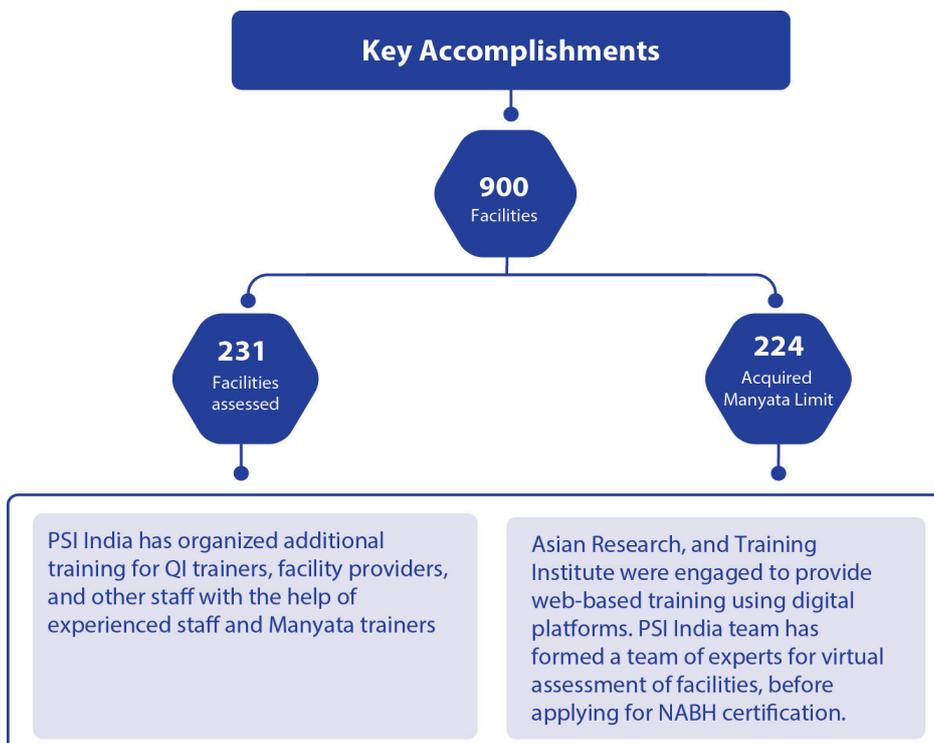
In India, to improve maternal and new-born deaths, access to quality maternal and new-born services is the key. With a vision of improving the quality of services in public/private facilities, PSI India in collaboration with co-partners (Palladium, HLPPT, UBS Optimus Foundation, Mathematica, MSD for Mothers, and USAID) launched a project "Utkrisht." The scope of the project was to facilitate private facilities to acquire Matryta Quality certification and accreditation, with a purpose to upgrade the standards of healthcare services provided by small private facilities to a level so that they can provide quality intrapartum care through increased adherence to essential childbirth practices. The project also assisted several health facilities to get quality accreditations.

Key Accomplishments

During the project, over 900 facilities were mapped, which is a remarkable achievement for the project. Around 231 facilities were assessed and 224 were engaged with the project, while technical assistance was provided to the SCHO s from the quality committees who were responsible for monitoring the quality of outcomes beyond the project life cycle. COVID-19 has impacted the project, as it delayed the verification process. By May 2021, all the facilities had acquired Manyata certification. PSI India had organized additional training for QI trainers, facility providers, and other staff with the help of experienced staff, Manyata trainers and Asian Research and Training Institute who provided web-based training at that time. PSI India formed a team of experts for virtual assessment of facilities before applying for NABH certification.

"Improving existing infrastructure saves valuable resources and also makes the system efficient. It brings confidence to those who want to seek services from these places.

Utkrisht has ably lived up to this objective as it mapped over 900 health facilities and worked with about 185 facilities and helped them acquire Manyata certification."



HYGIENE & BEHAVIOUR CHANGE COALITION (HBCC)

“Over 1,78,304 people were reached out and sensitized on preventive COVID 19 behavior and hand washing practices.

1,412 village health workers and other village volunteers were trained”

“30,00,000 people were contacted through mass media activity and 1,00,000 mobile users have received

GIF messages on hand washing steps.”

In response to the COVID-19 pandemic, Unilever and the UK government established a public-private partnership to respond to the COVID 19 pandemic. ; PSI India worked with the community to influence behavior change on hand washing and hygiene practices. The HBCC project was implemented in Chittoor district with an aim to reach 1,00,000 individuals and provide them hand washing and COVID preventive messages.

Key Accomplishments

PSI India successfully reached 78,000 people through targeted messages on COVID-19 and hygiene. Over 9200 people were reached and engaged through diverse digital and social media platforms such as WhatsApp, Facebook, Twitter, Instagram, YouTube, etc. WhatsApp helped to reach out to maximum audiences, and 77000 people were reached out for one-on-one to group meetings. Considering the sustainability of these activities, 396 health facilities and community health workers were trained in interpersonal communication skills. Successful strategies under the project were: engaging the Education Department to carry out awareness campaigns on hand washing and hygiene practices among school children. orienting the municipality staff on cleaning practices of community toilets, reaching out to ward councilors and Mandal Development Officers (MPDOs) of 22 mandals (divisions) to seek their contribution in increasing the reach of the HBCC initiative. The medical officers and the staff of PSI India made progress on all the process outcomes in both Indore and Chittoor and trained 396 healthcare facility staff and the community.



1,78,304	1,412	30,00,000	1,00,000
people were reached out and sensitized on preventive COVID 19 behavior and handwashing practices	village health workers & other village volunteers were trained	people were contacted through mass media activity	mobile users have received GIF messages on handwashing steps



Besides, 1,412 health workers were trained across 600 locations on COVID-19 hygiene. In Chittoor, over 3.4 million people were reached and engaged with targeted messages on COVID-19 and hygiene through various social media and mass media platforms. Over 1400 ASHA, ANM, Anganwadis, village volunteers, and sanghamitras spread awareness on cleanliness and hygiene. More than 92,820 contacts were counseled by tele-counseling during this period. Across 120 intervention villages, digital wall painting of hand washing steps was installed in more than 600 locations, including panchayat office, schools, anganwadi centers, milk centers, and other congregation points in the villages. Over 1,00,000 mobile users had received hand washing steps in GIF format and its reach was tele-validated by reaching out to 6000 contact numbers . A mass media password campaign was also rolled out through All India Radio which was successful in reaching out to 30,00,000 in Chittoor district.

Headcount as on **March 31, 2022**

143

Payroll Employees

8

Consultants (part time)

1

Short time consultant

0

Volunteers

152

Total

Zero ICC Complaints : Internal Committee of PSI India did not receive any sexual harassment complaints in the period April 2021 - March 2022.



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