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Chairperson’s Message

We are pleased to share the achievements of our Organization with colleagues, friends and other organizations involved in public health activities through-out Pakistan.

This year we have successfully completed two major projects, related to immunization, one which was based in hard to reach areas of Karachi. Its successful completion has led to community involvement which we hope will sustain a demand for immunization including polio. Awareness in families will also be conducive towards setting in health seeking behavior.

Our second completed project was in Sanghar District and covered not only immunization but nutrition of children and women. Coverage was beyond our target. This also helped us to contribute towards an ‘Alternate Report’ which was included in the GVAP through the GAVI CSO Constituency.

This brings me to GAVI and HELP’s involvement in the Global Alliance for Vaccination and Immunization. HELP has been a member of its Steering Committee for the past 2 years and as such has pioneered a Pakistan based CSO platform labeled as Pakistan CSOs Coalition for Health & Immunization. Presently with collaboration of a total of 63 like minded CSOs in all provinces of Pakistan. With the coordination of a member CSO ‘CHIP’, we have been able to raise our voice nationally (as member of the Pakistan Intra-Coordinating Committee of EPI0 and globally. As a representative of HELP, I have had the good fortune (and challenge) of being nominated for a position on the Policy and Programme Committee of GAVI. We hope to improve the visibility of work done by CSOs to improve equity in immunization of children.

Through our own efforts we have now got on many individuals as ‘Friends of HELP’. Through their efforts, we are advancing our efforts on Education (starting our own school), advancing work on Solar related facilities in a large village we have adopted in Tharparker District.

These are exciting times in Pakistan. We look forward to another progressive year.

On a personal note, I was able to perform the Hajj/Pilgrimage after a few years of trying to get there. For me, this has been the culmination of a successful year.

Wishing all a very Happy and peaceful 2016.

Prof. Dure Samin Akram
Honorary Chairperson
"Through needs assessment to design and implement replicable models of health promotion, health delivery and education for women and children"

Through concerted efforts

- Prevent infant mortality due to malnutrition and preventable diseases.
- Provide a healthy environment to women of all ages
- Educate women and children
HELP - An Introduction

HELP is a non-Government, non-profit Community Based Primary Health care and Education Programme. It was established in 1990 and is registered with the Government Department of Social Welfare SSWD since 1991. Since Feb 2009, HELP is certified by Pakistan Centre for Philanthropy (PCP).

HELP’s team comprises of highly committed professionals committed to the development of primary health care. These include expert master trainers serving in highly reputable medical institutions, experts partnering with UNICEF, WHO, National BFHI & IYCF programmes on nutrition related issues, chartered accountants, journalists and social scientists. HELP is also a member of Nutrition task force and technical working group on Nutrition.

The organization’s focus is on the health care of women of child bearing ages and children, with special emphasis on nutrition, immunization, reproductive health, and family planning. HELP is also involved in pre-primary education of children, early child development and adult literacy projects.

HELP has a network of Community Health Workers (CHWs) in its communities. These workers are trained on primary health care and deliver the same to the community at their doorsteps. Special emphasis is given on training of these workers and the medical staff of HELP, on infant and young child feeding. Separate workshops are held on breast feeding. Nutrition counseling is provided through mother support groups, during home visits by the CHWs and at the MCH centres.

Presently there are > 500 mother support groups in its communities. Growth monitoring and promotion of nutrition in children <5 years has been its focus. Mothers are encouraged to practice Exclusive breast feeding till 6 months and continuation of breast feeding till 2 years.

HELP’s Nutrition Resource Centre has been involved with Government & UNICEF in providing Infant and Young Child Nutrition trainings in province of Sindh. It has also developed training material for workshops on nutrition and has conducted trainings of government and non-government health care personnel on establishment of Stabilizing centers, IYCF, maternal nutrition and counseling techniques.

HELP is member of South Asian Infant Feeding Research Network (SAIFRN); through this platform, it has conducted research on nutrition related policies in Pakistan. HELP has undertaken numerous research projects including those on nutrition. HELP & its members have published several studies in national and international journals of repute. Its research study on “Home based rehabilitation of severely malnourished children” has been published in JPMA (Feb. 2010)”. Another research paper on ‘Home based nutrition rehabilitation of severely malnourished children’ has been accepted by JPMA for publication.
Executive Committee (Honorary)

- Prof. Dure Samin Akram  Chairperson
- Prof. Fehmina Arif  Vice President
- Dr. Gul Rukh Nency  General Secretary
- Ms. Mona Sheikh  Joint Secretary
- Associate Prof. Neel Kanth  Treasurer
- Associate Prof. S.K Kausar  Member
- Mr. Fareed Khan  Member
- Hilda Saeed  Member
- Ms. Erum Ghazi  Member

Management:

- Senior Program Manager  Dr. Yasmeen Suleman
- Program Manager  Dr. Amara Shakeel

General Body members:

- Dr. Imtiaz Mandan
- Dr. Fazila Zamindar
- Ms. Reema Jaffery
- Dr. Sabin Adil
- Dr. Shakir Mustafa
- Dr. Yasmeen Akbani
- Dr. Jaleel Siddiqui
- Dr. Qadir Pathan
- Ms. Shala Usmani
**Sub committees:**

**Audit Committee:** Mr. Farid Khan, Prof. Fehmina Arif and Dr. Yasmeen Suleman

**Fund Raising Committee:** Ms Reema Jaffery, Dr. Fazila Zamindar, Dr. Amara Shakeel, Ms. Mona Shaikh and Ms. Erum Ghazi

**Research Committee:** Dr Neelkanth, Dr. D.S.Akram, Ms. Kauser SK, Prof. Fehmina Arif and Dr. Imtiaz Mandan

**Purchasing and Procurement committee:** Prof. Fehmina Arif, Dr. Yasmeen Suleman and Dr. Gulrukh Nencey

**Communication Committee:** Ms. Kauser, Dr Ammara Shakeel, Dr. Farhana Masroor and Mrs. Shahla Usmani.

**Editorial Board:**

Dr. Yasmeen Suleman
Ms. Hilda Saeed
Dr. Mehak Hanif
OUR DONORS:

- MISEREOR
- GAVI
- University of Sydney Australia
- United Nation Women Guild
- Rotary Club Karachi South
- Rotary Club Brantford Canada
- UNICEF
Accountability and Transparency:

HELP has a centralized financial management system being operated through finance section of the organization. Financial transactions at HELP are carried out through a separate bank account dedicated for each project. Each bank account is operated by minimum two signatories.

To ensure transparency and excellence in financial reporting internal audit has been sourced out to Haroon Zakaria and Company, Chartered Accountants. The team from the audit company carries out regular quarterly internal audits of all our sections independently and submits its report to the Board.

The internal audit committee of the organization consists of two members from the Board and one member from the management. One of the Board members is a senior FCA.

External audit is performed annually by S.M Rehan and Company, Chartered Accountants.

Both the internal and external auditors are included in the QCR list of ICAP.

Since 2009, HELP is also certified by Pakistan Centre for Philanthropy.

Monitoring, Evaluation and Reporting:

Each Project Managers are responsible for implementing the project as per work plan. Each project Manager submits regular reports to the Program Manager. Regular internal monitoring is performed by a team from HELP’s management from its Head office. External monitoring is done by an independent monitoring and evaluation (M&E) officer. The M&E officer submits his report directly to the HELP’s Board. The outcomes of both internal and external monitoring visits are documented. Appropriate and timely actions are taken in response to reports of monitoring.

- Community Based Primary Health Care Project, Neelum Colony and Lower Gizri, Saddar Town, and Khudai Ki Basti, Gadap Town, Karachi
- HELP Maternal and Child Health Centre, Lower Gizri, Saddar Town Karachi
- HELP Maternal and Child Health Centre, Neelam Colony, Saddar Town, Karachi
- HELP Maternal & Child Health Centre at Khuda Ki Basti, Gadap Town Karachi
- Social Mobilization, to increase awareness, knowledge and acceptance of routine immunization and other lifesaving health interventions
- HELP Nutrition Resource Centre for training & research
- Effectiveness of mobile phone and peer counseling on IYCF practices in Pakistan- A pilot study
- Health policy and planning- Analysis
- Pre-Primary School, Lower Gizri Saddar, Town Karachi
- Pre-Primary School, Neelum Colony, Saddar, Town Karachi
- Pre-Primary School, Ghaggar bin Qasim Town, Karachi
- Home Schools in Ghaggar, Bin Qasim Town
Community Based Primary Health Care Project

With support from MISEREOR, HELP has set up a network of trained Community Health workers (CHWs) in its target communities. The CHWs deliver primary health care at the door steps of the community. These CHWs are assisted by social mobilizers and supervised by Lady Health Supervisors (LHS) and field coordinators.

Neelum /Shah Rasool Colony, Saddar Town, District Karachi South.
Total population: 28,000
Community health workers (CHWs) deployed in a population of 9,000
Facility based services benefit the total population of the area

Lower and Upper Gizri, Saddar town, District Karachi South.
Total population: 35,000
Community health workers (CHWs) deployed in a population of 6,000
Facility based services benefit the total population of the area

Khuda ki Basti and adjacent villages, UC 5, Gadap Town, Karachi.
Total population: 35,000
Community health workers (CHWs) deployed in a population of 15,000
Facility based services benefit the total population of the area plus the adjoining population of 100,000

Goal:
The overall goal of the project is to improve the living conditions of the slum dwellers substantially, in particular with regard to environmental hygiene, health and education situation for mothers and children.
Objectives:
- Increasing the number of women who are cared for before, during and after birth.
- Strengthening of birth spacing in the target areas.
- Raising knowledge of target group on reproductive health.
- Provide information on sexually transmissible diseases and reduction of these diseases.
- Ensure that more than 95% of immunization of children under 5 years is sustained and the tetanus coverage immunization for women is increased.
- Provide health awareness on a balanced diet for children and on the importance of breast feeding.
- Rehabilitation of undernourished children by psycho-social care and selected nutrition.
- Provide Medical treatment for general childhood and women’s illnesses.

Cooperation with other health structures:
A network of Government hospitals, care for pregnant women and family planning hospitals is established for the referral of patients.

National and Provincial Polio Immunization Days:
HELP’s CHWs, Lady Health Supervisor, and Social Mobilizers actively participated in the national and provincial immunization days. There have been no cases of polio in HELP’s communities since the past many years.

Training of Community Health Workers
Training sessions are conducted for community health workers by qualified master trainers on different health issues. Following trainings were conducted during the reporting period:
- Counseling and social mobilization of women
- Safe delivery

Additionally, during weekly meetings, community workers are briefed on various topics related to primary health care.

Achievement of Project objectives:
- >96% of children in the target area are vaccinated as per routine EPI schedule.
- >88.20% women of child bearing age are vaccinated against tetanus.
- >83% children delivered in the health facilities.
- 100% pregnant women received prenatal and post natal guidance.
- The demand for family planning has grown to 48.4%.
HELP Maternal and Child Health Centres

Facilities available at these centres include:
• General OPD
• Ante-natal & postnatal checkups
• Counseling of women on health with a special focus on nutrition, vaccination and hygiene
• Family Planning
• Immunization of children and women
• Growth Monitoring of children under 5 years
• Ultra Sound Services

HELP Maternal & Child Health Centre at Khuda Ki Basti, Gadap Town Karachi
Facilities available at the MCH centre include the following:
• General OPD
• Ante natal & post natal checkups
• Family planning services
• Counseling of women on health with a special focus on nutrition, vaccination and hygiene
• Immunization of children and women; 150 children were vaccinated at HELP MCH centre Khuda Ki Basti every month
• Growth Monitoring
• Ultrasound services
• Laboratory tests
• Ambulance service for transfer of patients to secondary and tertiary care services
• Facilities for normal delivery and inpatient maternity care
• Emergency medical care of children till their transfer to tertiary care

Achievements:
Total number of patients treated in OPD: 11,484
Total doses of tetanus toxoid administered to women 15-49 years old: 183,9
Total doses of BCG administered: 1,108
Total doses of OPV administered: 3,909
Total doses of Measles vaccines administered: 1,479
Total doses of combo vaccines administered: 1,460
1,642 Support group meetings were held, which were attended by 22,062 participants.
Social Mobilization, to increase awareness, knowledge and acceptance of immunization and other lifesaving health interventions

The project is being implemented in three Union Councils namely Manghopir, Union Council 4 and 5, Gadap Town, Karachi. The project objective is to improve care-seeking behaviors and creating demand of health services in the target area. The project is being funded by UNICEF.

Gadap town is one of the most underprivileged and least developed areas of Karachi. Most of it is rural and has remained deprived of basic facilities including education, potable water and healthcare. Government dispensaries and LHWs, which cover only 35% of the total population in the target union councils, are the only source of primary health care services in the area. There are a few, if any, midwives, in the area and trained TBAs are not available, which has further aggravated the maternal and neonatal mortality situation in the area.

The presently available services in the area including antenatal & post natal check-ups, routine vaccination and neonatal checkups, are not being availed by majority of the target population due to lack of awareness and illiteracy. Many households lack easy access to health care facilities and in some areas women are deprived of their right to avail the health facilities, due to cultural reasons. The target UCs, in general, and union council 4 in particular, has been a high risk area for wild polio. The Government and EPI authorities have failed to improve the dismal situation of the area's maternal and child health indicators, including low routine immunization coverage.

Under the project, HELP has done capacity building of 83 LHWs, LHS and Midwives in the area on behavioral change, communication and community mobilization, to promote the recommended key healthcare behaviors. Thirty focal families, each consisting of two members—mainly females, have been identified from the target community and trained on BCC related to maternal and child health. The focal families are actively pursuing the project targets. There has been a significant increase in the demand of health services in the target area which is expected to result in improvement of the health, hygiene and nutrition indicators in the target community.
- **Use of Mhealth for improving IYCF practices**
  A comparative multi-country study funded by AusAid and University of Sydney has been conducted by the five Member countries of South Asian Infant Feeding Research Network (SAIFRN) in their respective countries. Beside Pakistan the countries include Bangladesh, Sri Lanka, Nepal, and India. HELP assessed its feasibility in rural Sindh.

- **Overview of IYCF Policy Environment in Pakistan’ Sindh and Punjab**
  **Context:**
  Funded by AusAid and University of Sydney this is a part of the multi country research study being conducted simultaneously by member countries of South Asian Infant Feeding Research Network (SAIFRN). Beside Pakistan the countries include Bangla Desh, Srilanka, Nepal, and India.

  Phase I of the project included mapping of current policies that support counseling for IYCF in Sindh and Punjab in Pakistan and to Identify influential policy stakeholders for IYCF through net-mapping in Sindh. The work has been completed and report is being prepared for publication.

  Phase II of the project will consist of analysis of how these policy decisions are made and implemented in order to inform future policy development and to compare these policy approaches and their implementation to data regarding outcomes.

- **Effectiveness of Mobile Phone and Peer Counseling on IYCF Practices in Pakistan- A Pilot Study**
  Funded by AusAid and University of Sydney this is a multi country trial conducted by members of South Asian Infant Feeding Research Network (SAIFRN) in their respective countries. Beside Pakistan the countries include Bangladesh, Sri Lanka, Nepal, and India.

  The primary objective of the trial is to explore the potential of using mobile phones and peer counselors for IYCF counseling in low income countries.
HELP Nutrition Resource Centre for Training & Research.
HELP’s Nutrition Resource Centre is involved in research and trainings on maternal and child nutrition. Nutrition related research articles have been published in National and International journals of repute. It has a team of master trainers and has conducted numerous trainings on IYCF, CMAM and hospital management of malnourished children with complications, for government and non government health care workers in collaboration with the World Bank, USAID, UNICEF and WFP. It has also conducted trainings of master trainers on IYCF for Health care personnel of Agha Khan Health foundation.

Following research, it has formulated a special high caloric diet ‘NutriHELP” for management of malnourished children. A research paper related to it has been published in JPMA in Feb 2009 and another has been accepted for publication in JPMA.

Nutri-HELP has been used in various projects funded by the World Bank, GAVI, Pakistan Pediatric Association, MISEREOR and local philanthropists. It is also being used by Pediatricians in private and Public Hospitals.

There is high prevalence of malnutrition in mothers and children in the desert area of Sadhao region, District Sanghar. On request of Pakistan Rangers HELP Nutrition Resource Centre conducted a training workshop for their HCP posted at Pak-Indian border near Sadhao region.

The 3-day training workshop on identification of malnutrition and its management was held in June 2015, at Pakistan Rangers’ Sindh Wing 32 Headquarter, Hatungo, and District Sanghar. HELP also provide its high-density diet, Nutri-HELP, for rehabilitation of identified malnourished children.
Pre-Primary Schools:

- Lower Gizri Saddar Town, Karachi
- Neelum Colony Saddar Town, Karachi
- Ghaggar, bin Qasim Town Karachi

- Schools in Lower Gizri and Neelum Colony have morning and afternoon shifts
- The total enrolment in each school is 100
- 6 staff members have been employed at each school from the community

- Home Schools in Ghaggar, Bin Qasim Town.
Successful Completion of the Projects in 2014-2015

Mother and Child Friendly Community in Shadadpur:

Funded by GAVI, the Project commenced in January 2014 and ended in June 2015.
Target Area: Union Council Barhoon, Shahpur Chakar, Asgharabad and Maldassi, Taluka Shadadpur, District Sanghar.
The project was funded by GAVI and implemented in close coordination and cooperation with EPI, District health authorities and National programme for family planning and primary health care.

The objective of the project was to increase the routine vaccination rate among children and Tetanus Toxoid immunization among women of child bearing ages. Children less than 2 years age were also screened for malnutrition. Identified malnourished children, were referred to the nearest health facilities with nutrition program. In areas serviced by LHWs, their support was obtained to mobilize the children and CBAs for vaccination and screening for malnutrition and in vaccination. Due to shortage and non-availability of Government vaccinators, HELP utilized the services of its own vaccinators for this purpose.

Strong emphasis was given on arranging health awareness sessions for mothers and other household caretakers on immunization and Infant and Young Child Feeding (IYCF) practices.

Achievements

- 5012 children (88% of the total child population in target UC’s) reached and vaccinated.
- 13,104 CBAs, vaccinated against tetanus.
- 1,491 health awareness sessions conducted in the target areas, in which 23,409 females and 1,803 males participated.

World Immunization Week [24th – 30th April] Activities:
HELP organized a series of activities at its target communities in Karachi and Sanghar.
Awareness raising programs were held as follows:
- Pakhtoonabad and Wangi Goth UC 8, Gadap Town
- Khuda ki basti UC 5, Gadap Town
- Allah Rakha Goth and Sukhia Goth, UC 4 in Gadap town.
- With religious leaders Jamia Subgaatullah in Shahpur Chakar
- A seminar was held at HELP MCH centre, Khuda Ki Basti, UC 5 Gadap Town
- All 4 HELP Schools, in Saddar Town and Bin Qasim Town.

Basic Education Centres
HELP successfully completed its basic education project on 30th September 2014. The project was funded by Rotary Club Brant Ford Canada through Rotary Club Karachi South. Three basic education centres were established for one year in Khuda ki Basti, Gadap Town and Allahwalah Town, Korangi, Karachi. The students had earlier received four months non-formal education. After completion of the one year course, the students were facilitated for admission to grade five.
HELP signs MOU with APPNA institute of Public Health

HELP signed Memorandum of Understanding with APPNA Institute of Public Health (AIPH) Jinnah Sind Medical University (JSMU).

Promotion of Public Health has for long been an urgent need in Pakistan. The three year MOU will help bring opportunities for health promotion, disease prevention, and research; so as to achieve a sustainable, positive change in public health.

AIPH and HELP will jointly develop training and service provision programs, and strive to acquire and disseminate knowledge regarding health systems management, health promotion, and control of communicable diseases.

Furthermore, the AIPH will also develop public-private partnership models for Primary Health Care (PHC). Building partnerships with community based organisations will be the foremost step. This is where HELP; will play a key role. It will help to work on the joint objectives of AIPH and HELP to promote primary health care, increase its awareness in the community. The work in accordance with the MOU will broaden the vision of the concerned researchers, a step that will prove to be widely beneficial.

The MOU will facilitate the development of community training programmes, exposure exchange programmes, faculty exchange and joint events. It will also work towards the provision of infrastructure for the best interests of institutions and communities in the country.

The formal agreement for three years will facilitate capacity building courses, visiting academic staff, seminars and exposure programs. HELP is looking forward to this valuable partnership with great hope and interest.

The Australian fellowship award for Dr. D.S. Akram and Dr. Yasmine Suleman

Prof. D.S. Akram, Honorary Chairperson HELP and Dr. Yasmeen Suleman Senior programme Manager HELP, were awarded the Australian fellowship award by the department of foreign affairs and trade, Australia, under its fellowship program. As part of the fellowship, Dr. D.S. Akram and Dr. Yasmeen Suleman undertook a professional development program of study entitled ‘Enhancing capacity to strengthen policy and interventions to reduce child under-nutrition’. The program was hosted by Sydney Medical School, University of Sydney from 10-23 August 2014. The program included social network analysis and research methods related to policy analysis, mobile phone counseling and peer counseling on Infant and Young Child Feeding Practices in South Asia. The multi country research is being conducted by South Asia Infant Feeding Research Network (SAIFRN).
Annual General Body Meeting:
The General Body meeting of HELP was held on 1st November 2014, at HELP Neelum Health Centre, Zamzama Boulevard, Karachi. Dr. Yasmeen Suleman, Senior Programme Manager HELP, presented Annual programmatic report. Annual financial report was presented by Mr. Abdul Majid. Details of both the reports were discussed at the meeting. The members reviewed ongoing projects and set targets for the future.
THANK YOU

Friends of HELP

Mrs. Shaheena Islam
Dr. Tanveer Zubairi
Mr. Zafar Faridi
Dr. Fazila Zamindar
Mr. Sabiuddin
Mr. Asim Saleem
Mr. Hussain Kassam
EFU
Pak Oasis
Procter & Gamble Pakistan
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- Notes to The Financial Statement
- Schedule of Tangible Fixed Assets
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HEALTH EDUCATION AND LITERACY PROGRAMME
KARACHI

Financial Statements
For the year ended June 30, 2015
AUDITORS’ REPORT TO THE TRUSTEES

We have audited the annexed balance sheet of the HEALTH EDUCATION AND LITERACY PROGRAMME as at June 30, 2015 and the related income and expenditure account together with the notes forming part thereof (here-in-after referred to as the financial statements for the year then ended).

It is the responsibility of the Trustees to establish and maintain a system of internal control, and prepare and present the financial statements in conformity with the approved accounting standards as applicable in Pakistan. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting policies used and significant estimates made by management, as well as evaluating the overall presentation of the financial statements. We believe that our audit provides a reasonable basis for our opinion.

In our opinion the financial statements present fairly in all material respects the financial position of the HEALTH EDUCATION AND LITERACY PROGRAMME as at June 30, 2015 and of its Surplus for the year then ended in accordance with the approved accounting standards as applicable in Pakistan.

Date: 28 OCT 2015
Place: Karachi

S. M. REHAN & CO
Chartered Accountants
S. M. Rehan
HEALTH EDUCATION AND LITERACY PROGRAMME
BALANCE SHEET
AS AT JUNE 30, 2015

<table>
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<tr>
<th>ASSETS</th>
<th>Note</th>
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<td>Current assets</td>
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<td>Prepayments</td>
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<td>Advances, Receivables &amp; other prepayments</td>
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<td>Cash and Bank balances</td>
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<td>Current Liabilities</td>
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<td>Accrued Expenses &amp; Other Liabilities</td>
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<td>Un-earned Project Fund</td>
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<td>Net assets</td>
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<td>Accumulated Surplus</td>
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<td>Total Accumulated Surplus</td>
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<td>33,155,998</td>
<td>30,945,858</td>
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The annexed notes form an integral part of these financial statements.

[Signatures]

President

General Secretary
HEALTH EDUCATION AND LITERACY PROGRAMME
INCOME AND EXPENDITURE STATEMENT
FOR THE YEAR ENDING JUNE 30, 2015

<table>
<thead>
<tr>
<th>Note</th>
<th>Revenue</th>
<th>2015 Rupees</th>
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<td>Surplus for the year</td>
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<td>24,826,709</td>
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The annexed notes form an integral part of these financial statements.
HEALTH EDUCATION AND LITERACY PROGRAMME
Notes to the Financial Statements
For the year ended June 30, 2015

1. GENERAL INFORMATION

The Health Education and Literacy Programme (HE&LP) was registered in Pakistan on 13/01/1991, under the Voluntary Social Welfare Agencies (Registration & Control) Ordinance, 1961. The objective of the HE&LP is to design and implement replicable models of health promotion, health delivery and education for women and children. The registered office of the HE&LP is situated at DHA phase V, 1C commercial lane 3, Flat no. 2, Zamzama Boulevard, Karachi.


2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

2.1 Basis of Preparation

These accounts have been prepared under “historical cost convention”.

2.2 Accounting convention

These financial statements have been prepared in accordance with approved accounting standards, as applicable in Pakistan. Approved Accounting Standards comprise of Accounting and Financial Reporting Standard for Small-Sized Entities (SSEs) issued by the Institute of Chartered Accountants of Pakistan and provisions of and directives issued under the Companies Ordinance, 1984. In case requirements differ, the provisions or directives of the Companies Ordinance, 1984 shall prevail.

2.3 Tangible fixed assets

Fixed assets are stated at written down value, except land and capital work-in-progress, which are stated at cost. Depreciation is charged on reducing balance method applying the rates specified in Note 3. Normal repairs and maintenance are charged off as and when incurred. Depreciation on addition is charged from the month in which the asset is put to use and in case of disposal up to the month immediately preceding the month of disposal.

Useful lives are determined by the management based on expected usage of asset, expected physical wear and tear, technical and commercial obsolescence, legal and similar limits on the use of the assets and other similar factors.

Expenditure incurred subsequent to the initial acquisition of assets is capitalized only when it increases the future economic lives embodied in the items of fixed assets.

[Signatures]

President

General Secretary
2.4 Provisions

A provision is recognized in the balance sheet when the association has legal or constructive obligation as a result of a past event, and it is probable that an outflow of economic benefits will be required to settle the obligation.

2.5 Other payables

Other payables are stated at their cost.

2.6 Revenue recognition

Revenue is recorded on an accrual basis, except donations which are recorded on receipts basis.

2.7 Cash and cash equivalents

Cash and cash equivalents are carried in the balance sheet at cost. For the purpose of cash flow statement, cash and cash equivalents consist of cash in hand and balance with banks.

2.8 Taxation

The society is a non profit organization and therefore no provision for taxation is made.

[Signatures]

President

General Secretary
3. TANGIBLE FIXED ASSETS

<table>
<thead>
<tr>
<th>Particulars</th>
<th>W. D. V.</th>
<th>Depreciation</th>
<th>W. D. V.</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>As at July 01, 2014</td>
<td>Additions/</td>
<td>As at June</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>(Deletions)</td>
<td>30, 2015</td>
<td></td>
</tr>
<tr>
<td>Owned Assets</td>
<td></td>
<td></td>
<td>For the year</td>
<td></td>
</tr>
<tr>
<td>Land Lease hold</td>
<td>100,000</td>
<td>-</td>
<td>100,000</td>
<td></td>
</tr>
<tr>
<td>Office Premises on Lease</td>
<td>1,029,959</td>
<td>-</td>
<td>1,029,959</td>
<td>51,498</td>
</tr>
<tr>
<td>hold Land</td>
<td></td>
<td></td>
<td></td>
<td>978,461</td>
</tr>
<tr>
<td>Building</td>
<td>11,389,225</td>
<td>2,252,725</td>
<td>13,641,950</td>
<td>635,353</td>
</tr>
<tr>
<td>Office Equipments</td>
<td>2,756,652</td>
<td>3,913,677</td>
<td>6,670,329</td>
<td>963,164</td>
</tr>
<tr>
<td>Furniture &amp; Fixtures</td>
<td>488,878</td>
<td>65,905</td>
<td>554,783</td>
<td>79,651</td>
</tr>
<tr>
<td>Vehicles</td>
<td>1,460,917</td>
<td>-</td>
<td>1,460,917</td>
<td>219,138</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1,241,779</td>
</tr>
<tr>
<td><strong>June 30, 2015</strong></td>
<td><strong>17,225,631</strong></td>
<td><strong>6,232,307</strong></td>
<td><strong>23,457,938</strong></td>
<td><strong>1,948,804</strong></td>
</tr>
<tr>
<td></td>
<td><strong>4,569,674</strong></td>
<td><strong>13,948,828</strong></td>
<td><strong>18,518,502</strong></td>
<td><strong>1,292,871</strong></td>
</tr>
<tr>
<td></td>
<td><strong>21,509,134</strong></td>
<td></td>
<td></td>
<td><strong>17,225,631</strong></td>
</tr>
<tr>
<td><strong>June 30, 2014</strong></td>
<td><strong>4,569,674</strong></td>
<td></td>
<td></td>
<td><strong>17,225,631</strong></td>
</tr>
</tbody>
</table>

3.1 The above land does not includes the amount of amenity plots nos. 236-237 F. street old clifton Neelum colony, Karachi, donated for construction of health and education centre thereon:

4. INTANGIBLE ASSETS

<table>
<thead>
<tr>
<th>Particulars</th>
<th>W. D. V.</th>
<th>Ammortization</th>
<th>W. D. V.</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>As at July 01, 2014</td>
<td>Additions/</td>
<td>As at June</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>(Deletions)</td>
<td>30, 2015</td>
<td></td>
</tr>
<tr>
<td>Software Licenses</td>
<td>100,989</td>
<td>100,989</td>
<td>-</td>
<td>100,989</td>
</tr>
<tr>
<td><strong>June 30, 2015</strong></td>
<td><strong>100,989</strong></td>
<td></td>
<td><strong>100,989</strong></td>
<td><strong>100,989</strong></td>
</tr>
<tr>
<td><strong>June 30, 2014</strong></td>
<td><strong>100,989</strong></td>
<td></td>
<td><strong>100,989</strong></td>
<td><strong>100,989</strong></td>
</tr>
</tbody>
</table>

President

General Secretary
5. **CAPITAL WORK IN PROCESS**

<table>
<thead>
<tr>
<th>Description</th>
<th>2015 Rupees</th>
<th>2014 Rupees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Civil work</td>
<td></td>
<td>1,382,000</td>
</tr>
<tr>
<td>Construction of Maternity and Child Health Centre</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6. **INVESTMENTS**

<table>
<thead>
<tr>
<th>Description</th>
<th>2015 Rupees</th>
<th>2014 Rupees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Investments - held to maturity</td>
<td>600,000</td>
<td>600,000</td>
</tr>
</tbody>
</table>

This represents investment for 5 years in term deposit - Mudaraba in Al Baraka Bank (Pakistan) Ltd which will mature on 28/03/2018. The net profit shall be distributed amongst the shareholders and depositors on the basis of weightage assigned to each category.

7. **CASH & BANK BALANCES**

<table>
<thead>
<tr>
<th>Description</th>
<th>2015 Rupees</th>
<th>2014 Rupees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash in hand</td>
<td>20,600</td>
<td>13,524</td>
</tr>
<tr>
<td>Cash at bank</td>
<td>15,241,305</td>
<td>14,847,001</td>
</tr>
<tr>
<td></td>
<td>15,261,905</td>
<td>14,860,525</td>
</tr>
</tbody>
</table>

8. **ACCURED EXPENSES & OTHER LIABILITIES**

<table>
<thead>
<tr>
<th>Description</th>
<th>2015 Rupees</th>
<th>2014 Rupees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Audit fee</td>
<td>132,500</td>
<td>100,000</td>
</tr>
<tr>
<td>Salaries payable</td>
<td>312,619</td>
<td>432,717</td>
</tr>
<tr>
<td>Accounts Payable</td>
<td>401,703</td>
<td>216,301</td>
</tr>
<tr>
<td></td>
<td>846,822</td>
<td>749,018</td>
</tr>
</tbody>
</table>

9. **ACCUMULATED SURPLUS**

<table>
<thead>
<tr>
<th>Description</th>
<th>2015 Rupees</th>
<th>2014 Rupees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balance July 1,</td>
<td>30,945,858</td>
<td>23,882,568</td>
</tr>
<tr>
<td>Surplus / (Deficit) for the year</td>
<td>2,210,140</td>
<td>7,063,290</td>
</tr>
<tr>
<td></td>
<td>33,155,998</td>
<td>30,945,858</td>
</tr>
</tbody>
</table>

**President**

**General Secretary**
### 10. REVENUE

<table>
<thead>
<tr>
<th>Description</th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Funds and Donations</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Project Fund from K.Z.E. MISEREOR</td>
<td>10,350,677</td>
<td>11,193,023</td>
</tr>
<tr>
<td>Project Fund from P&amp;G</td>
<td>289,707</td>
<td>696,220</td>
</tr>
<tr>
<td>Project Fund from GDAP</td>
<td>4,983,746</td>
<td></td>
</tr>
<tr>
<td>Project Fund from GAVI</td>
<td>4,318,486</td>
<td>2,919,160</td>
</tr>
<tr>
<td>Project Fund from Home School</td>
<td>164,503</td>
<td>105,709</td>
</tr>
<tr>
<td>Project Fund from SAIFRN</td>
<td>536,396</td>
<td>1,174,017</td>
</tr>
<tr>
<td>Project Fund from ROTARY</td>
<td>113,665</td>
<td>621,198</td>
</tr>
<tr>
<td>Zakat</td>
<td>95,000</td>
<td>125,000</td>
</tr>
<tr>
<td>Donation</td>
<td>3,804,838</td>
<td>8,600,599</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>24,657,008</td>
<td>25,437,926</td>
</tr>
<tr>
<td><strong>Fees from Students</strong></td>
<td>570,650</td>
<td>586,702</td>
</tr>
<tr>
<td><strong>User charges of Clinic</strong></td>
<td>679,385</td>
<td>342,387</td>
</tr>
<tr>
<td><strong>Fund raiser play income</strong></td>
<td>562,500</td>
<td>844,500</td>
</tr>
<tr>
<td><strong>Other income</strong></td>
<td>567,306</td>
<td>3,956,788</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>27,038,849</td>
<td>31,188,303</td>
</tr>
</tbody>
</table>

### 11. ADMINISTRATIVE EXPENSES

<table>
<thead>
<tr>
<th>Description</th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries expenses</td>
<td>15,455,306</td>
<td>12,036,780</td>
</tr>
<tr>
<td>Advertisement expenses</td>
<td>1,242</td>
<td>520</td>
</tr>
<tr>
<td>Audit fee for special audits</td>
<td>129,000</td>
<td>217,620</td>
</tr>
<tr>
<td>Audit fee</td>
<td>132,500</td>
<td>100,000</td>
</tr>
<tr>
<td>DHA Membership Fee</td>
<td>-</td>
<td>300,000</td>
</tr>
<tr>
<td>Conveyance, Cartage &amp; POL</td>
<td>1,104,681</td>
<td>615,557</td>
</tr>
<tr>
<td>Consultancy Fee</td>
<td>-</td>
<td>1,156,149</td>
</tr>
<tr>
<td>Documentary Expenses</td>
<td>-</td>
<td>509,060</td>
</tr>
<tr>
<td>Management Policy Maker Exp.</td>
<td>-</td>
<td>499,513</td>
</tr>
<tr>
<td>Utilities</td>
<td>460,469</td>
<td>456,865</td>
</tr>
<tr>
<td>Repair &amp; Maintenance</td>
<td>289,890</td>
<td>715,231</td>
</tr>
<tr>
<td>Seminar expenses</td>
<td>-</td>
<td>1,616,981</td>
</tr>
<tr>
<td>Fund raiser play expenses</td>
<td>40,000</td>
<td>43,907</td>
</tr>
<tr>
<td>Miscellaneous expenses</td>
<td>381,522</td>
<td>1,502,251</td>
</tr>
<tr>
<td>High Density Diet</td>
<td>-</td>
<td>269,500</td>
</tr>
<tr>
<td>Insurance</td>
<td>187,929</td>
<td>138,790</td>
</tr>
<tr>
<td>Medicine expenses</td>
<td>401,106</td>
<td>311,198</td>
</tr>
<tr>
<td>Meeting expenses</td>
<td>48,110</td>
<td>10,720</td>
</tr>
<tr>
<td>Monitoring expenses</td>
<td>498,281</td>
<td>4,442</td>
</tr>
<tr>
<td>Printing Stationary &amp; courier</td>
<td>317,237</td>
<td>381,527</td>
</tr>
<tr>
<td>Study material</td>
<td>280,669</td>
<td>248,147</td>
</tr>
<tr>
<td>Training expenses</td>
<td>2,579,926</td>
<td>1,163,990</td>
</tr>
<tr>
<td>Travelling expenses</td>
<td>187,143</td>
<td></td>
</tr>
<tr>
<td>Rent, Rate &amp; Taxes</td>
<td>542,955</td>
<td>390,200</td>
</tr>
<tr>
<td>Withholding tax on Profit</td>
<td>1,434</td>
<td>2,864</td>
</tr>
<tr>
<td>Depreciation</td>
<td>1,948,804</td>
<td>1,292,871</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>24,801,861</td>
<td>24,681,836</td>
</tr>
</tbody>
</table>
12. **FINANCIAL CHARGES**

   Bank charges

<table>
<thead>
<tr>
<th>2015 Rupees</th>
<th>2014 Rupees</th>
</tr>
</thead>
<tbody>
<tr>
<td>24,848</td>
<td>23,177</td>
</tr>
</tbody>
</table>

13. **NUMBER OF EMPLOYEES**

   Number of employees as at year end were 99 (2014: 110).

14. **CORRESPONDING FIGURES**

   Donation (Rs. 3,540,358) have been reclassified, Rs. 2,919,160 into Project Fund from Gavi and Rs. 621,198 into Project fund from Rotary represented on Note No.10 to facilitate comparison.

15. **DATE OF AUTHORIZATION**

   Theses financial statements were authorised for issue on **2 8 OCT 2015** by the Executive Committee.

16. **GENERAL**

   Figures have been rounded off to the nearest rupee.

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President

General Secretary