

ANNUAL REPORT
2025-26

One Mission
Many *Partners*
Stronger Futures

SNEHA®
RAISING HEALTH FOR ALL



ABOUT SNEHA

SNEHA (Society for Nutrition, Education and Health Action) is a non-profit organization working to improve health, nutrition and safety among marginalised urban informal settlements. SNEHA follows an integrated approach that seeks to break the intergenerational cycle of poor health through interventions at the various life stages of adulthood, pregnancy, childbirth, early childhood, and adolescence to bring about improvements in health and nutrition.

SNEHA works with vulnerable communities, public health and safety systems to develop evidence-based models to address urban health challenges. Our programmes are directly implemented through field-level interventions in and around Mumbai and through partnerships with other organisations across India.

SNEHA works primarily on the following Sustainable Development Goals (SDGs)



VISION

Healthy Women and Children for a Healthy Urban World

MISSION

We work in partnership with communities and health systems, building effective and replicable solutions, empowering women and their families in urban slums to improve their health.

VALUES

Excellence
We achieve excellence by consistently striving for quality through seeking the best in knowledge, practice and outcomes; while holding on to our values of discipline, adaptability and humility.

Commitment
We are dedicated to our work. It is seen through our passion, initiative and involvement.

Trust
We believe in integrity, reliability, freedom, and maintaining transparency.

Nurture
We create the environment and provide opportunities for growth by constantly seeking and amplifying what works, for the individual, the organisation and the society we serve.

Valuing every person
We respect every person, recognise individual strengths and capacities, believe in partnerships and embrace diversity.

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KEY IMPACT

112%

improvement in pregnant women registering in the first trimester (early registration) for antenatal care services. (from 33% in 2021 to 70% in 2026)

52%

reduction in maternal anemia. (from 29% in 2021 to 14% in 2026)

37%

reduction in malnutrition (stunting) among children 0-3 years of age. (from 35% in 2021 to 22% in 2026)

50%

increase in full immunization in children aged 0- 2 years, from 62% in 2021 to 93% in 2026

83%

Improvement in contraceptive prevalence rate among married women of reproductive age: up from 41% in 2021 to 75% in 2026

82%

adolescents identified with mental health concerns showed improvement after receiving protocol based intervention from Clinical Psychologist (2025-26)

78%

survivors of gender-based violence reported a reduction in violence levels (2023-26)

98%

patients/ caregivers reporting satisfaction with physical symptom management by the palliative care team (2025-26)



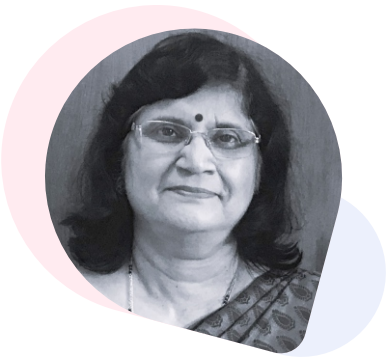
SNEHA GOVERNANCE- TRUSTEES



Dr. Armida Fernandez (Founder and Chairperson)



Ms. Mary Patricia Soans



Dr. Jayashree Mondkar



Dr. Ruchi Nanavati



Mr. R. Sriram



Mr. Rakesh Singh



Mr. Pradeep Mukerjee



Mr. Nitin Nayar

Scan QR to Know More

RECOGNITION FOR OUR FOUNDER

The year 2026 has been a particularly proud year for SNEHA as our Founder, Dr. Armida Fernandez, received two prestigious recognitions for her lifelong contribution to healthcare and society.

Dr. Armida was conferred the Padma Shri, one of India's highest civilian honours, recognising her decades of work in neonatology, maternal, infant and child health, nutrition and community-based healthcare. From saving vulnerable newborns at Sion Hospital and pioneering human milk banks, to leading a major public hospital and later founding SNEHA, her work has touched countless lives. Through SNEHA, she took her commitment beyond the hospital — working with communities to address malnutrition, violence against women and children, and other challenges that shape health and wellbeing. Her more recent work in palliative care has further extended this commitment to reducing suffering and supporting families through serious chronic illnesses.

She was also honoured with Papal Knighthood, recognising her longstanding contribution to healthcare, public service and the wellbeing of others.

While these honours celebrate an extraordinary professional journey, those who have worked with Dr. Armida know that her legacy goes beyond her achievements. Her empathy, kindness, humility and ability to connect with people have touched generations of colleagues, healthcare professionals and community members. Even through personal challenges, she has continued to lead with strength and compassion.

For all of us at SNEHA, these recognitions are a moment of immense pride — and an opportunity to celebrate not only what Dr. Armida has achieved, but the values she continues to inspire in all of us.





Two prestigious honours in one year for a truly remarkable life of service

From the CEO's Desk

Dear Friends,

This year has been a particularly memorable one for all of us at SNEHA. Just when we thought the year would pass like any other, we received the wonderful news that our Founder, Dr. Armida Fernandez, was awarded the Padma Shri for her outstanding contribution to medicine.

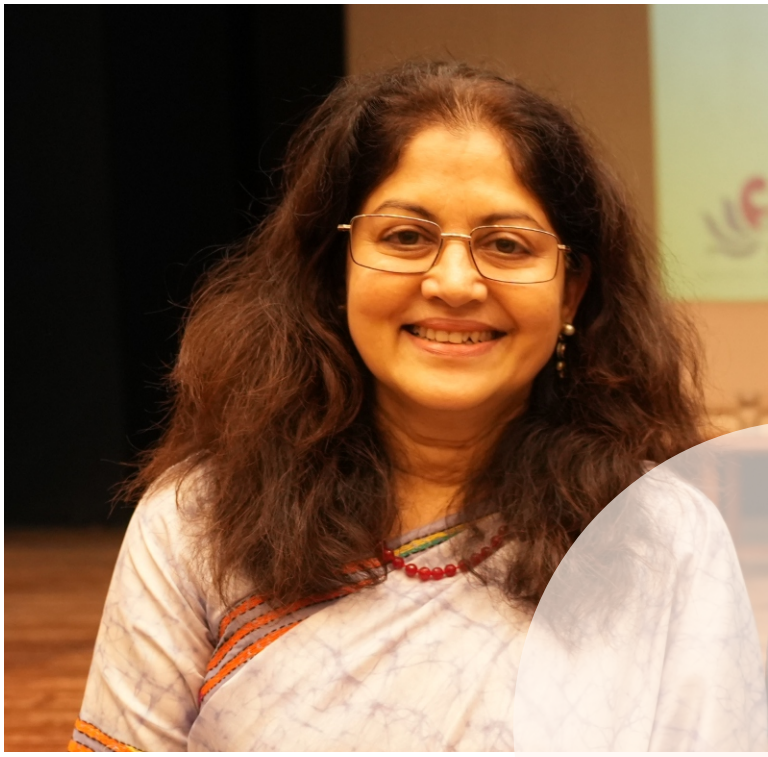
It was a deeply deserved recognition of a lifetime dedicated to saving lives and alleviating pain and suffering. Yet, for those of us at SNEHA who have had the privilege of working closely with Dr. Armida and witnessing her journey at close quarters, the award represents something even deeper. To us, it is an acknowledgement of the extraordinary humanity she embodies—a spirit of compassion, courage and service that is not simply part of her work, but is woven into every aspect of her life and reflected in the lives of all those she touches.

The outpouring of love and gratitude that followed was deeply moving. Her former students, past and present SNEHA colleagues, partners and countless others whose lives she has touched came forward to celebrate the award and the person behind it. Their stories were a powerful reminder of the lasting impact one individual can have when a life is lived with purpose, compassion and an unwavering commitment to others.

As I reflect on 2025–26, I am struck by how much SNEHA has grown—not simply in the number of people we reach, but in the depth and sustainability of the change we are seeking to create. For more than 25 years, SNEHA has worked alongside women, children, families and communities living in some of the most underserved neighbourhoods of Mumbai and beyond. Our purpose has remained constant: to improve health, nutrition and safety, while strengthening the systems that provide care and empowering the communities to take charge of their own health. What has evolved is our understanding of how lasting change happens.

We increasingly recognise that meaningful impact cannot come from an organisation working alone. It comes when communities are empowered, frontline workers are strengthened, public systems take ownership, evidence informs action, and different stakeholders work together towards a common goal. This year was an important step forward in that journey.

One of the clearest examples was our work in F-North



ward, where SNEHA expanded its reach from approximately 150,000 to 560,000 people. This was not simply a matter of increasing numbers. Scaling across an entire ward required us to build trust with communities, work closely with the BMC and ICDS, and coordinate across multiple stakeholders. Partnerships with 195 *Anganwadi* workers, 178 *ASHAs*, and more than 1,000 community volunteers, helped create a stronger foundation for community health.

Our Public System Partnership programme demonstrated another important dimension of sustainability. During the year, key maternal referral and primary healthcare processes were formally handed over to five Municipal Corporations. The transition was supported by mentoring, data-driven review mechanisms, digital monitoring and documentation of best practices. The objective was clear: SNEHA should not create systems that depend on SNEHA; we should help build systems that can thrive beyond us.

The five-year Nurturing Care intervention in Malvani, Mumbai showed significant improvements in maternal and child health: stunting among children aged 0–3 years declined from 35% to 22%, maternal anaemia from 29% to 14%, and full immunisation among children aged 12–23 months increased from 62% to 93%.

Early antenatal registration and contraceptive prevalence also improved substantially. These numbers matter because behind every percentage is a woman who received care earlier, a child who was able to grow and develop more healthily, or a family that was able to access a service or entitlement that might otherwise have remained out of reach.

Our work with adolescents continued to remind us that health is about much more than the absence of disease. Young people need safe spaces, trusted adults, access to health services and the confidence to question harmful social norms. This year, SNEHA strengthened mental health support in schools and communities and continued to strengthen the network of youth peer educators who are helping other adolescents make informed choices about their health and futures.

Similarly, our work on violence against women and children continues to reinforce a difficult but important truth: health, safety, dignity and equality are deeply interconnected. Our evidence and experience contribute not only to services for survivors, but equally to conversations about prevention, gender norms, community action and systemic change. Our research on preventing violence against women and girls in informal settlements was published in The Lancet Global Health this year, adding to the growing body of evidence generated through SNEHA's work.

Our commitment to dignity extends throughout life . Through Romila Palliative Care, we continued to bring compassionate, quality care closer to people living with serious illness and their families. The expansion of palliative care outpatient services to R. N. Cooper Hospital is an important step towards integrating palliative care more deeply into Mumbai's public health system.

Evidence, learning and technology continue to be the connective tissue across all our work. This year, our information management systems were strengthened through a unified data ecosystem, real-time dashboards, cloud optimisation and enhancements to our digital programme platforms. Our AI-enabled WhatsApp chatbot reached more than 1,200 beneficiaries with personalised health information. These investments are helping us move towards faster decision-making, greater accountability and more responsive programmes.

SNEHA's greatest strength continues to be its people—the women and men who work every day alongside communities, government frontline partners, researchers, administrators, donors and supporters. This year, we invested in staff wellbeing, cross-functional collaboration, leadership and professional development because we know that resilient and capable teams are essential to sustaining impact.

As we look ahead, our focus will be on scaling impact, strengthening systems and sustaining outcomes. We will continue to ask ourselves not only "How many people can we reach?" but also "What will remain when we are no longer there?" We will seek opportunities to take proven models to new geographies, deepen our partnerships with government and civil society, generate and share evidence, and use technology thoughtfully to improve the quality and reach of our work.

I am deeply grateful to our communities for the trust they place in us; to government frontline workers and partners for their commitment; to our Board and leadership team for their guidance; to our donors and supporters for believing in our mission; and, above all, to the SNEHA team for the passion, humility and determination with which they do this work. The progress reflected in this Annual Report belongs to all of us.

As we move into the next chapter of SNEHA's journey, our ambition remains clear: to build healthier women, children and urban communities—and to contribute to public systems that are stronger, more equitable and better able to serve everyone. Thank you for being part of this journey.

Warm regards,

Vanessa D'Souza
CEO, SNEHA

OUR PROGRAMMES

Maternal and Child Health

Public System Partnership

Empowerment, Health and Sexuality of Adolescents

Prevention of Violence against Women and Children

Romila Palliative Care



Maternal and Child Health

SNEHA's Maternal and Child Health programme employs a continuum-of-care approach to improve the health and nutrition of women and children living in urban informal settlements. We aim to break the intergenerational cycle of poor health by intervening at critical stages, including pre-pregnancy, pregnancy, childbirth, and early childhood. Our key interventions include nutrition counselling, access to antenatal care, infant and young child feeding practices, planned parenthood, and referrals for childhood illnesses.

SNEHA currently works on community interventions on maternal and child health in over 373,300 households across a population of 2,321,400.



Reach & Impact (2025-26)

185,861
Direct programme participants

1,781,200
Indirect programme participants

78,800
Married women in reproductive age

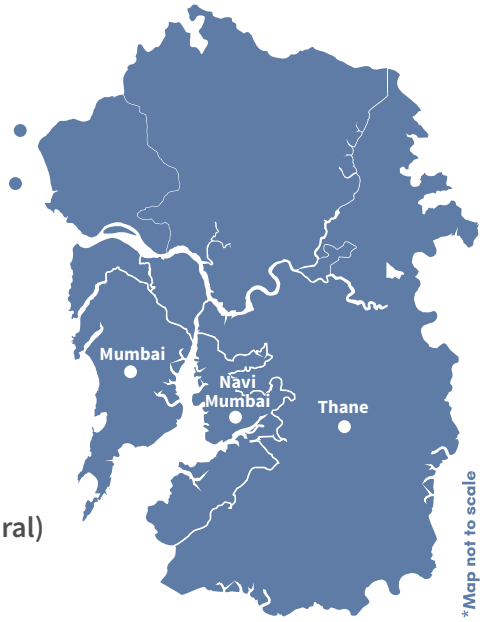
101,100
Children

2,050
Community Volunteers

3,100
Public System staff

Collaboration with Integrated Child Development Services (ICDS) *Anganwadis*

- A total of 1,391 *Anganwadi* workers across ICDS projects in Mumbai, Thane and Dadra & Nagar Haveli were trained through structured technical and competency-building sessions, complemented by on-the-job mentoring to reinforce application of knowledge and skills to improve service delivery.
- Under the *Saksham Anganwadi* – ICDS system strengthening initiative in M Ward of Mumbai, improvements were observed across 177 *Anganwadis* in Phase 1. Using SNEHA's customized *Anganwadi* Scorecard tool, the proportion of *Anganwadi* centres achieving high composite scores increased from 12% at baseline (2024) to 35% (2025).



LOCATIONS:
Dharavi, Wadala, Govandi, Mankhurd, Malvani, Bhiwandi, Navi Mumbai, Kasara, Dadra & Nagar Haveli, Diu and Daman

NEW LOCATIONS:
Turbhe, Bhiwandi (Rural)
Wadala (F-North)

Impact of Community Health Interventions

Endline survey findings from the Nurturing Care project in Malvani, Mumbai, conducted after five years of intervention among children aged 0–3 years and their mothers, demonstrated substantial improvements across key maternal and child health indicators.



Reductions in child malnutrition (0–3 years)

The program led to a notable decline across all three forms of malnutrition:

- Stunting (height-for-age) reduced from 35% to 22%, a 37% decline
- Underweight (weight-for-age) reduced from 30% to 24%, a 20% decline
- Wasting (weight-for-height) reduced from 14% to 12%, a 14% decline



Better childhood development and health outcomes

- Delays in developmental milestones among children under 3 years reduced from 18% to 7%, a 61% reduction
- Full immunisation (children 12–23 months) improved from 62% to 93%, a 50% increase



Improved maternal health outcomes

- Maternal anaemia reduced significantly from 29% to 14%, a 52% reduction
- Early antenatal registration (first trimester) increased from 33% to 70%, a 112% increase
- Contraceptive prevalence rate (among married women) increased from 41% to 75%, a 83% increase

Overall, the findings reflect strong gains in nutritional status, maternal health, service utilization, and early childhood development, highlighting the effectiveness of SNEHA's integrated healthcare model in urban low-resource settings.

Key Highlights of The Year

A Landmark Year of Scale and Systems Strengthening



In 2025, SNEHA expanded its reach in Mumbai's F-North ward from 150,000 to 560,000 people—a remarkable achievement made possible through close collaboration with ICDS, Brihanmumbai Municipal Corporation (BMC), frontline workers and communities. Scaling across an entire ward required building trust, strengthening public systems and coordinating multiple stakeholders in some of Mumbai's most densely populated neighbourhoods. Through partnerships with 195 *Anganwadis*, 178 ASHAs / Community Health Volunteers, extensive community engagement and capacity building, SNEHA strengthened the foundations of community health. More than 1,000 volunteers were mobilised, creating a powerful network of local champions and extending the reach of vital health, nutrition, and immunisation initiatives to thousands of families.

When Frontline Workers Become Community Leaders



To recognise and motivate the frontline workers driving community health outcomes, SNEHA organised the Annual ***Melawa***, bringing together approximately **350 *Anganwadi Sevikas*** from Mankhurd, Govandi, Shivaji Nagar, and Deonar. The event provided a platform for recognition, peer learning and collaboration through experience-sharing sessions, cultural performances and discussions on leadership, confidence building and stress management. By strengthening connections between ICDS Sevikas, Supervisors, ICDS, and SNEHA, the Melawa fostered leadership, renewed motivation, and reinforced a shared commitment to improving health, nutrition, and early childhood development outcomes in communities.

Building Healthier Futures in Bhiwandi



In 2025, SNEHA expanded into rural Bhiwandi, strengthening health and nutrition services across 211 *Anganwadis*, four Primary Health Centres, and seven sectors, reaching over 168,000 people. Working alongside ICDS and the public health system, the project is building stronger frontline capacities and improving services for women and children.

In urban Bhiwandi, sustained partnership with systems delivered measurable results. Between 2023 and 2026, full immunisation coverage increased from 76% to 91%, while uptake of ICDS services rose from 59% to 86%. Improved access to services enabled earlier identification and support for vulnerable children, contributing to a reduction in underweight prevalence from 32% to 16% and stunting from 33% to 19%

Supporting Every Child to Reach Their Potential Through *Anganwadi* Partnerships



Through its Early Childhood Development (ECD) programme, SNEHA continued to improve outcomes for young children by working closely with *Anganwadi* centres and frontline workers. Early identification, timely intervention and sustained support helped more children overcome developmental delays and achieve age-appropriate milestones. The programme also promoted safer, more nurturing home environments through caregiver counselling and increased awareness of responsive caregiving. These results were driven by developmental screening using the GMCD* tool, regular home visits and play-based learning activities, with *Anganwadi Sevikas* playing a vital role in helping children learn, grow and thrive.

*(Guide for Monitoring Child Development)



Supporting Two Lives Through One Journey

When *Sarita, a 22-year-old first-time mother, arrived at her mother's home in Malwani in April 2025, she was facing domestic violence, poor health and an unconfirmed pregnancy. Recognising the urgency of her situation, SNEHA's Community Organiser supported her to undergo a pregnancy test. This encouraged early Antenatal Care (ANC) registration during her first trimester, ensuring timely access to health services, nutrition support and government schemes.

As concerns around violence emerged, Sarita was referred to Prevention of Violence against Women and Children (PVWC) services. Through continued counselling for both Sarita and her husband, she gained emotional support, greater confidence and a safer environment during pregnancy.

Nutrition support remained a key focus. Through counselling, access to Integrated Child Development Services (ICDS) benefits and regular follow-ups, Sarita improved her dietary intake and adherence to Iron and Folic Acid (IFA) supplementation. Her haemoglobin levels increased from 9.1 g/dL to 11.1 g/dL, successfully moving from moderate anaemia to normal levels.

On 9 March 2026, Sarita delivered a healthy baby weighing 3.25 kg, initiated breastfeeding within the first hour, and made an informed decision to adopt Copper-T after delivery. Her journey reflects how integrated support across nutrition, maternal health and violence prevention can help women build healthier futures for themselves and their children.





*Names have been changed

Public System Partnership

The Public System Partnership programme collaborates closely with the public healthcare system to strengthen referral linkages across health facilities, intending to improve the quality and continuity of maternal and newborn healthcare services. The focus is also to enhance access to primary healthcare services, particularly antenatal care, at primary health centres. The programme is being implemented across seven municipal corporations in the Mumbai Metropolitan Region and five peri-urban areas. In 2025, we expanded the intervention to the city of Nashik to further streamline and strengthen maternity referral mechanisms.



Reach (2025-26)

20,478
Direct beneficiaries

898,691
Indirect beneficiaries

Impact (2025-26)

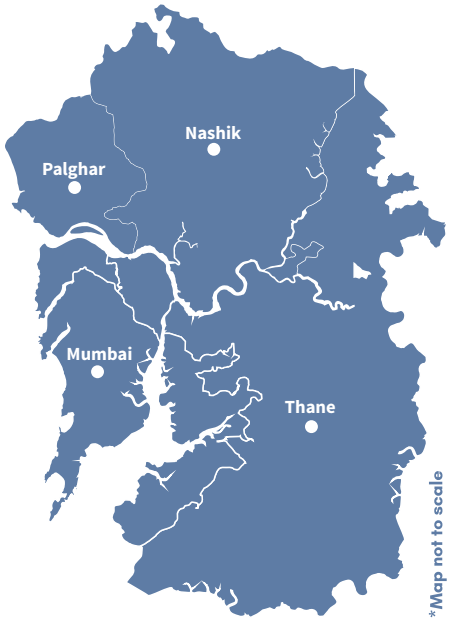
96% maternity cases were referred appropriately in peri-urban areas.

94% of maternity referrals are routed through established referral linkages.

76% of Health Posts in the Mumbai Metropolitan Region deliver 9 core services in at least 80% of weekly ANC clinics.

Scaling through strategic initiatives and increased geographical reach

- In FY 2025-26, SNEHA initiated intervention in Nashik Municipal Corporation to pilot a district-wide model to strengthen the maternal referral system. The focus was on stakeholder advocacy, creation of formal referral linkages, standardised referral documentation, digital referral tracking, and capacity building of healthcare providers.
- The focus in the peri-urban areas was to regularise antenatal care clinics at the subcentre level to support pregnant women unable to reach far-off centres thereby ensuring timing referral and avoiding high risk situations at the time of delivery. In 2025–26, 59 out of 63 sub-centres (93.6%) are conducting ANC clinics, and reached 8,861 women. This reflects a 64.7% increase in coverage compared to 2024-25.



LOCATION:
Mumbai, Thane, Kalyan-Dombivli, Ulhasnagar, Palghar, Ambernath, Badlapur, Bhiwandi-Nizampur, Mira-Bhayandar, Vasai-Virar, Nashik

Key Highlights of The Year

Handover of key processes to the Municipal Corporations

During FY 2025–26, the programme systematically handed over maternal referral and primary healthcare processes to Municipal Corporations to strengthen long-term sustainability and institutional ownership. Continuous supportive supervision, documenting best practices, regular coordination with nodal officers, strengthening review mechanisms, data-based decision-making, and integration of digital monitoring systems enabled Municipal Corporations to independently manage key maternal referral and antenatal care processes. This transition resulted in complete ownership of referral coordination, timely communication between facilities, adherence to referral protocols, and increased ownership of using data for monitoring and decision-making by facility staff and nodal officers. The formal handover to five Municipal Corporations was commemorated during the 10th Partners Meet held in January 2026 with senior health officials and stakeholders, along with the launch of the Maternal Referral Handover Manual to support sustainability.





From Mentoring to System Ownership: Building Confident ASHAs for Sustainable Community Health

SNEHA mentored 195 ASHAs across seven Municipal Corporations to strengthen their capacity in community mobilisation, documentation, and sustaining *Mahila Arogya Samitis* (MAS). Focus Group Discussions were conducted with 149 ASHAs and 100 ANMs highlighting visible improvements in ASHAs' confidence, communication, accountability, documentation practices, and ownership of responsibilities, contributing to better community engagement and increased incentives. The assessment of 195 ASHAs demonstrated a 93.9% increase in performance scores from baseline in 2024 to March 2026, highlighting the effectiveness of the mentoring approach. Felicitation events recognised the ASHAs for their progress and leadership.







When Every System Worked Together: Ensuring Safe Motherhood Amid Tuberculosis

In a small village of Palghar district, *Ujjwala, an eight-month pregnant woman, was diagnosed with pulmonary tuberculosis, which had caused one of her lungs to collapse. Living in severe financial hardship, she was caring for a six-year-old daughter with a physical disability, a three-year-old daughter, and elderly parents with little support. Although eligible for Amrut Ahar (a nutritional government scheme), she was unable to collect it from the *Anganwadi* due to her critical condition.

Ujjwala's condition was identified during a joint home visit by the SNEHA team and the Community Health Officer (CHO). Recognising the urgency, the SNEHA team coordinated with the Upsarpanch, *Anganwadi* Supervisor, Medical Officer, and District TB Officer to mobilise timely support. This included home delivery of Amrut Ahar (dry ration), financial assistance from the *Gram Panchayat*, referral to a hospital for advanced TB care, ambulance support, and financial assistance for her sonography. The *Anganwadi Sevika* ensured regular meals for Ujjwala's two young daughters while she was undergoing treatment. Through this coordinated response, Ujjwala received uninterrupted nutrition, timely TB treatment, and comprehensive maternal care. Her health improved significantly, and she safely delivered a healthy baby boy weighing 2.8 kg.

To ensure that pregnant women who are unable to visit *Anganwadis* continue to receive their nutritional entitlements, the *Upsarpanch* allocated Rs.5,000 from the Jan *Arogya Samiti* funds to each *Anganwadi* for similar vulnerable cases.





*Names have been changed

Empowerment, Health, and Sexuality of Adolescents

The EHSAS programme works with young people (age 10-21 years) living in underserved urban communities, as they transition from adolescence to adulthood, aiming to improve their health and well-being. The programme involves parents and community members to support youth dietary diversity, physical and mental health, gender equity, and civic participation. It fosters collaboration among schools, public health services, youth peer educators, and a digital platform to improve access to essential resources.



Reach & Impact (2025-26)

33,600
Direct programme participants

14,100
Indirect programme participants

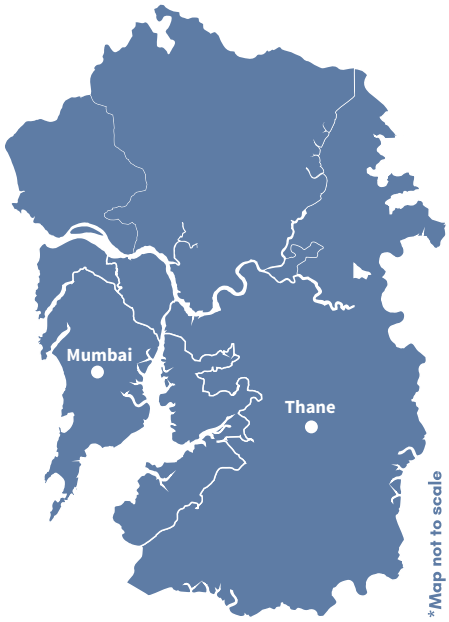
16,410
Adolescents

15,500
Parents

Impact (2025-26)

98% Adolescents received health services through Adolescent Friendly Health Clinics within Public Health System

82% Adolescents identified with mental health concerns showed improvement after receiving protocol based intervention from Clinical Psychologist



LOCATION:
Dharavi, Kandivali, Mankhurd, Govandi, Wadala (Mumbai) and Mumbra, Kalwa (Thane)

Key Highlights of The Year

Nurturing Young Minds, Building Safer Schools



Across Mumbai and Thane, counselling services have been strengthened in 48 government-aided and trust-run schools serving adolescents from vulnerable communities in Wadala, Mumbra, Mankhurd, Govandi, and Kandivali. By providing emotional support and guidance within schools, the initiative helps young people navigate challenges, build resilience, and access timely care. Through this engagement, SNEHA is also contributing to key school committees, including School Management, Sakhi Savitri (Child Protection and Safety), and School Audit Committees. This collaborative approach is helping create safer, more supportive learning environments where adolescents can thrive.

Creating Healthier Futures for Adolescents

In partnership with the Thane Municipal Corporation, an Adolescent-Friendly Health Clinic has been established at a tertiary hospital to ensure young people have access to essential and specialised healthcare services. The centre provides a safe and supportive space for adolescents seeking care for physical, gynaecological, and mental health concerns. Aligned with the protocols of the Rashtriya Kishor Swasthya Karyakram, the initiative aims to promote adolescent well-being, confidence, and healthier futures.



Empowering Youth, Strengthening Community Care

SNEHA has built a network of 180 Youth Peer Educators across communities in Mumbai and Thane. These young leaders conduct interactive sessions with adolescents, creating awareness on health and well-being while encouraging access to essential public health services. They also play a vital role in identifying early mental health concerns through structured screening and providing timely support. By placing young people at the heart of change, the initiative is fostering peer support, strengthening community connections and helping adolescents make informed choices for healthier futures.





When Young Voices Shape Change

Since May 2025, *Inayat and Kainat (names changed) have been active participants in SNEHA's youth initiatives, contributing not only to their own growth but also to the evolution of the programme itself. Here they found a safe and inclusive space where they could express their identities, build confidence and develop meaningful connections with peers and mentors.

At SNEHA, young people are encouraged to question stereotypes, challenge discrimination, and actively shape the spaces they occupy. Inayat and Kainat became strong advocates for inclusion, often raising important questions about language, representation, and exclusionary practices. This was particularly evident during a community campaign where participants were given badges labelled "Zimmedar Girls". They voiced their concerns about its exclusionary nature, and their feedback led to the creation of a more inclusive alternative— "Zimmedar Crew".

Though this journey had some hurdles, their confidence continued to flourish, culminating in a winning performance at Yuvanaad 2026, a youth community event organised by SNEHA.. Today, Inayat aspires to be a fashion designer, and Kainat hopes to pursue a career in beauty services. Their journey reflects the power of inclusive youth spaces to nurture confidence, leadership, and aspirations while creating a greater sense of belonging for all.





*Names have been changed

Prevention of Violence against Women and Children

The Programme on Prevention of Violence Against Women and Children (PVWC) works towards raising awareness of and preventing violence against women and children, ensuring survivors' access to protection and justice, empowering women to claim their rights, and mobilising communities around 'non-tolerance towards violence.'



Reach (2025-26)

13,160
Direct programme participants

244,650
Indirect programme participants

4,490
Cases of violence assisted through counselling centres

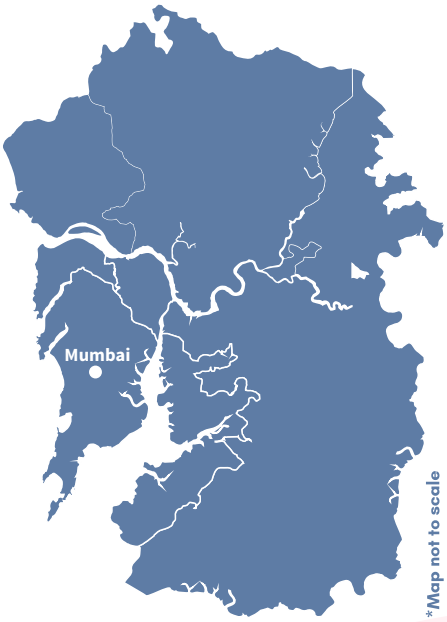
840
Public health workers sensitized through training

Impact (2025-26)

73% survivors of gender-based violence reported a reduction in violence levels

61% survivors of gender-based violence covered in mental health assessments reported improvement in depression levels

56% survivors of gender-based violence covered in mental health assessments reported improvement in anxiety levels.



LOCATION:
Dharavi, Wadala, Govandi, Kurla and other locations across Mumbai

Key Highlights of The Year

Rising Together: Theatre Inspiring Change



Through three interactive theatre workshops in Wadala, 'Rise Up for Equality: Social Change Interventions' in the Bastis brought communities together to challenge harmful gender norms and promote equality. Conducted in partnership with the Create Foundation, the workshops engaged over 1,150 participants, using performance to spark reflection, dialogue, and behaviour change. The presence of actor Kunaal Roy Kapur and actress Madhoo encouraged wider participation, helped break down social barriers, and inspired open conversations about gender-based violence, demonstrating the power of art to strengthen community action and support lasting social change.

Together Against Violence: Communities Leading Lasting Change

Across Dharavi, Kurla, Wadala, and Govandi, communities are coming together to prevent and respond to violence against women and children. By strengthening the skills of local volunteers, including *Sanginis* (women volunteers), *Mitras* (male volunteers), the initiative builds lasting community ownership. *Sanginis* lead awareness campaigns, support survivors, and coordinate action through the *Sangini* Resource Centre, while *Mitras* work alongside them to promote safety and accountability. Together with SNEHA, these community champions identify survivors, challenge gender-based violence, and create sustainable, community-led systems that foster safer, more equitable neighbourhoods.



Building Safer Communities Through Responsive Policing



In partnership with the Create Foundation, SNEHA conducted a gender sensitisation workshop for 53 officers from the Nirbhaya Squad. The training strengthened officers' understanding of gender, patriarchy and violence against women and children through role plays, discussions and interactive activities. It also enhanced their skills in empathetic first response, basic counselling and community-oriented policing. The initiative reinforces the Nirbhaya Squad's vital role in preventing gender-based violence and supporting survivors.

Finding Her Voice, Reclaiming Her Life



AI generated photo for representational purposes

For a young woman of just 28 years, marriage was meant to mark the beginning of a new chapter filled with hope. Instead, within days of her wedding, she was subjected to repeated sexual harassment and eventually sexual assault by her brother-in-law in what was meant to be the safety of her new home.

Fear silenced her. Newly married and isolated, she believed she had nowhere to turn. The perpetrator threatened her into secrecy, while the weight of trauma left her emotionally overwhelmed. Gathering immense courage, she finally confided in her husband, who stood firmly beside her. Together, they registered an FIR, determined to seek justice despite the immense pressure from family members who blamed her for bringing shame upon the household.

Referred to SNEHA through the gynaecology department at Lokmanya Tilak Municipal General Hospital (LTMGH), she found a safe space where she was heard without judgement. Through compassionate counselling, psychiatric support, legal guidance and assistance with the police process, she slowly began to rebuild her confidence. When suicidal thoughts threatened to consume her, consistent counselling sessions provided her with healthier coping strategies. She was also prepared for the legal process ahead, empowering her to face court proceedings with greater confidence.

Today, she has reclaimed her sense of self. She has resumed work, chosen to build a safe home with her husband away from the abuse, and continues to pursue justice with renewed strength and hope for the future.

Research Publications

Nayreen Daruwalla, Shilpa Adelkar, Proshant Chakraborty, Andrew Copas, Sushmita Das, Tanushree Das, Vanessa D'Souza, Lu Gram, Apoorwa Gupta, Bhaskar Kakad, Suman Kanougiya, Deepali Kedare, Unnati Machchhar, Shanti Pantvaidya, Rupesh Parab, Tanvi Singhvi, Apurva Tiwari, David Osrin.

"Community interventions to prevent violence against women and girls in informal settlements in Mumbai: a theory-driven, pragmatic, cluster-randomised, controlled trial."

The Lancet Global Health, 2025;13:e2082–96.

https://pubmed.ncbi.nlm.nih.gov/41240947/

Nayreen Daruwalla, Miranda Abas, Ayesha Ahmad, Anna Bentley, Udita Bhatia, Rachana Datta, et al.

"Developing a mental health support package for women survivors of domestic violence and modern slavery in South Asia: a multiple methods design."

Global Health Research, 2025;1(2):1–28. DOI: 10.3310/DHSU8843.

https://pubmed.ncbi.nlm.nih.gov/41442533/

Romila Palliative Care

Since its inception in February 2017, Romila Palliative Care (RPC) has supported over 3,530 patients with serious chronic illnesses, focusing on improving quality of life through effective symptom management and psychosocial and spiritual counselling. The programme also offers continuous support to primary family caregivers, building their confidence and capacity to provide compassionate care.



Reach (2025-26)

920
New patients registered in the year

1,700
Total number of patients supported

6,280
Home visits

4,400
Teleconsultations

1,340
Stakeholders receiving awareness/ support sessions

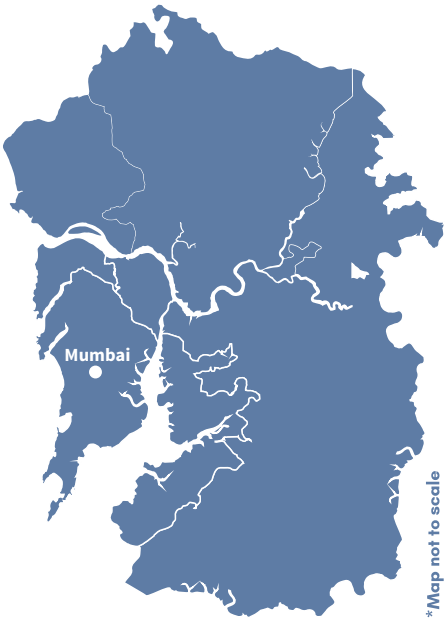
Impact (2025-26)

98% patients/caregivers reporting satisfaction with physical symptom management by the palliative care team

64% patients reporting reduced or stable symptom burden

56% caregivers reporting increased ability and confidence in managing patient care

98% Patients/Caregivers reporting satisfaction with RPC services



LOCATION:
Across Mumbai

Key Highlights of The Year

Bringing Palliative Care Closer to Those Who Need It Most



For people living with life-limiting illnesses, accessing specialised care can be physically exhausting and emotionally overwhelming. In 2025, SNEHA's Romila Palliative Care programme expanded Palliative Care Outpatient Department (OPD) services to R. N. Cooper Hospital, bringing specialist care closer to patients and their families. The service builds on the success of the model established at Lokmanya Tilak Municipal General Hospital, marking an important step towards integrating palliative care into Mumbai's public health system. During the year, the Palliative Care OPD services reached 1,160 patients across both the hospitals,ensuring people received timely, dignified and compassionate care.

Building a Workforce for Compassionate Palliative Care

Strengthening palliative care begins with equipping healthcare professionals with the knowledge and confidence to provide timely, compassionate support. During the year, SNEHA trained 272 healthcare professionals, including 195 postgraduate resident doctors, 60 senior government health officials, and 17 doctors, nurses and interns across Mumbai and Thane. These capacity-building sessions promoted early integration of palliative care, compassionate communication and timely referrals, strengthening the ability of the public health system to deliver dignified, patient-centred care to people living with serious illnesses.



Prioritising Staff Wellbeing



Providing e palliative care requires not only clinical expertise but also emotional resilience. Recognising the demands placed on its frontline team, SNEHA organised its first residential self-care workshop, creating a dedicated space for reflection, renewal and peer support. By strengthening staff wellbeing and fostering stronger team connections, the initiative helped sustain the compassion, empathy and resilience needed to deliver high-quality, person-centred care to patients and their families.

Restoring Independence: Mrs. Noor Jahan's Journey



AI generated photo for representational purposes

In 2024, Mrs. Noor Jahan suffered a stroke and underwent surgery for a cervical spine condition. Following surgery, she experienced severe weakness in all four limbs and became completely bedridden. She required a feeding tube, urinary catheter, and full support for all daily activities.

After returning home, she was enrolled in SNEHA's home-based palliative care programme. During the initial assessment, the team identified multiple challenges, including pressure sores, complete physical dependency, emotional distress, and a high burden on family caregivers.

A multidisciplinary care plan was developed to address her physical, emotional, and social needs. The team provided regular nursing care, guidance on wound management, nutrition, and hygiene, while also training family members to confidently support her at home. Physiotherapy exercises were introduced and reinforced during home visits to promote mobility and recovery. Mrs. Noor Jahan and her family also received emotional counselling and psychosocial support to help them cope with the impact of her illness and personal loss.

Over time, her condition improved remarkably. Her pressure sores healed completely, her strength gradually returned, and she was able to eat normally, allowing the feeding tube and the catheter to be removed.

Today, Mrs. Noor Jahan is able to walk with the help of a walker, manage her daily activities independently, and actively participate in family and social life. She continues physiotherapy and reports greater confidence, dignity, and quality of life. Her journey demonstrates the transformative impact of comprehensive palliative care.

Conference Presentation

National Recognition for our Innovation in Care Delivery

At the 33rd International Conference of the Indian Association of Palliative Care (IAPCON) 2026, Romila Palliative Care shared its learning through two poster presentations. The poster, Delivering Palliative Care in Congested Informal Settlements: Challenges and Innovative Solutions, was awarded Third Prize, recognising the innovation and impact of our community-based model. The award reflects the programme's commitment to making quality palliative care accessible to people living in some of Mumbai's most underserved communities.



Livelihood Generation



The Livelihood Generation programme is a women's self-help initiative that strongly advocates for financial independence and empowers women to earn a sustainable income. Members of the Kaushalya Mahila Bachat Gat (self-help group) are trained in tailoring and supported in creating handcrafted products showcased and sold at exhibitions, corporate events, home-based sales and in retail at the Bachat Gat site.

The women of the Bachat Gat manage their sales and maintain financial records through a group bank account. The initiative encourages a professional and enterprising mindset, instilling teamwork, punctuality, and multitasking values. Over time, the Bachat Gat has enabled women to contribute meaningfully to their household income and manage their expenses more systematically. As they gain skills and economic agency, many women report increased confidence and self-esteem, with several going on to train and support others in their community. The ripple effect of this programme continues to grow, fostering long-term social and economic empowerment at the grassroots level.

In 2025-26, the group successfully conducted 13 home-based sales, 21 corporate sales and fulfilled 14 product orders.

The proceeds earned during the year (2025-26) are as follows:

INR 226,287

Proceeds from product orders and retail sales

INR 870,520

Proceeds from home-based sales and corporate product sales



Strategy & Partnerships



From doing

↓

enabling



From programme implementation

↓

systems change



From SNEHA-owned accountability

↓

community and public-system ownership



From generating evidence

↓

sharing and scaling knowledge



From individual programmes

↓

an ecosystem for urban health

Our Strategy: From Implementation to Sustainable Change

In 2018, SNEHA set itself an ambitious goal: to become the "go-to NGO for urban health." This aspiration emerged from a clear understanding of our strengths—our ability to build evidence-based models in reproductive, maternal, adolescent and child health, violence prevention and palliative care; our strong partnerships with public systems; and our deep understanding of and engagement with the communities we serve.

Over the years, this strategy has shaped not only what we do, but also how we work. **Our four strategic objectives remain at the heart of our approach:**

1

Improve the health of women and children living in vulnerable informal settlements, while building strong evidence of what works—and what does not.

2

Strengthen public systems to improve the coverage and quality of preventive and promotive services, while ensuring that the most vulnerable populations can access these services.

3

Build and share knowledge through the SNEHA Knowledge Center, enabling evidence and learning to reach other organisations, practitioners and public systems.

4

Maintain the highest standards of governance, recognising that trust, transparency and accountability are fundamental to our work.

A significant shift in how we create impact

The most important evolution in our strategy has been our movement from implementing programmes ourselves to enabling communities and public systems to take ownership of change. We are increasingly asking ourselves not only, *"What can SNEHA do?"* but also, *"What needs to change so that this improvement can continue without SNEHA?"*

The Healthy Cities project in P North Ward, Mumbai, provides a powerful example. Community volunteers are increasingly taking responsibility for supporting pregnant women and mothers to access public services and engaging with public system staff to address gaps in services. With SNEHA's support and guidance, this has contributed to further improvements in child nutrition between 2021 and 2026: stunting declined from 34% to 27%, underweight from 30% to 26%, and wasting from 11% to 10%.

This represents an important change in our role. Rather than being the primary implementer, SNEHA is increasingly becoming a catalyst—connecting communities and public systems, strengthening their capabilities and helping them solve problems together.

Building public systems that can sustain change

Our work with public systems has similarly moved from supporting individual interventions to institutionalising processes and transferring ownership.

In January 2026, after a journey that began in Mumbai in 2007 and subsequently expanded to ten other municipal corporations and councils, we transitioned three key processes—maternity referral networks, consistent and quality antenatal care, and *Mahila Arogya Samitis*—to five municipal corporations. These processes had reached a level of institutionalisation that enabled us to transfer ownership and accountability to the public systems and communities.

This is what sustainable scale means to us: not simply reaching more people, but ensuring that the systems and communities are stronger and better equipped to sustain outcomes.

Our Adopt an *Anganwadi* partnership with ICDS reflects the same approach. In its second year, the initiative contributed to a substantial improvement in *Anganwadi* performance, with the proportion of *Anganwadis* assessed "low" or "very low" declining from 87% to 47%, while those assessed "medium" or "high" increased from 13% to 53%. At the same time, the work surfaced an important gap: many community mothers were unaware of the six mandated ICDS services. This learning points to the next frontier—strengthening not only service delivery, but also more emphasis on community awareness and demand for services.

From knowledge generation to knowledge sharing

A further evolution of our strategy is the recognition that the knowledge we have accumulated over more than two decades has value far beyond the communities and geographies where SNEHA works directly.

Established in 2024, the SNEHA Knowledge Center (SKC) seeks to strengthen the health and violence-prevention ecosystem for women and children in India by developing, scaling and sharing evidence-based solutions across NGOs, public systems, service providers, researchers, educators and policymakers.

This year, the SNEHA Academy launched its Learning Management System and expanded its portfolio of courses across maternal and child health, nutrition, violence prevention, mental health and community mobilisation. We now measure not only participation, but learning: mean knowledge scores among participants increased from 6.6 at baseline to 16 at endline, against a maximum score of 18.

Our growing partnerships with NGOs and government departments across Maharashtra and other parts of India are enabling us to take this learning beyond our own programmes.

We see the SNEHA Knowledge Center as an important part of SNEHA's future: a way of multiplying our impact by enabling others to learn from our experience, adapt what works and avoid what does not.

Sustaining trust

None of this is possible without strong governance. Transparency, accountability and responsible stewardship have always been central to SNEHA's identity. This year, we continued to receive the highest, "Platinum", level rating from GuideStar India, and successfully renewed our 80G and 12A approvals.

These are not simply compliance achievements. For us, they represent the trust placed in SNEHA by communities, public systems, partners, donors, employees and other stakeholders.

Looking ahead

As SNEHA moves into the next phase of its journey, our strategy is increasingly about creating conditions for change to endure and spread. We will continue to build and implement integrated models, generate rigorous evidence, publish and share learning, and work in partnership with communities and public systems. But increasingly, our measure of success will be whether these models can be owned, sustained and scaled by others.

Our ambition is therefore evolving—from being an organisation that delivers effective programmes to being an organisation that strengthens the ecosystem for better health, nutrition and safety of women and children. We will continue to leverage what has always been distinctive about SNEHA: our ability to listen to communities, work alongside public systems, translate experience into evidence, and turn evidence into action.

Our goal is not to make SNEHA indispensable. It is to make the change we seek sustainable, scalable and increasingly owned by communities and systems. That, we believe, is the pathway to becoming the "go-to NGO" for urban health—and to ensuring that our impact lasts well beyond SNEHA's own direct presence.

MONITORING, EVALUATION, RESEARCH AND LEARNING (MERL)

The Monitoring, Evaluation, Research and Learning (MERL) domain fosters an evidence-informed culture across SNEHA by supporting teams to monitor progress and assess impact, while generating research and sharing learning to inform programme decisions and public health policy.

Key Highlights of The Year

- Under the Healthy Cities Program, a Nurturing Care Model was implemented to create an enabling environment for the optimal growth and development of children by improving their nutritional and developmental outcomes. An impact assessment was conducted to evaluate the effectiveness of the programme across multiple domains of maternal and child health, nutrition, and responsive caregiving. The findings will inform future strategies for improving early childhood care and development outcomes, and generate evidence for scale-up of integrated nurturing care interventions.
- The Prevention of Violence against Women and Children programme runs counselling centres that provide support to survivors of domestic violence. A beneficiary satisfaction survey was conducted to understand survivors' experiences with accessing services, the case management processes and the overall support received through the counselling centres. The findings highlighted overall experiences of service delivery while also identifying opportunities to further strengthen survivor-centred care, enhance consistency in services, and improve communication and referral processes.
- In partnership with municipal corporations across the Mumbai Metropolitan Region (MMR), SNEHA has established a maternal referral system to strengthen linkages between public health facilities and improve timely access to specialised maternal and neonatal care. The intervention focused on building referral pathways based on geographic proximity, facility capacity, and health system needs, supported through stakeholder engagement, protocol development, monitoring, and continuous adaptation. To assess the functioning and effectiveness of the referral system, a mixed-methods study was conducted across four municipal corporations in the MMR. The study examines referral processes, maternal and neonatal outcomes, and the experiences of healthcare providers and pregnant women about the referral services. The findings will contribute to strengthening the maternal referral system in urban low-resource settings.

Research Publications

Mastan, M., Rajan, S., Sawant, R., Pantvaidya, S., D'Souza, V., & Das, S. (2025). Association between maternal and child minimum dietary diversity in urban informal settlements: evidence from a cross-sectional study in Mumbai, India. BMC Nutrition, 11(1), 217.

https://doi.org/10.1186/s40795-025-01201-3

Spencer, J., Bahuguna, M., Ramani, S., Pathak, S., Shende, S., Pantvaidya, S., D'Souza, V. & Jayaraman, A. (2025). What constitutes 'poor' adherence to medical advice for chronic diseases? Insights from a qualitative study among hypertension and diabetes patients in urban informal settlements, Mumbai Metropolitan Region. PLoS One, 20(11), e0324765.

https://10.1371/journal.pone.0324765

Shaikh, N., Sawant, R., Spencer, J., Das, S., Patil, S., Shende, S., Pantvaidya, S., Fernandez, A., & Jayaraman, A. (2025). Exploring reasons for improvement in the nutritional status of children in urban informal settlements during the COVID-19 pandemic: A qualitative study from Mumbai, India. In Nutrition and Public Health in Asia: Challenges, Interventions, and Policy Responses. Asian Development Bank Institute (ADBI).

https://www.adb.org/sites/default/files/publication/1060961/nutrition-and-public-health-asia-challenges-interventions-and-policy-responses.pdf#page=150

Collaboration & Partnerships

Social determinants of health refer to the social and economic conditions, beyond purely medical factors, that influence people's health. SNEHA's Collaboration and Partnerships domain works with government systems and civil society organizations to facilitate access to social protection schemes and services that help improve these social determinants and advance health equity.



Reach & Impact (2025-26)

3,863

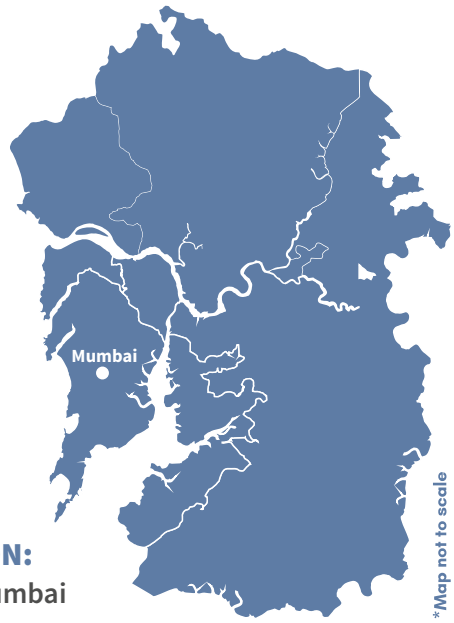
An average of people were reached per month with information on social protection schemes

17,212

people could access benefits under various Government social protection schemes

1,417

people referred for social determinants to civil society organisations by SNEHA staff



LOCATION:
Across Mumbai

*Map not to scale



For many vulnerable families, accessing government welfare schemes begins with informed frontline workers. To strengthen this critical link, SNEHA conducted capacity-building sessions on key social protection schemes for 1,355 Accredited Social Health Activists (*ASHAs*), and 1,284 Integrated Child Development Services (ICDS) staff across Mumbai. By enhancing the knowledge and confidence of frontline workers, the initiative strengthened their ability to guide families towards timely access to essential entitlements and social protection services.



No single organisation can reach every vulnerable family. To expand access to social protection, SNEHA provided ongoing technical support to local organisations, including Seher and SPARC, enabling them to strengthen services within their own communities. Capacity-building sessions were also conducted with community networks such as *Ration Kriti Samiti*, *Bal Samanvay Samiti* and *Mahila Arthik Vikas Mahamandal*, while engaging the National Service Scheme (NSS) unit of Joshi Bedekar College, Thane. By empowering local partners, SNEHA is extending the reach and sustainability of social protection initiatives beyond its direct programme areas.



When Persistence Restores Dignity

For more than 30 years, *Ajay Naik, a 55-year-old tailor from Mumbai's Wadala Antop Hill area, worked tirelessly to support his family. Despite decades of living and working in the city, he remained excluded from one of the most basic social protection entitlements - a ration card. Without it, his family of four struggled to afford essential food, making it a battle to put meals on the table.

Determined to help, the SNEHA team guided Ajay through the complex application process, assisting him in securing documents from his native village and navigating multiple administrative procedures. Even after submitting the required paperwork, officials repeatedly demanded additional documents that no longer existed, including his late parents' ration card and decades-old certificates, leaving his application trapped in bureaucratic delays.

Refusing to let the process end there, SNEHA escalated the case through the *Rationing Kriti Samiti (RKS)*, which brought it to the attention of the Deputy Controller of Rationing (DCR). Following a review, the DCR confirmed that Ajay had fulfilled all legal requirements and directed the ration office to issue his ration card without further delay.

For Ajay's family, the ration card meant more than subsidised food, it restored financial security, dignity and access to a right that had remained out of reach for decades. His journey demonstrates how persistent advocacy can overcome systemic barriers and ensure that vulnerable families receive the support they deserve.





*Names have been changed

INFORMATION MANAGEMENT

Enabling Smarter Decisions Through Technology

As SNEHA's programmes expanded in scale and complexity, the Information Management team strengthened the organisation's digital ecosystem to support faster, evidence-based decision-making and improve programme performance.

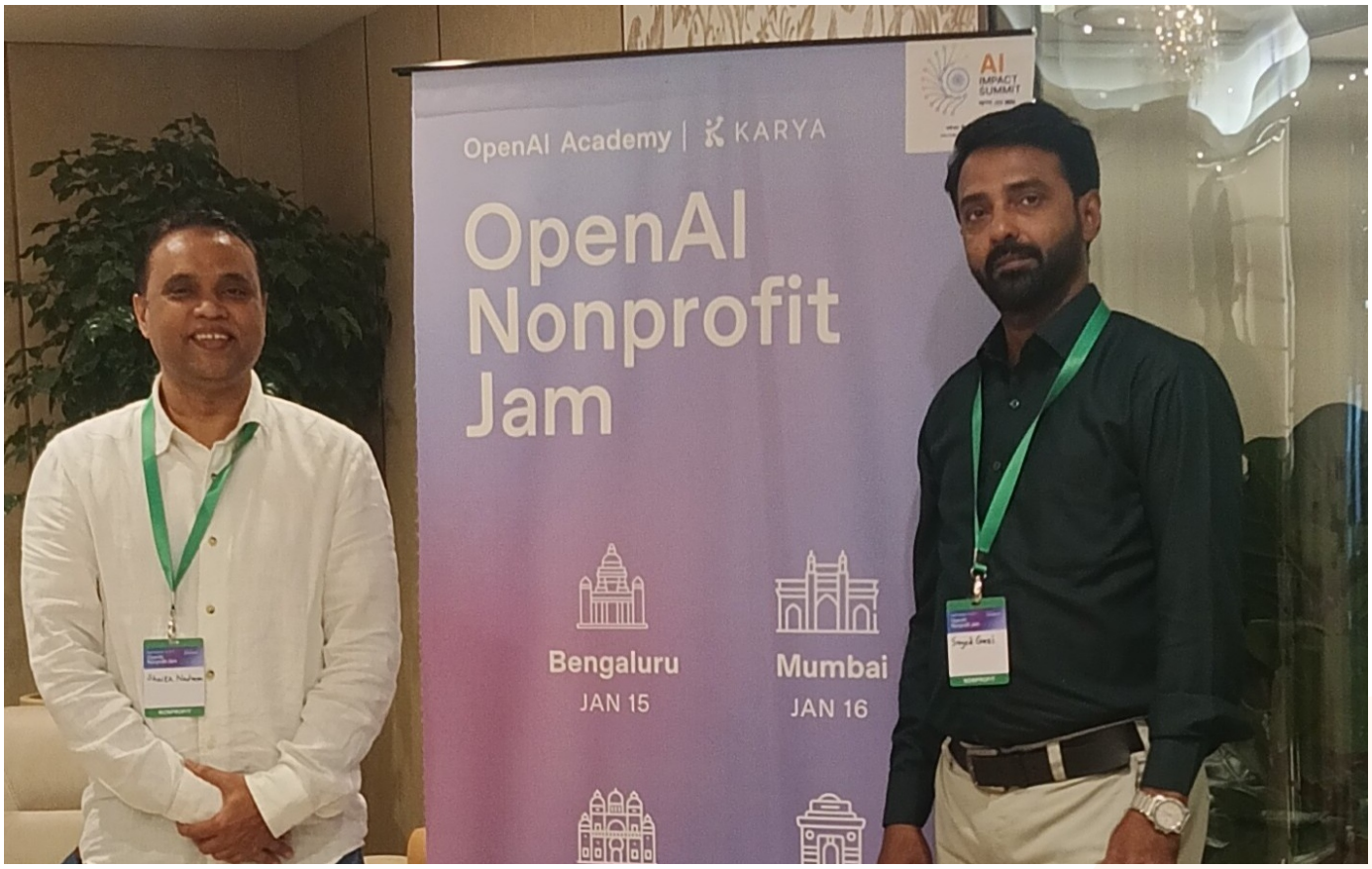
A key milestone was the migration of programme data onto the Dalgo platform, creating a unified data ecosystem with real-time dashboards accessible to 317 users. By reducing reporting timelines, minimising data silos and strengthening cross-programme monitoring, the platform has enabled more informed decision-making and enhanced organisational accountability.

The team further strengthened SNEHA's digital infrastructure through cloud optimisation, creating a secure, scalable and cost-effective environment while building greater in-house technical expertise. The revamped intranet evolved into a central digital workspace, complemented by improved use of Google Workspace to enhance collaboration, document management and knowledge sharing across teams.

Technology continued to strengthen programme delivery. The MERA referral system was expanded to additional Primary Health Centres (PHCs), alongside the launch of the MERA iOS application, improving accessibility for healthcare providers. Enhancements to the Frappe-based patient management system and continued development of the SNEHA Knowledge Centre's Learning Management System (LMS) further strengthened digital service delivery.

SNEHA also leveraged artificial intelligence to improve community engagement. The AI-enabled WhatsApp chatbot reached over 1,200 beneficiaries with personalised health information, earning national recognition for its innovative contribution to social impact.

Together, these advancements have strengthened SNEHA's digital foundation, positioning the organisation to harness data, technology and artificial intelligence to deliver greater impact for the communities it serves.



HUMAN RESOURCES

Investing in People, Inspiring Excellence

At SNEHA, our people are our greatest strength. During the year, the Human Resources function focused on fostering collaboration, strengthening employee wellbeing and building the capabilities needed to drive greater organisational impact.

To encourage innovation and cross-functional collaboration, SNEHA launched the Cross Functional Team Excellence Award 2025–26. Employees from diverse programmes and functions came together to develop practical solutions addressing organisational and community priorities, generating innovative ideas ranging from volunteer engagement and healthy food practices to digital transformation and youth participation. The initiative strengthened teamwork, encouraged creative problem-solving and laid the foundation for scalable solutions to be implemented in the coming year.

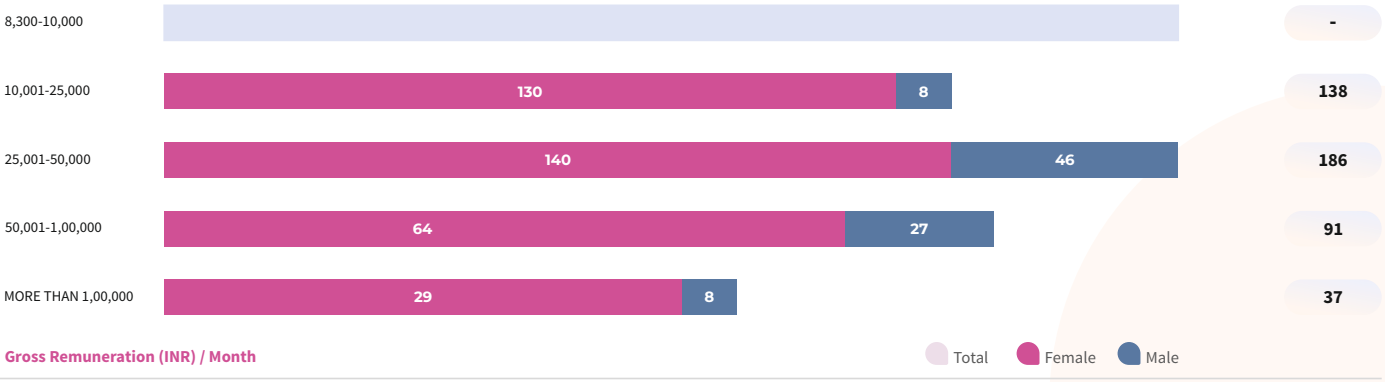
Recognising that resilient teams deliver greater impact, SNEHA continued to invest in employee wellbeing through organisation-wide self-care initiatives and workshops on Rational Emotive Behaviour Therapy (REBT). These sessions equipped employees with practical tools to manage stress, strengthen emotional resilience and promote healthier workplace relationships, while fostering a culture where wellbeing is valued alongside performance.

Building technical competencies also remained a priority. Following the Training Needs Identification exercise, SNEHA launched a six-month Proposal Writing Bootcamp to strengthen grant-writing and resource mobilisation skills. Through intensive learning, practical assignments and mentoring, 12 Programme Coordinators successfully completed the programme, enhancing the organisation's capacity to develop high-quality proposals.

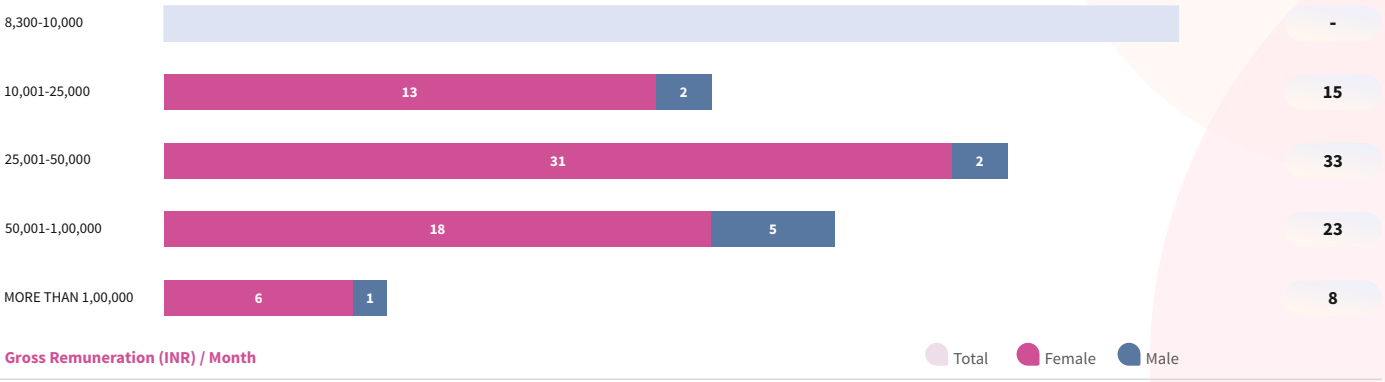
Together, these initiatives reflect SNEHA's commitment to nurturing a collaborative, capable and resilient workforce, ensuring our people continue to drive meaningful and sustainable change for the communities we serve.

STAFF COMPOSITION & COMPENSATION

Full Time Employees



Part Time Employees



CAPACITY BUILDING AND LEARNING DEVELOPMENT



Strengthening People, Strengthening Impact

Building the knowledge, skills and leadership of our people remains central to SNEHA's mission. During the year, the Capacity Building, Learning & Development function continued to strengthen organisational capabilities through structured learning, leadership development and a strong focus on values and competencies.

A follow-up Staff Motivation Survey was conducted to understand employee engagement and identify opportunities for improvement. Building on feedback from the previous survey, the questionnaire was simplified to encourage wider participation and generate more meaningful insights to inform organisational action.

SNEHA also continued its long-term competency development journey, reinforcing a mission-driven culture across the organisation. Refresher sessions reached nearly 90% of employees, while 373 staff members participated in a competency assessment, with 84% demonstrating a strong understanding of the framework. The next phase will focus on cultivating a growth mindset across teams.

Workshops on Professional Behaviours and Leaders as Mentors equipped SNEHA field staff and supervisors with practical skills to strengthen performance and leadership. Additional training on Competency-Based Interviewing enhanced recruitment capabilities among Managers and Coordinators, supporting more structured and objective talent selection.

For the first time, Directors facilitated sessions on SNEHA's organisational values, reinforcing a culture where leadership models the behaviours and principles that define the organisation. By investing in continuous learning, leadership and organisational culture, SNEHA is building a capable, motivated and values-driven workforce equipped to deliver lasting impact.

Fundraising - Key Highlights

In the year 2025–26, SNEHA was able to successfully raise funding for both programmatic and non-programmatic areas of work, such as Research and central operating costs. We added new partners across various programmes, including Amazon, Grand Challenges Canada, Girl Effect, IMC India Securities, La Kasa Foundation, Mankind Pharma, Max Healthcare, Oberoi Realty, and Tata Trusts. Several long-standing partners—such as the Azim Premji Philanthropic Foundation, Veha Foundation, and HSBC—enhanced their support across multiple projects. We also continued to receive valuable support from our erstwhile partners, including the Epic Foundation, Cipla Foundation, Morgan Stanley, and GlaxoSmithKline Pharmaceuticals.

We received an excellent response for the two fundraisers held in February and March 2026, which raised ₹66 lakhs from corporates and individuals. The fundraisers help raise unrestricted funding for SNEHA's central operations, which are critical support functions for the programme interventions. A joint event was held with Dasra and the Veha Foundation to raise awareness about Palliative Care among high net worth individuals interested in supporting this important cause area. We successfully raised ₹29 lakhs through the Tata Mumbai Marathon 2026. This milestone included individual contributions as well as corporate support from HSBC, Nomura Services India Private Limited, and EAAA India Alternatives Limited. On race day, nearly 110 corporate representatives participated to support SNEHA, running with great enthusiasm and commitment alongside our individual runners.

A key focus area this year was deepening our engagement with schools. Students from the Oberoi International School (JVLR) set up a library for youth at our Dharavi centre. Additionally, youth from our EHSAS programme participated in a collaborative art and craft activity at The Cathedral & John Connon School alongside Class VI students.

SNEHA was awarded the Gold certification by Give for the year 2025. We also received the Equivalency Determination certificate valid till March 2027.



Communications - Key Highlights

SNEHA Won Two Prestigious Awards

SNEHA's continued commitment to advancing the health, nutrition and safety of women, adolescents and children earned national recognition this year, celebrating the collective efforts of our communities, partners and teams.

SNEHA was named **First Runner-Up – Certificate of Excellence in the Urban Category at the Glenmark Nutrition Awards 2026,** honouring its efforts to bring communities and public health systems together to improve maternal and child wellbeing.

SNEHA won the **Popular Choice Award at the Koita Foundation Tech Awards 2025 for 'Phonewali SNEHA Didi',** an AI-enabled WhatsApp chatbot bringing personalised maternal, child health and nutrition guidance to women in vulnerable urban communities. The award recognises how technology can extend the reach of trusted health information and support beyond traditional service delivery.

Scan to read the coffee table book

Celebrating a Legacy, Amplifying a Milestone

To honour our Founder receiving the Padmi Shri award, the SNEHA team conceptualised and curated a **Coffee Table Book for Dr Armida Fernandez,** bringing together heartfelt messages, memories and wishes from students, colleagues and well-wishers across the world. More than a collection of tributes, the book became a deeply personal keepsake celebrating the relationships and lives touched by Dr Fernandez's journey, and was warmly appreciated by Dr Fernandez, her family and the SNEHA Board of Trustees.

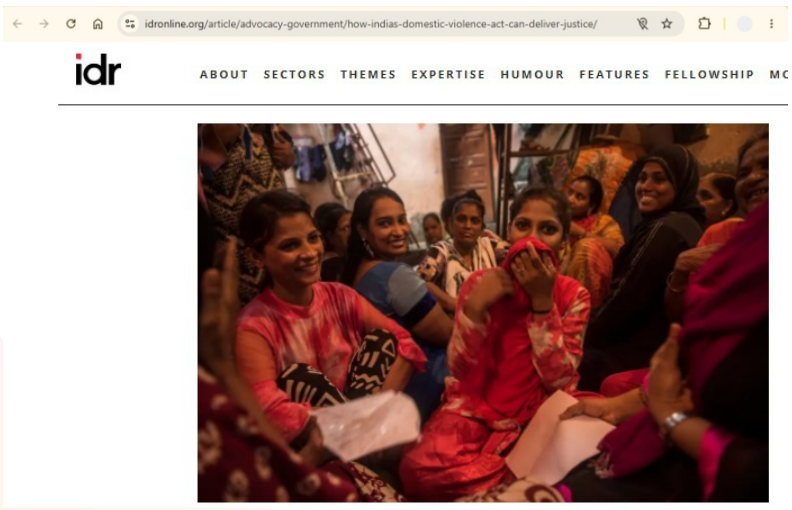
Turning Organisational Expertise into High-Impact Public Discourse

SNEHA's thought leadership articles were shared on various platforms to amplify the content and reach the relevant audiences.

A strong example was Two Decades On: Strengthening the Implementation of the PWDVA for Real Justice and Protection, which was published in India Development Review (IDR) in both English and Hindi.

https://idronline.org/article/advocacy-government/how-indias-domestic-violence-act-can-deliver-justice/





FINANCE

At SNEHA, our Finance Domain ensures responsible management of funds to achieve our mission and objectives. We ensure transparency, accountability, and compliance with legal and donor requirements.

Financial Highlights (2025-26)

- **Total revenue: ₹48.18 Cr** (Domestic: **₹32.38 Cr** & Foreign: **₹15.80 Cr**)

₹41.38 Cr (86%)
Grants

₹4.07 Cr (8%)
Donations

₹2.73 Cr (6%)
Other Income

- **Total Expenses:** ₹43.55 Cr- 82% of expenses directly allocated to programs and services

Prudent financial management has led to financial stability

Key Achievements

- Maintained clear records and processes for accountability and transparency
- Provided accurate and timely financial information to stakeholders
- Ensured 100% compliance with applicable laws, regulations, and contractual obligations
- SNEHA received its renewal for 12A and 80G for a further period of 10 years and 5 years respectively.

Gratitude

We're grateful to our donors, funders, and supporters who trusted us with their resources, enabling us to make a meaningful impact in the lives of programmes participants, and communities.



SUPPORTERS & DONORS

For Donations of INR 25,000 and above

- Ada Ribeiro
- Akash Singh
- Alan Louis Barretto
- Allen Sequira
- Amelia Correa
- Ami Ashish Gumashta
- Anantharaman Mahadevan
- Andrew Gracias
- Ankita Sharma
- Ankur Singh
- Ann Mclare Dlima
- Arti Havaldar
- Ashish Yadav
- Ashley Biharilal Nagpal
- Avinash Madhav Nayak
- Ayush Sharma
- Bharat Jaisinghani
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- Dinah Saldanha
- Dorothy Lynn Wagle
- Flora Anthony Alemao
- Gauri Nayar
- Glenn Mario Saldanha
- Gloria Vaz
- Gwendoline Fernandez
- Harit Soni
- Helen Margaret Mathias
- Imtiaz Anwarally Panjwani
- Isha Romar Correa
- Jacqueline Marie Lucy Saldanha
- Jamil Ahmed Khatri
- Jasmine Jokhi
- Jayson Fernandes
- Jeannette Leopoldina Lobo
- Joseph Cajetan D'lima
- Kalpana Iyer
- Kashmira Kale
- Kevin Joseph Mathew Colaco
- Lambert Mathias and Uma Pandit
- Lawrence Desa
- Lilia Carvalho
- Lucius Lobo
- Madhusudhan D S
- Manan Yogesh Shah
- Maria Ina Menezes
- Mario Servulo Colaco
- Mary Patricia Soans
- Massimo Villa Multedo
- Mizan Rafik Tejani
- Monesh Sham Manghnani
- Monica Inayat Vaziralli
- Monica N Fernandes
- Narendra Nagindas Shah
- Natalie Mary Dutton
- Niren Shah
- Nirja Thakore Shah
- Nitin Mitra
- Nitish Singh
- Nivedita Sinha
- Pankaj Naik
- Paul Jeremias Fernandes
- Petronella Monica Alvares
- Piyush Goswami
- Prashant Kumar Gupta
- Prem Nipun Sheth
- Radhika Chandrakant Sangani
- Rhul Mukhedkar
- Rashmi Jalan
- Ravishankar Ramachandran Iyer
- Sambhav Chopra
- Sanjeev Narain Nichani
- Sanjiv Kakkar
- Seema Singh
- Sharon Fernandes
- Sharon Walter Rau
- Shashank Rai Goel
- Shashikala Sharat Menon
- Shiraz Kaderali
- Shreyas Prakash Panse
- Shrirang Dattatraya Dhavale
- Shrirang Laxman Chilapur
- Snehal Sriram
- Sujata Pranav Chawda
- Sundararajarao Sudarshan
- Sunita Shah
- Suraiya Rashid Merchant
- Udeep Kumar Agarwal
- Vanessa D'Souza
- Varoon Chandra
- Victor Ronald Sequeira
- Vikram Desai
- Vinay Pinto
- Vishal Jain
- Vohra Bhanu
- Yogesh Sajan Bhojwani
- Yolande Menezes
- Zarir Farokh Udwadia

INSTITUTIONAL & PROGRAMME DONORS

- Ador Foundation
- Agiliad Technologies Private Limited
- ALF Engineering Private Limited
- Amazon Development Centre (India) Private Limited
- Anil Plastics
- Animedh Charitable Trust
- ATE Chandra Foundation
- Azim Premji Philanthropic Initiatives Private Limited
- Basantsing Amil Dharmada Trust
- Chaplot Capital Private Limited
- Cipla Foundation
- D Decor Exports Private Limited
- Delta Nutritives Private Limited
- Dhanki Securities Private Limited
- DSP Asset Managers Private Limited
- EAAA India Alternatives Limited
- Epic Foundation France
- Epic Foundation UK Limited
- Epic Foundation (Switzerland)
- Essar Industries
- Fidelity Asia Pacific Foundation
- Filter Capital India Advisors LLP
- General Atlantic Private Limited
- Girl Effect
- GlaxoSmithKline Pharmaceuticals Limited
- Grand Challenges Canada
- H T Parekh Foundation
- Hindustan Lever Educational and Welfare Trust
- IMC India Securities Private Limited
- Jay Precision Products India Private Limited
- Jayalaxmi Charitable Trust
- Jewelex India Private Limited
- JP Morgan Chase Bank, N.A.
- Julius Baer Capital India Private Limited
- K & M Sheltors Private Limited
- Kavya Packaging
- Ketan Suryakant Deherkar HUF
- Koita Foundation
- Kotak Mahindra Asset Management Company Limited
- Laxmibai Dwarkadas Charity Trust
- L'Oreal Fund for Women
- Manan Limited
- Mankind Pharma Limited
- Maritime and Commerce Agency India LLP
- Max Healthcare Foundation
- Monsher Fire Controls Private Limited
- Morgan Stanley India Company Private Limited
- Myriad Canada
- N K Patni Charitable Foundation
- Nanhi Kali Trust
- Navodaya Foundation
- Nihchal Israni Foundation
- Nirlon Limited
- Nomura Services India Private Limited
- NVP Venture Capital India Private Limited
- Oberoi International School JVLR
- Oberoi Realty Limited
- Online Giving Foundation
- P N Writer and Company Private Limited
- Pentagon Charitable Foundation
- PM Ventures Private Limited
- Prime Focus Ltd.
- RAAB Investments Private Limited
- Reliance Industries Ltd.
- Rohini Nilekani Philanthropies Foundation
- Sheetal Lodha Foundation
- Signet Excipients Private Limited
- STCI Finance Limited
- Sukhesh Marketing Private Limited
- Switz Food Private Limited
- TATA Education and Development Trust
- Tech4Dev Foundation
- Teryair Equipment Private Limited
- The Hongkong and Shanghai Banking Corporation Limited
- The Mehran Edulji Bilimoria Charity Trust
- The Sajjan Jain Support Trust
- The UK Online Giving Foundation
- Tiger Baby Digital LLP
- UBS AG
- United Way of Mumbai
- University College London
- UPL Limited
- Valuex Wealth Connect LLP
- Veha Foundation
- Verein Manus AD Mundum
- Virtuous Capital Limited
- Wipro Cares
- Wipro Foundation
- Zee Entertainment Enterprises Limited

Financial Reports

SNEHA (Society for Nutrition Education and Health Action)

Balance Sheet - (Schedule VIII {Vide Rule 17 (1)}) as at 31 March 2026

(All amounts are in INR Lakhs)

Registration No. E- 17858- Mumbai

As at 31 March 2025	FUNDS AND LIABILITIES	Note	As at 31 March 2026	As at 31 March 2026	As at 31 March 2025	PROPERTY AND ASSETS	Note	As at 31 March 2026	As at 31 March 2026
	Trusts Funds or Corpus :-	3				**Immovable Properties :- (at cost)**			
562	Balance as per last Balance Sheet		562			Balance as per last Balance Sheet		-	
	Adjustment during the year (give details)		-	562		Additions during the year		-	
						Less : Deductions during the year		-	
	Other Earmarked Funds :-				-	Depreciation up to date		-	-
	- Depreciation Fund		-						
	- Sinking Fund		-			**Investments :-**			
	- Reserve Fund		-		-			-	-
2,102	- Any Other Fund	4	1,865	1,865					
	Loans (Secured or Unsecured) :-								
	- From Trustee		-			**Furniture & Fixtures, Computers, Equipments, etc.**	7		
-	- From Others		-	-		Balance as per last Balance Sheet		189	
						Additions during the year		75	
	Liabilities :-					Less : Sales / adjustments during the year		11	
121	- For expenses	5	584		189	Depreciation up to date		68	185
-	- For advances		-						
						Loans (Secured or Unsecured) Good/doubtful :-			
-	- For Rent and Other Deposits		-						
6	- For sundry credit balances	6	4	588		Loans Scholarships		-	
					-	Other Loans		-	-
	Income and Expenditure Account :-								
1,374	Balance as per last Balance Sheet		1,671			**Advances :-**			
-	Less : Appropriation, if any		-		-	To Trustees		-	
297	Add : Surplus		463		2	To Employees	8	2	
	(as per Income and Expenditure Account)								
	Less : Deficit				-	To Contractors		-	
-	(as per Income and Expenditure Account)		-	2,134	-	To Lawyers		-	
					38	To Others	9	40	42
					-	**Income Outstanding :-** Rent		-	
					87	Interest	10	57	
					206	Other Income	11	161	218
					352	**Cash and bank balances :-** In Saving Account	12	690	
					-	In Current Account		-	
					3,587	In Fixed Deposit Account	13	4,014	
					-	With the trustee		-	
					-	Cheques in hand		-	
					0	With the manager	14	0	4,704
4,461	**TOTAL**			5,149	4,461	**TOTAL**			5,149

Significant accounting policies **2**

The notes referred to above and annexed herewith form an integral part of the Financial Statements.

The above Balance Sheet, to the best of our knowledge and belief, contains a true account of the Funds and Liabilities and of the Property and Assets of the Trust as at 31 March 2026.

As per our report of even date attached.

For CNK & Associates LLP
Chartered Accountants
Firm's Registration No: 101961W/W100036

Manish Sampat
Partner
Membership No: 101684
Place: Mumbai
Date: 29th September 2026

For SNEHA (Society For Nutrition Education And Health Action)
Registration No. E- 17858- Mumbai

Dr. Armida Fernandez
Trustee

Place: Mumbai
Date: 29th September 2026

Mary Patricia Soans
Trustee

Place: Mumbai
Date: 29th September 2026

Financial Reports

SNEHA (Society for Nutrition Education and Health Action)

Income and Expenditure Account - (Schedule IX {Vide Rule 17(1)}) for the year ending 31 March 2026

(All amounts are in INR Lakhs)

Registration No. E- 17858- Mumbai

For the year ended 31 March 2025	EXPENDITURE	Note	For the year ended 31 March 2026	For the year ended 31 March 2025	INCOME	Note	For the year ended 31 March 2026
	To Expenditure in respect of properties :-				By Rent :-		
-	Rates, taxes, cesses		-	-	Accrued		-
-	Repairs and maintenance		-	-	Realised		-
-	Salaries		-				
-	Insurance		-		By Interest :-		
-	Depreciation		-	58	Accrued	21	71
-	Other Expenses		-	199	Realised	21	196
				-	On Securities		-
226	To Establishment expenses	15	696	-	On Loan		-
-	To Remuneration To Trustees			-	On Bank Account		-
			-				
-	To Remuneration To Head of Math		-	-	By Dividend		-
-	To Legal expenses		-	182	By Donations in cash or kind	22	407
9	To Audit fees	16	11	3,557	By Grants	23	4,138
-	To Contribution and Fees		-	38	By Income From Other Sources	24	6
	To Amount Written Off :-			-	By Transfer From Reserve		
-	Bad Debts		-				-
-	Loan Scholarships		-	-	By Deficit carried over to Balance Sheet		-
-	Irrecoverable rents		-				
14	Other Items	17	0				
-	To Miscellaneous expenses		-				
69	To Depreciation	7	69				
-	To AmountsTransferred to Reserve or Specific Fund		-				
	To Expenditure on objects of the Trust :-						
	(classification is as certified by trustees)						
-	(a) Religious		-				
429	(b) Educational	18	410				
286	(c) Medical relief	19	348				
-	(d) Relief of Poverty		-				
2,704	(e) Other Charitable Objects	20	2,821				
297	**To Surplus carried over to Balance Sheet**		463				
4,034	**TOTAL**		**4,818**	**4,034**	**TOTAL**		**4,818**

Significant accounting policies **2**

The notes referred to above and annexed herewith form an integral part of the Financial Statements.

As per our report of even date attached.

For CNK & Associates LLP
Chartered Accountants
Firm's Registration No: 101961W/W100036

Manish Sampat
Partner
Membership No: 101684
Place: Mumbai
Date: 29th September 2026

For SNEHA (Society For Nutrition Education And Health Action)
Registration No. E- 17858- Mumbai

Dr. Armida Fernandez
Trustee

Place: Mumbai
Date: 29th September 2026

Mary Patricia Soans
Trustee

Place: Mumbai
Date: 29th September 2026

Financial Reports

SNEHA (Society for Nutrition Education and Health Action)

Receipts & Payments Account for the year ending 31 March 2026

(All amounts are in INR Lakhs)

Registration No. E- 17858- Mumbai

For the year ended 31 March 2025	RECEIPTS	For the year ended 31 March 2026	For the year ended 31 March 2026	For the year ended 31 March 2025	PAYMENTS	For the year ended 31 March 2026	For the year ended 31 March 2026
	Opening Cash and bank balances :-						
521	In Saving Account	352		3,437	Expenditure on Objects of the Trust		3,124
-	In Current Account	-					
3,177	In Fixed Deposit Account	3,587					
				220	Expenditure on Administration Expenses		693
	With the Manager :						
2	Cheques in hand	-		42	Capital items/ assets purchased		75
-	Cash in hand	0	3,939				
				6	Payment towards Security Deposit		0
3,771	Grants & donations received (Includes opening receivable of previous year)		4,380	99	Amount Paid (received towards Grant/Donations)		-
-	Corpus Funds received		-	1	Contribution/Payment Gateway (net change)		0
	Interest income						
21	- in saving account		28				
244	- deposit account		242				
2	Income from Other Sources received		3		**Closing Cash and bank balances :-**		
				352	In Saving Account	690	
				-	In Current Account	-	
				3,587	In Fixed Deposit Account	4,015	
-	Amount received on Sale/Disposal of Assets		2		With the Manager :		
				-	Cheques in hand	-	
6	Refund of Security Deposit		2	0	Cash in hand	0	4,705
7,744	**TOTAL**		**8,597**	**7,744**	**TOTAL**		**8,597**

As per our report of even date attached.

For CNK & Associates LLP
Chartered Accountants
Firm's Registration No: 101961W/W100036

Manish Sampat
Partner
Membership No: 101684
Place: Mumbai
Date: 29th September 2026

For SNEHA (Society For Nutrition Education And Health Action)
Registration No. E- 17858- Mumbai

Dr. Armida Fernandez
Trustee

Place: Mumbai
Date: 29th September 2026

Mary Patricia Soans
Trustee

Place: Mumbai
Date: 29th September 2026

List of Abbreviations / Glossary

Direct Programme Participants - Individuals, groups or organisations that benefit directly from an intervention, or who are the direct recipients of SNEHA's activities.

Individuals, groups or organisations who are not the direct target of SNEHA's interventions, but may indirectly experience or benefit from the activities with direct programme participants.

AFHC	Adolescent Friendly Health Clinic
ANC	Antenatal Care
ANM	Auxiliary Nurse Midwife
ASHA	Accredited Social Health Activist
BCC	Behaviour Change Communication
BMC	Brihanmumbai Municipal Corporation
BNMC	Bhiwandi Nizampur Municipal Corporation
BPCR	Birth Preparedness Complication Readiness
CAG	Community Action Groups
CBO	Community-Based Organisation
CDPO	Child Development Project Officer
CSR	Corporate Social Responsibility
CHV	Community Health Volunteers
CMAM	Community-based Management of Acute Malnutrition
CO	Community Organizer
DWCD	Department of Women and Child Development
ECD	Early Childhood Care and Development
EHSAS	Empowerment, Health and Sexuality of Adolescents
GBV	Gender-based Violence
ICDS	Integrated Child Development Services
IFA	Iron and Folic Acid
IM	Information Management
IYCF	Infant and Young Child Feeding practices
KDMC	Kalyan-Dombivili Municipal Corporation
LTMGH	Lokmanya Tilak Municipal General Hospital (Sion Hospital)
M&E	Monitoring and Evaluation
MAM	Moderately Acute Malnutrition
MAS	Mahila Arogya Samiti (Women's health committees)
MBMC	Mira-Bhayander Municipal Corporation

Indirect Programme Participants - Individuals, groups or organisations who are not the direct target of SNEHA's interventions, but may indirectly experience or benefit from the activities with direct programme participants.

MMR	Mumbai Metropolitan Region
MMRDA	Mumbai Metropolitan Region Development Authority
MNT	Medical Nutrient Therapy
MOH	Medical Officer Health
MWRA	Married Women in Reproductive Age
NGO	Non-Governmental Organisation
NRRTC	Nutrition Rehabilitation and Research Training Centre
NUHM	National Urban Health Mission
OPD	Out-Patient Department
OSC	One Stop Centre
PDS	Public Distribution System
PHC	Primary Health Centre
PHN	Public Health Nurse
PVWC	Prevention of Violence against Women and Children
RMNCH	Reproductive, Maternal, Newborn and Child Health
RMNCH+A	Reproductive, Maternal, Newborn, Child and Adolescent Health
RPC	Romila Palliative Care
SAM	Severe Acute Malnutrition
SNEHA	Society for Nutrition, Education and Health Action
SHG	Self-Help Group
THR	Take Home Rations
TMC	Thane Municipal Corporation
TB	Tuberculosis
UMC	Ulhasnagar Municipal Corporation
UPHC	Urban Primary Health Centre
VCDC	Village Child Development Centre
VVMC	Vasai-Virar Municipal Corporation
WASH	Water, Sanitation and Hygiene
WHO	World Health Organisation

SNEHA®

RAISING HEALTH FOR ALL

SNEHA CENTRAL OFFICE

Behind Building No. 11,
BMC colony
Shastri Nagar, Santacruz West
Mumbai - 400 054.

+91 99201 99188

CRISIS HELPLINE

+91 91675 35765

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