ANIMEDH CHARITABLE TRUST (ACT)
ANNUAL REPORT 2025-26



















ACT TO MAKE A DIFFERENCE[1]

TABLE OF CONTENTS



TRUSTEES' MESSAGE 3

14 YEARS OF JOURNEY 5

ABOUT ACT 6

MISSION & VISION 8

OUR REACH 9

AREAS OF INTERVENTION 11

HIGHLIGHTS OF THE YEAR 12

OUR PROJECTS 18

PARTNERS & DONORS 37

FINANCIALS 38

THE ACT ECOSYSTEM 39

TRUSTEES' MESSAGE

Dear Friends,

14 Years ago, ACT began as a seed. This year, it worked like an ecosystem.

2025–26 asked us a harder question than "how many did we reach?" It asked, "What actually changed?" The answers fill these pages. Under Poshan ki Disha, we registered every pregnancy across ***28*** Anganwadi Centres early, and ***22%*** more babies were born at a healthy weight. Our Early Childhood Development programme supported ***834*** young children, and ***95.9%*** are on track with their milestones. Women artisans earned ***₹1.13*** crore through market-grade work.



We also built for what comes next. AVNI, our digital data management system, now helps our teams see whom we reach, where gaps appear and when to act. Project Iron Shakti took on anaemia in Mumbai. Nanhe Kadam brought home-based therapy to children with disabilities across ***14*** villages. Mantrana grew into five villages, showing that young people will ask for help when it is offered with trust.

Yet the change we value most is quieter: parents becoming co-therapists, artisans becoming teachers, and those we once supported now supporting others. To our family, partners, donors, volunteers and, above all, our community workers who carry this work to the last mile: **Thank you!**

The Board of Trustees
Animedh Charitable Trust



14 YEARS OF JOURNEY

Since 2012, ACT has evolved from a small beginning into a connected network of programmes, people and partnerships. Each year has added a new layer to our work, expanding opportunities, deepening inclusion and strengthening communities.

2012 — **The Beginning**
Laid the foundation for change

2013 — **Project Study buddy**
After-school academic support

2014 — **Project Shivan**
Basic Tailoring skills training

2016 — **Project Saksham**
Advanced Training Program

2017 — **Project Shakshartaa**
After-School Remedial Class in Tribal communities

2017 — **Project Nanhi Balika**
Education support for tribal girls

2018 — **Project Donna**
Women empowerment through income generation support

2018 — **Project Nanhe Kadam**
Early Childhood Development and Disability support

2018 — **Project Samruddhi**
Training tribal women in dairy, poultry & organic farming

2019 — **Project WASH**
Access to clean water & sanitation

2019 — **Project MEHEK**
Community mental health & emotional wellbeing

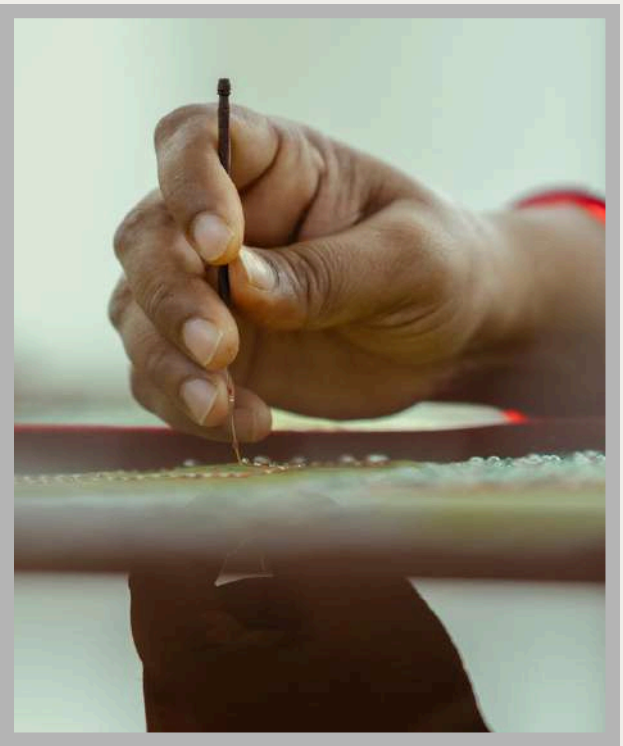
2022 — **Project Sahaj**
Advanced tailoring Training in Surat

2024 — **Project Poshan Ki Disha**
Maternal & child health and nutrition

2025 — **Project Mantrana**
Building emotional resilience and mental well-being among tribal adolescents and youth







ABOUT ACT

Rooted in People. Growing with Communities.

Founded in 2012, Animedh Charitable Trust (ACT) works alongside underserved communities to create opportunities for children, women, young people and families to build more secure and fulfilling lives.

Over the past 14 years, ACT has grown from a small beginning into a connected ecosystem of people, programmes, partnerships and systems. Our work has evolved with the needs of the communities we serve; from early childhood and education to women's livelihoods, health and nutrition, mental health, and youth and community development.

At the heart of our work is a simple belief: lasting change happens when people have the skills, confidence, opportunities and support to shape their own futures.

We therefore focus not only on delivering programmes, but on building capabilities; strengthening individuals, community leadership, partnerships and systems that can sustain change beyond a single intervention.

What guides our work:

- People - building skills, knowledge, confidence, agency and leadership
- Programmes - creating practical pathways to learning, livelihoods, health and wellbeing
- Partnerships - bringing together communities, institutions, donors, government and technical partners
- Systems - strengthening processes, knowledge and local capacities for longer-term change

14 Years of Growth

What started as a seed in 2012 has taken root, grown through experience and learning, and developed into an ecosystem of change.

We are not only growing programmes. We are growing people, capabilities and connections that make change possible.


HAPPY
INDEPENDENCE DAY
PROUD
TO BE
INDIAN
I ♥ INDIA
♥ INDIANS ♥

OUR PURPOSE

VISION

A just and resilient society where every child reaches their full potential, every young person leads positive change, and every woman lives with agency and equal opportunity.

MISSION

We pledge to 'ACT to make a difference' to those underserved Children, Youth, Women and Communities around us by:

- Contributing to a resilient, sustainable and just society for all.
- Fostering individual capacity through building self awareness, personal development, education and livelihood skills.
- Facilitating knowledge, resources and crucial linkages to enable the individual's empowerment and progress.

ACT's thematic areas focus on 6 Sustainable Development Goals out of the 17 SDGs identified by United Nations.



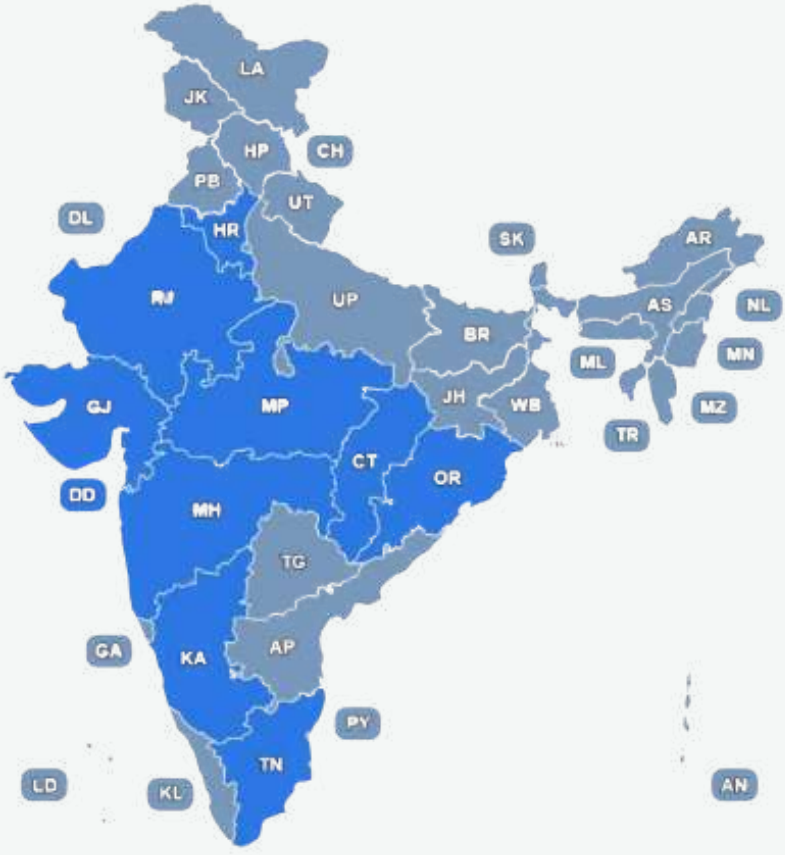


Our Reach

14 years of grassroots change across India

Over the years, the Animedh Charitable Trust (ACT) has dedicated itself to uplifting underserved communities, engaging at the grassroots level to tackle pressing issues. Our initiatives encompass vital areas such as early childhood development, mental health, education, women's empowerment, and nutrition, all aimed at fostering a sustainable and enduring impact.

In its **14** years of meaningful service, ACT has provided support to some of India's most vulnerable populations, positively influencing thousands of lives through compassion, resilience, and unwavering commitment.



Children Impacted
14,890

Women & Youth Impacted
82,025

Population Reached
4,65,192

WHERE WE WORK

- Early Childhood Development
- Mental Health
- Education
- Women's Empowerment
- Nutrition
- WASH



AREAS OF INTERVENTIONS

One connected approach to lasting community wellbeing



Education

- Supporting access to inclusive education
- Early childhood care & education
- Educational continuity for tribal children

Livelihoods

- Building skills
- Enabling entrepreneurship
- Creating sustainable income opportunities for tribal women and semi-urban women artisans.
- WASH

Health

- Improving maternal and child health
- Early childhood development & disabilities support
- Mental health access
- Nutrition outcomes









Highlights of the year 2025-2026









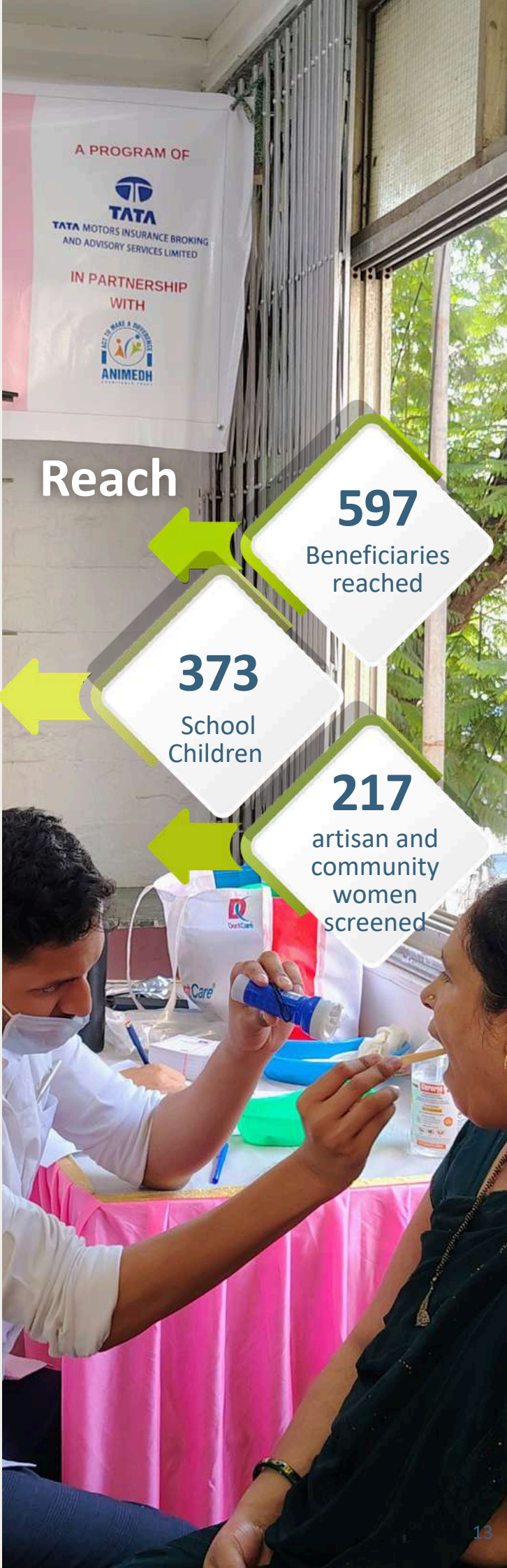
Project Iron Shakti

Launched in October 2025, Project Iron Shakti, supported by CSR partner - ***Tata Motors Insurance Broking and Advisory Services (TMIBASL)***, brings together health screening, nutritional support and community awareness to address anaemia among economically vulnerable women and children in Mumbai. Working with women associated with ACT and the wider community, and with students at ***Natvar Nagar Mumbai Public School (NNMPS)***, the initiative combines haemoglobin assessment and follow-up with iron-folic acid supplementation, deworming, nutrition kits and family engagement.

Building on existing haemoglobin testing conducted by a BMC-led NGO, ACT supported haemoglobin-level validation, anthropometric measurements, weekly nutritious food kits and parental engagement sessions.

With technical expertise from the ***Decimal Foundation*** and collaboration with NNMPS, ACT has established a screening and follow-up mechanism to monitor haemoglobin levels, anthropometric changes and programme adherence.







Study Centre, Mumbai

Study Centre is a safe and welcoming place for children aged 5 to 13 years whose mothers are working artisans with the ACT. and will give children a comfortable space to learn, play, and grow while their mothers work nearby. Each day, the children will take part in learning support, creative and fun activities, and receive healthy snacks and fruits. This will help them stay engaged and active.

At the same time, it will give mothers peace of mind knowing their children are in good hands, allowing them to focus better on their work. The project aims to support both women and their families, helping mothers to pursue livelihood activities with confidence and giving children a safe place to spend their day in a positive, caring environment.

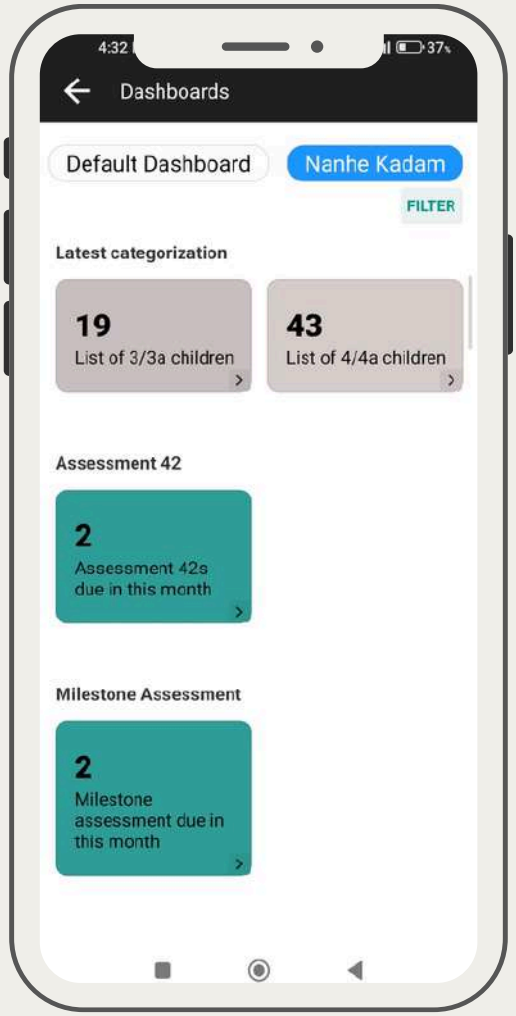
Activities focus on:

- Learning & Recreation Sessions: Daily homework help, art & craft, reading corner, games.
- Health & Nutrition Support: Ready-to-eat nutritious snacks, health camps
- Awareness Sessions for artisans and children: safe use of the internet, session on child safety from child abuse, good touch/bad touch, etc.

The centre aims to create a safe, supportive, and child-friendly space where artisans can leave their children with confidence while they focus on their work. This will allow mothers to enhance their productivity and income without the constant concern of their children's care and well-being.



AVNI Integration: Strengthening Data-Driven Programme Management





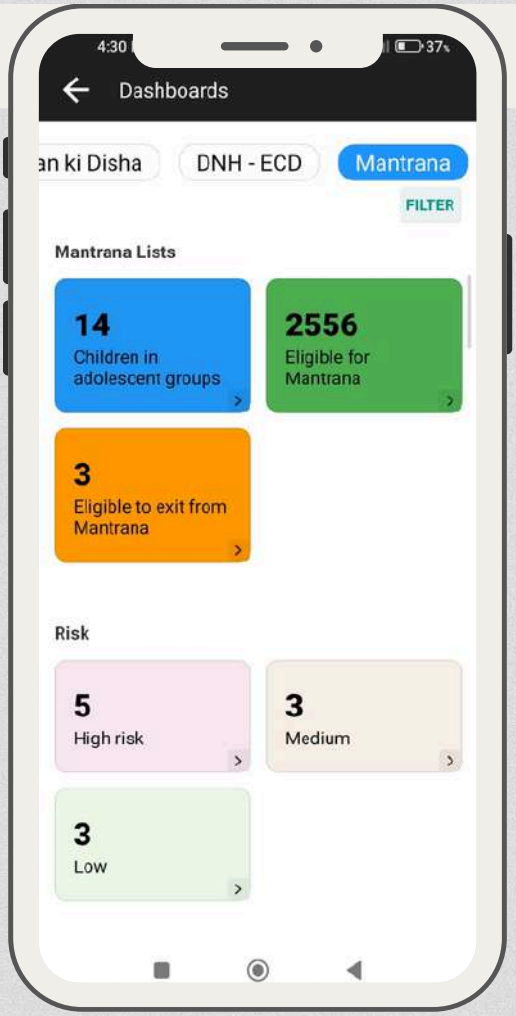
Animedh Charitable Trust (ACT) has integrated AVNI -a data digitalisation platform by S***amanvay Technologies***- into its programmes to strengthen data management, monitoring and evaluation, and evidence-based decision-making across its interventions.

By digitising programme records and standardising data collection, AVNI helps ACT maintain more organised beneficiary information, track programme progress and monitor outcomes across its work in education, women's livelihoods, health and nutrition, and community development.

The integration enables teams to move beyond activity-based reporting towards a clearer understanding of who is being reached, what is changing, and where additional support may be needed. Programme teams can use the available data to review progress against targets, identify gaps in participation or service delivery, monitor beneficiary needs and assess whether interventions are progressing as intended.

AVNI also strengthens ACT's approach to risk identification and mitigation. Regular data reviews can help flag emerging concerns, such as irregular participation, delays in service delivery, gaps in follow-up, or beneficiaries requiring additional support.





These insights enable programme teams to investigate issues, prioritise corrective action and adapt implementation strategies in a timely manner.

By bringing greater consistency, visibility and accountability to programme information, AVNI is helping ACT build stronger monitoring systems, make informed decisions and improve its ability to assess programme effectiveness.

It represents an important step in ACT's journey from managing individual interventions to building an interconnected, learning-oriented ecosystem focused on sustainable outcomes for the communities it serves.



Advanced Artisanal Skills: Upskilling in Collaboration with SNDT University

ACT has partnered with ***SNDT Women's University, Mumbai,*** to create an Advanced Upskilling Techniques Training Programme for women artisans, enhancing their skills from basic tailoring to advanced garment construction.

This includes structured training, expert mentoring, and certification support across three batches. The curriculum covers advanced tailoring, embroidery, design innovation, and quality control, aligning with industry standards.

The initiative aims to improve craftsmanship, production quality, employability, and market opportunities for artisans, fostering sustainable incomes.

INSIDE THE TRAINING PROGRAMME

01. Seams & Finishing
French and mock-French seams, bias binding, hemming, pin tucks, gathers, pleats and ruffles.

02. Garment Construction
Necklines, collars, plackets, pockets, cuffs, sleeves and bodice construction.

03. Design & Details
Zippers, piping, binding, trims, elastic, ribbons, pleated details and decorative finishes.

04. Precision & Quality
Edge finishes, curves, scallops, notches and attention to detail in garment finishing.



EDUCATION PROJECTS



PROJECT STUDY BUDDY



The Study Buddy project is a distinctive after-school tutoring initiative currently operating in community centres across the ACT. College students, corporate employees, retired professionals, or homemakers willing to make a change and share their knowledge volunteer to provide one-on-one tutoring for underserved school students, focusing primarily on essential subjects such as English, Mathematics, and Science.

Volunteers conduct these sessions after school, two to three times a week, for one to two hours (online or through our community centres), aiming to enhance the students' academic performance. Those volunteers who fulfil the minimum service hours receive certificates in recognition of their contributions.

13 Volunteers

15 Students

207 hours of study-buddy

DRIVE FORWARD

Project Drive Forward supports girls from low-income truck driver families through 3-year scholarships for students in Classes 8 to 12. By easing the financial burden of education, the programme aims to reduce school dropout rates and help girls continue learning during these critical years.

Through this support, ACT seeks to strengthen educational continuity and open pathways to higher education, personal development and future career opportunities, helping girls move towards a more secure and independent future.

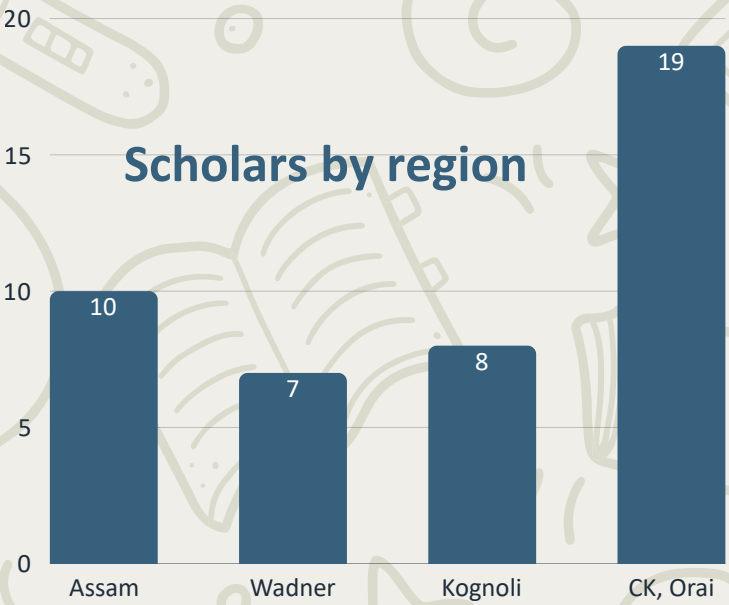


44

Girls scholars supported

₹3,87,000

Total scholarship rewarded





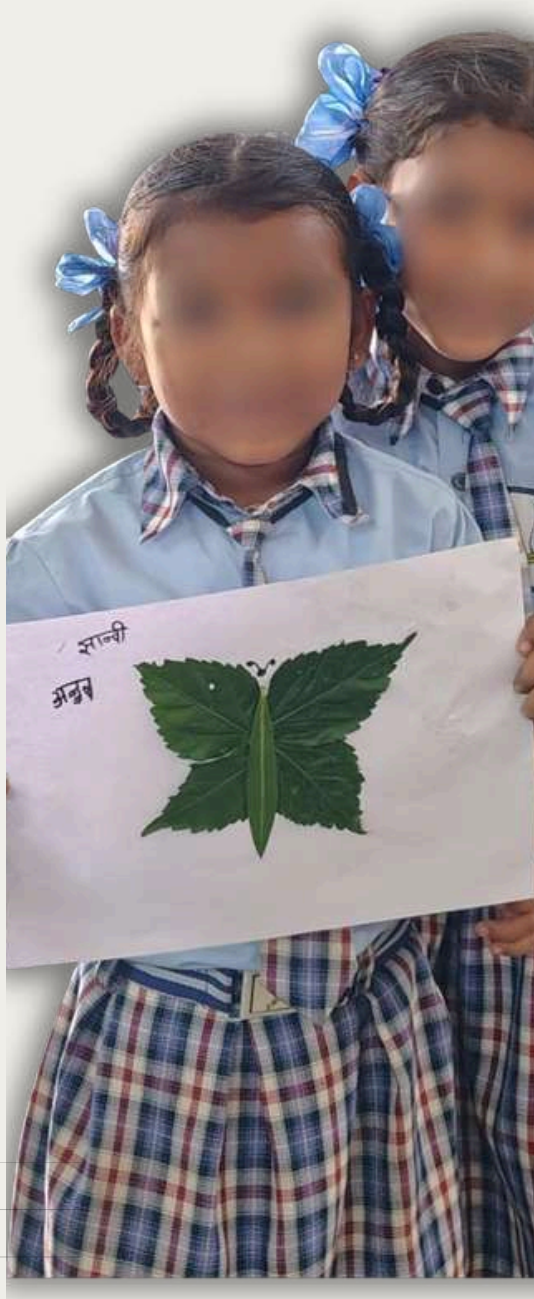
HEALTHCARE PROJECTS



NANHE KADAM

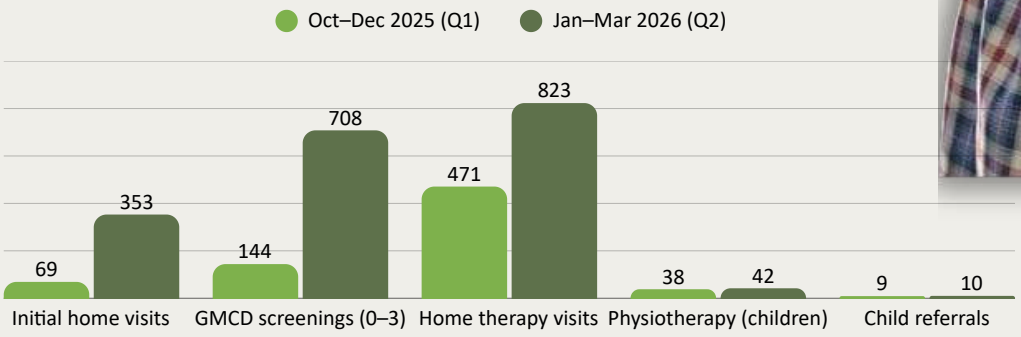
(Strengthening Early Childhood Development and Disability Support)

The first **6** years of a child's life shape everything that follows, yet in the tribal villages of Dadra and Nagar Haveli, the early signs of developmental delay too often pass unnoticed until school makes them impossible to ignore or worse, deteriorates to a lifelong disability. Nanhe Kadam exists to close that window of missed time and provide home-based rehabilitation therapy to the child. It started in **2018** with **2** CDA's (Child Development Aides) across **2** villages. Relaunched in October **2025** as a new phase of the project centred on the child with disabilities and with the support of the ***Azim Premji Foundation***, this three-year programme focused on children with disabilities reaches children aged **0–6** across **14** villages, bringing screening, therapy and play into the one place that matters most - the child's own home.



Our approach is built around community-based Child Development Aides (CDAs) drawn from and trusted by these villages. They don't wait for families to come to a centre; they walk to the home, assess each child's growth across development areas, so that delays are identified early when support is most effective. Nanhe Kadam is a child centric play based therapy program. The goals for the child are set with the family every quarter and they are specific achievable and measurable

Over its first two quarters, Nanhe Kadam grew from a careful start into a programme of real reach and rhythm, and, most tellingly, began to change how parents themselves see their children's growth.

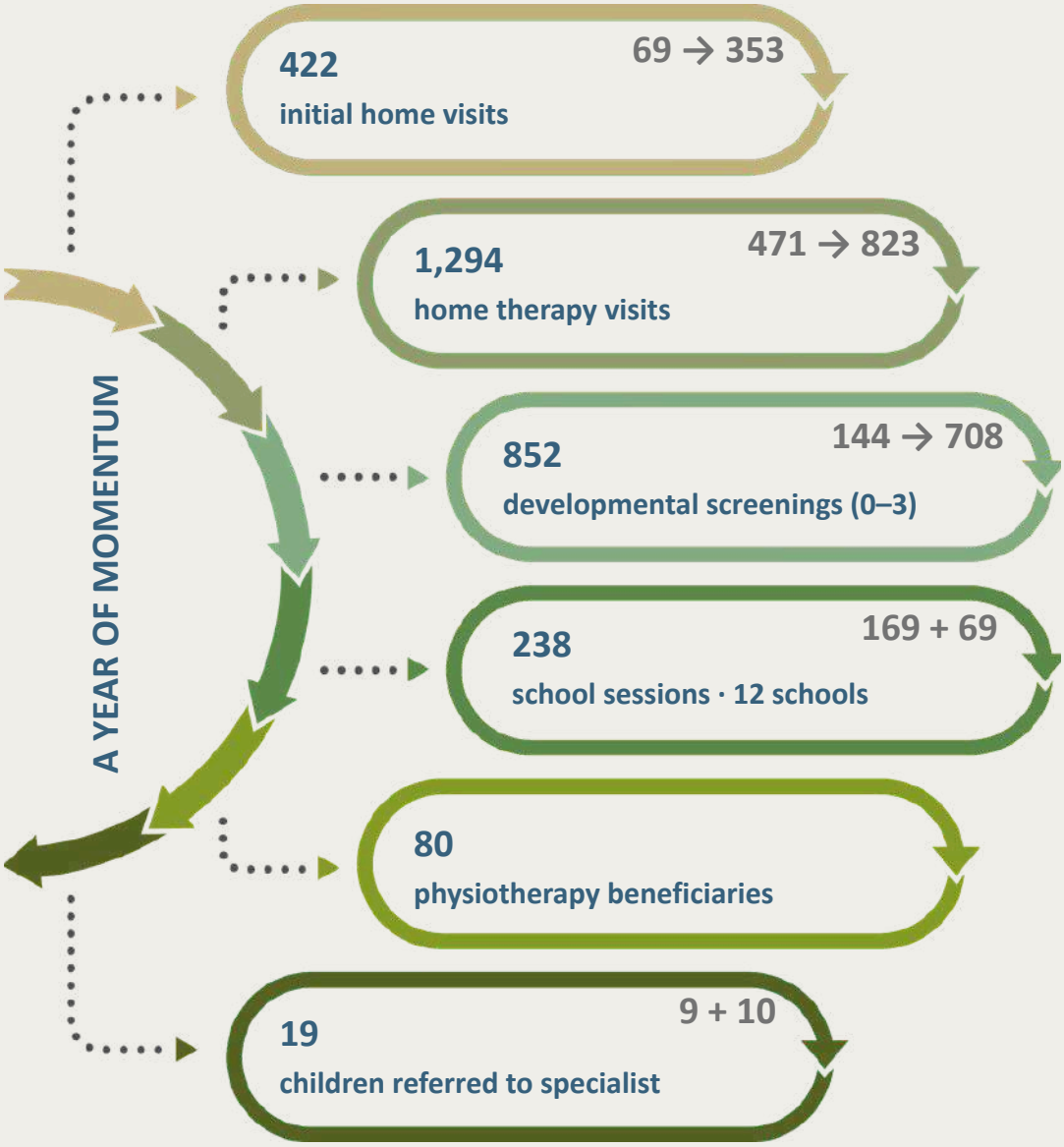


The takeaway in one line: in its second quarter, the programme roughly quintupled initial

- home visits (69 → 353),
- nearly five-fold increased developmental screenings (144 → 708 children), and
- grew home therapy by 75% (471 → 823 visits)

THE REAL OUTCOME: parents moved from bystanders to co-therapists, now attending parents support group, asking questions, and working on the goals of their children themselves. For an ECDD programme, that is the sustainability story.

He said this was because
he was suffering from a
terrible cold.
The lion laughed at
the fox's answer and
let him go.



Yash, born in 2020 in Parzai village, began having monthly seizures at age two, which repeatedly set back his development. When CDA Sarika assessed him at three, he functioned like a one-year-old.

He communicated mostly through gestures, could say only two words, needed help to walk, and couldn't focus for even a minute. His family first relied on faith healers.

After nine months of twice-weekly therapy and patient counselling, they agreed to hospital treatment, and medication stopped his seizures. With help getting his Disability Certificate and UDID card, and with the school brought on board, Yash, now six, attends school every day. He speaks 7–8 words at a time, focuses for 20 minutes, runs, and plays with other children.



Yash

Names and identifying details may have been changed to protect privacy; these accounts are based on real experiences.


RUBY'S
WORK

Project Mantrana

(Building emotional resilience and mental wellbeing among Adivasi adolescents and youth)

In the tribal heartland of Dadra & Nagar Haveli, a 5,000-year-old way of life is colliding with rapid industrialisation, and the strain is falling hardest on the mind. As land, culture and livelihoods shift, children, youth and women face rising psycho-social stress, and among Adivasi youth the warning signs are stark, mirroring a global pattern the WHO has flagged among Indigenous communities. Project Mantrana, supported by ***Hindalco Industries Ltd***, exists to meet that need where almost no mental-health support has reached before.

Launched as a Year-1 pilot across the village of Khanvel, Mantrana builds safe spaces for emotional wellbeing rather than waiting for crisis. Its quiet innovation is its people: Community Mental Health Workers drawn from the same tribal communities, who carry trust into classrooms and homes in English, Gujarati and Marathi alike. Through 2025, the programme grew from first contact into a working system of prevention, early identification and referral - and in January 2026 it crossed a threshold, moving into a deeper, longer-term phase across 5 villages.

Our approach

Mantrana follows a layered intervention model - prevention at scale, early reach for those most at risk, and clinical linkages for the few who need specialist care, all carried by trusted community workers.

1	**Prevent & Promote** Structured group sessions in schools across English, Gujarati and Marathi mediums — articulating emotions, anxiety, self-belief, identity, coping skills and support systems.
2	**Reach Early** Home visits and one-to-one counselling for adolescents and youth identified as vulnerable. Repeat visits build the trust that makes disclosure possible.
3	**Clinical & System Linkages** Assessment and supervision by an in-house Clinical Psychologist, with referrals to hospitals, the Red Cross and government welfare for high-risk cases.
4	**Community Mental Health Workers** The backbone of the model — CMHWs drawn from the same tribal communities, ensuring cultural relevance, trust and continuity across every layer.

Beyond the survey, the programme produced concrete, verifiable change:

Outcome	What happened
High-risk identification	**10** high-risk cases identified (**3** at school, **7** at home); **100%** assessed by the in-house Clinical Psychologist, with early counselling before escalation.
Education continuity	**7** school dropouts reconnected: **2** re-enrolled in 9th; **3** applied privately for 10th; **2** for 12th.
Livelihoods	**21** young people linked to income generation (**10** vocational tailoring, 10 jobs, **1** self-employed shop owner).
Higher education	**5** linked onward: **2** ITI, **1** B.Ed, **1** football programme, **1** technical diploma.
Help-seeking taking root	**11** adolescents reached out to the team themselves: **6** for mental-health support, **5** for career guidance.
Access to welfare	Government disability support (UDID, medical testing) was initiated for **2** adolescents with special needs.

STORIES OF CHANGE

A college student in Khanvel Bhagat Pada, Divya lost her mother to illness early in the year and, alongside her studies, took on the full weight of running her household - cooking, cleaning, caring for her father and younger brother. Her warm welcome to the Mantrana team hid real exhaustion and isolation: ***"Even though we are doing fine, I feel so alone."***

Over repeated visits, trust grew, and in a session on worries and emotional expression, she began to put words to her grief. With consistent emotional support and after her brother stepped in to share the housework, she started attending college regularly again and managing the home with more ease. ***"Since you started coming here,"*** she told the team, ***"I've felt lighter."***

Divya's story is the programme's quiet thesis: healing often begins not with a diagnosis, but with being heard.

Names and identifying details may have been changed to protect privacy; these accounts are based on real experiences.


adidas

Project Poshan Ki Disha

Maternal & child health and nutrition

The year in brief

2025–26 was the year Poshan ki Disha turned infrastructure into impact, supported by **Great Eastern Foundation**. Having built the digital and community foundations in its first phase, ACT with technical partner **SNEHA (Society for Nutrition, Education and Health Action)** used the "1000 Days" approach to shift maternal health behaviours and institutionalise rigorous child growth monitoring across **28** Anganwadi Centres in Dadra & Nagar Haveli and Daman & Diu. The result was a decisive move from setting up systems to moving the needle on the outcomes that matter most for mothers and children.

13,814 direct beneficiaries	**3,04,500** indirect beneficiaries	**28** Anganwadi Centres	**47** community

Four results stand out from the year, each one a step from activity toward outcome.

Key success	What we achieved
Maternal early registration	100% early pregnancy registration - zero delay reached by Q3.
Universal growth monitoring	96% coverage for child anthropometry across centres.
Healthier births	22% improvement in babies born at a healthy weight (>2.5 kg) over the year.
Community mobilization	47 local volunteers onboarded for last-mile delivery; 30 now actively supporting visits, 17 more in the pipeline.

Our approach

Poshan ki Disha works as a four-part system: reaching families at home, measuring every mother and child, shifting behaviour through community events, and converging with government so the work outlasts the project.

1	**Protocolized home visits** CHWs deliver structured visits to women of reproductive age, antenatal and postnatal mothers, and children 0–2, following the "1000 Days" approach.
2	**Screening & growth monitoring** Universal child anthropometry and Hb screening identify risk early, with results tracked on the Avni data platform.
3	**Behaviour-change & awareness** Monthly thematic events: Godhbharai, Annaprashan, anaemia and sickle-cell camps, WASH, de-addiction, reach families where they are, drawing 1,600+ participants.
4	**Government convergence** ACT bridges community and state: aligning field data with ICDS and the Health Department, optimizing the Poshan Tracker, and resolving ration supply gaps.

Outcomes: moving the needle

Tracked against a May 2025 baseline, the clinical and behavioural indicators show a clear positive trend across the year

Indicator	Baseline	Q4 result	Reading
Early ANC registration (<12 wks)	95%	100%	Zero-delay registration reached
Normal birth weight (>2.5 kg)	61%	~65%	More babies born healthy
Mothers non-anaemic (normal Hb)	51%	~48%	Held broadly steady



The clearest wins are in children's recovery - the "graduation" of malnourished children back toward healthy status:
98 out of 215 underweight children regained normal weight for age &
52 out of 105 wasted childen shifted to normal weight for height

STORIES OF CHANGE

From severe malnutrition back to normal

On a routine visit to the remote hamlet of Amboli Manipada, a Community Health Worker met a young mother holding a visibly undernourished infant, weak, underweight, and showing clear signs of Severe Acute Malnutrition. The family lived in difficult conditions, with little access to nutrition knowledge or health services.

The CHW enrolled the child at once and began regular home-based counselling, using simple visual tools to explain age-appropriate feeding, the importance of breastfeeding and complementary nutrition, and the hygiene practices that prevent infection and linked the family to government nutrition services.

After three months of close follow-up, the combined effect of better feeding, steady monitoring and encouragement showed: the child gained weight and strength, and follow-up measurements confirmed a transition from Severe Acute Malnutrition all the way back to normal. Today the child is active and alert, and the mother is confident she can keep it up.

A reminder that timely intervention, community-based care and patient counselling can change the course of a child's life.

Names and identifying details may have been changed to protect privacy; these accounts are based on real experiences.

EARLY CHILDHOOD DEVELOPMENT

Why this work matters

In the tribal villages of Dadra & Nagar Haveli, the early years are too often where disadvantage takes root. Rapid industrialisation has strained a 5,000-year-old way of life; early and consanguineous marriages, a high prevalence of sickle cell, and gaps in antenatal care mean many children face developmental risk before they can speak for themselves. Yet the first six years are when the brain develops fastest and when timely support changes the most. ACT's Early Childhood Development programme, supported by Reliance Foundation, exists to reach these children early, in the one place that matters most: their own home.

Having worked with 1,000 children aged 0–3 in Year 1, the programme in Year 2 widened its lens to children aged 0–6 and deepened its model, strengthening what parents and communities understand about early development and building the systems that make sure no child is missed.



The year in numbers

- **834** children reached (424 boys · 410 girls)
- **4,030** home visits & interviews
- **95.9%** on track with milestones
- **41** community awareness meetings

The model is simple and repeatable: observe every child, assess those at risk, support the family at home, and refer the children who need more specialised interventions through internal or external early interventions, raise community awareness and promote inclusion.

1	**Observation** Trained field workers conduct observational home visits to understand each child's development across physical, cognitive, language, social and emotional domains.
2	**Identification** SEarly childhood champions identify children flagged with possible delay, using structured milestone tools.
3	**Support at home** Promotional visits coach parents in play, communication, early stimulation and low-cost learning materials, making the home the place where development happens.
4	**Refer & connect** Children with multiple delays are referred to specialist services and the Anganwadi system; the programme works in partnership with ICDS throughout.
5	**Awareness and Inclusion** Building community awareness on early childhood development,sensitising the community and promoting inclusion.



Catching delays early

The heart of the programme is timely identification - reaching a child before a delay becomes a lifelong barrier.

Caught early - multiple delays	Caught early - single delay
23 children identified with critical multiple delays or disabilities and referred to specialist services for assessment and intervention.	**11 children** with a single developmental delay supported directly by the ECD team through more frequent weekly visits and monitoring.

Alongside this, the programme strengthened its data system (automated visit scheduling, child-progress tracking and a structured referral mechanism, so no child is left out) and built coordination with Anganwadi Supervisors and Hub In-charges to run awareness meetings where families already gather.



A STORY FROM THE FIELD

Ronit, a bright boy from Rudana Maragpada, was over two years old but struggling: he found it hard to follow instructions or express his needs, spoke rapidly and was often misunderstood, and would tug or hit rather than ask. On the first home visit in November 2025, the family was reluctant to talk; it was only by the third visit, through patient and supportive contact, that his mother opened up about her worries.

The team put in place a structured plan of regular home-based activities and coached his mother in communication techniques, play-based learning, gentle behaviour management, and ways to build independence, then followed up and encouraged at every visit.

At two years and ten months, Ronit now follows simple instructions, listens and responds to his mother, plays happily with other children, attends A***nganwadi, eats on his own, is learning to dress himself, and shows real affection for his younger sister.***

The key was his family's steady support, proof that when a caregiver is equipped and encouraged, a child's trajectory can change at home.

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LIVELIHOOD PROJECTS



LIVELIHOOD PROJECTS

A year of growth and upskilling, dignity and income for women artisans

ACT turns artisans' skills into income-generating opportunities for women from underserved communities who are skilled in tailoring, embroidery and handwork. We work as a market linkage platform, where we connect artisans producers groups to sustainable and ethical fashion brands who believes in doing good! Apart from livelihood generation activities, we also focus on building artisans' capacity through multiple initiatives.

Our Garment Partner, **2nd Innings Handicrafts Pvt Ltd**, which runs the brand **'I was a Sari'**, also plays an important role as our strategic partner. Together, we focus on women earning a real, rising livelihood while producing market-grade garments and accessories for the fashion industry. 2025–26 was deliberately a year of consolidation: balancing demanding, market-driven production with deep investment in systems, skills, health and social empowerment. The programme held its scale, strengthened quality, and widened its base of garment partners - laying the groundwork for artisans to reach higher-value work.

The year in numbers:

₹1.13 cr
artisan livelihood earned

4,76,174
pieces manufactured

10
technical skills workshops

5
active garment partners (plus 6 new linked)



How the programme works

Skill feeds income, income is protected by well-being, and the family is supported so a woman can work with focus - four strands of one livelihood model.

1	**Skill & produce** An apprenticeship model in advanced tailoring, embroidery and handwork, backed by 10 technical workshops, from cutting and QC to finishing, festive handwork, and advanced construction, taught by a fashion institute.
2	**Earn & grow** Artisans fulfil real, market-grade orders for garment partners, converting skill into income. A skill-grading exercise assessed competencies to target training and open higher-value work.
3	**Protect & empower** 11 capacity-building sessions wove in health (anaemia camps), safety (self-defence), rights (16 Days of Activism), financial literacy, and enrolment in government social-security schemes.
4	**Support the family** A Study Centre gives children (5–13) of artisan mothers a safe space with learning support and nutritious snacks - so mothers can work with focus and confidence.

Partnerships and a deliberate widening

Validation from the wider industry: a visit by the ***Gucci India team*** to ACT's centres and the ***I Was a Sari*** studio underscored the model's credibility. In the words of I Was a Sari's Stefano Funari, l*ong-term commitment is what lets the work "go beyond short-term impact" toward "independence, dignity, and growth at scale."*

Beyond income

The programme treats a livelihood as more than a wage. Over the year, artisans also gained:

- Health: anaemia awareness camps, screenings and nutritional support.
- Safety & rights: self-defence training, and workshops for the 16 Days of Activism against gender-based violence and on online safety.
- Financial resilience: financial-literacy and savings sessions, plus enrolment in government-backed social-security schemes.
- Family support: a Drop-In Centre for artisans' children aged 5–13, with learning support and nutritious snacks.
- Leadership: a 'Household CEO' session and International Women's Day discussions on the future of the programme and artisan-led leadership.



A STORY FROM THE FIELD



Bebi

Bebi: One Stitch at a Time, A Future of Her Own

Always cheerful and eager to learn, Bebi's journey with ACT is a story of determination, growing confidence and quiet achievements.
Originally from North India, Bebi moved to Mumbai with her husband and spent years as a homemaker. Encouraged by her husband to revisit her tailoring skills, she took her first step towards earning an income through ACT, beginning at just ₹1,000 a month.

Over two years, her hard work and commitment helped her grow into a skilled artisan, increasing her monthly earnings to approximately ₹14,000. One of her proudest achievements was buying her son a laptop worth ₹75,000 entirely from her own savings, helping him pursue his higher education.

Today, Bebi dreams of building an emergency fund and securing her family's future. From her first modest earnings to making significant financial decisions for her family, she has come a long way.
For Bebi, every stitch represents more than a skill — it is a step towards independence, confidence and a future she is helping build herself.

Names and identifying details may have been changed to protect privacy; these accounts are based on real experiences.

ACT DONORS FY 2025-2026

Amal Embroideries Pvt. Ltd.
Azim Premji Philanthropic
Beta Foundation
Dr. Chitralekha Rane
Espi Industries & Chemicals
Great Eastern CSR foundation
Hasina Kherodawala
Hindalco Industries Limited
Hiren Bhoot
IDFC First Bank Limited
Iffat Hussain
Kirit Desai
Luxury Goods Retail Pvt.Ltd.
Milind Davare
Nitin Navnitlal Shah
Param Packaging Pvt. Ltd
Print & Pack
Prithviraj Mehul Desai
Reliance Foundation
Tata motors insurance broking & advisory services
Tirumalla Krishna Batulla
UK Online Giving Foundation
United Way Of Mumbai
Urban Infrastructure Holdings Pvt Ltd
Vishwas Shetty

FINANCIALS

04

The Bombay Public Trusts Act, 1950.
Name of the Public Trust : ANIMEDH CHARITABLE TRUST
Balance Sheet as at 31.03.2026

SCHEDULE VIII
[Vide Rule 17 (1)]

Registration No.E - E29235 (MUMBAI)

FUNDS & LIABILITIES	AMOUNT	AMOUNT	PROPERTY AND ASSETS	AMOUNT	AMOUNT
Trust Funds or Corpus :-			**Invesments :-**		35,02,385.00
Balance as per last Balance Sheet	15,81,000.00		Fixed Deposit With YES Bank	8,00,000.00	
Add : During the year	-	15,81,000.00	Mutual Funds	27,02,385.00	
Other Earmarked Funds :-			**Movable Properties (Sewing Machine)**		31,79,425.00
(Created under the provision of the trust deed or scheme or out of the Income)	-		Balance as per last Balance Sheet	15,63,266.00	
Add: Contribution Received During the Year			Additions during the year	19,38,417.00	
	35,25,718.00		Less : Sales during the year	-	
Less: Transferred to object of fund	-	35,25,718.00	Less: Depreciation for the year	(3,22,258.00)	
Loans (Secured or Unsecured) :-			**Current Assets**		
			Deposits Advances:-		11,95,000.00
			Security Deposite	11,95,000.00	
			Loans & Advances:-		6,16,894.00
			Tax Deducted At Source FY 2022-23	68,458.00	
			Tax Deducted At Source FY 2025-26	81,444.00	
			Goods and Service Tax	4,66,992.00	
Liabilities :-		2,41,171.00	Prepaid Expenses	10,525.00	10,525.00
Current Liablities	2,38,771.00		Sundry Debtors	30,412.00	30,412.00
Duties and Taxes					
Profession Tax	2,400.00		**Income Outstanding :-**		2,966.00
			Interest	2,966.00	
Provision :- (Annexture 1)		37,345.00	**Cash and Bank Balances :-**		35,04,748.00
Outstanding Expenses	37,345.00				
			a) In Current Account with Bank	35,04,528.00	
Income and Expenditure Account :-		66,57,121.00			
Bal. as per last Balance Sheet	53,74,472.00		a) with the Trustee - CASH IN HAND	220.00	
Less : Appropriation , if any	-				
Add : Surplus	12,82,649.00				
Less : Deficit (As per I & E A/c)	-				
Total		1,20,42,355.00	*Total*		1,20,42,355.00

For D Dalal & Associates LLP

Chartered Accountants
Auditors

Dated: 22nd September 2026

The above Balance Sheet to the best of my/our knowledge contains a true account of the funds & Liabilities & of the property & assets of the Trust

UDIN No: 26040793DEV80K1217
Dated: 22nd September 2026

For Animedh Charitable Trust

Trustees

The Bombay Public Trusts Act, 1950.
Name of the Public Trust : ANIMEDH CHARITABLE TRUST
Income & Expenditure Account for the year ending 31st March 2026

SCHEDULE - IX
[Vide Rule 17 (1)]

Registration No.E - E29235 (MUMBAI)

EXPENDITURE	AMOUNT	AMOUNT	INCOME	AMOUNT	AMOUNT
			By Incidental Income	21,33,736.00	21,33,736.00
To Miscellaneous Expenditure :-		66,51,515.00	**By Interest on Investment**		7,61,088.00
To Other Expenses	1,87,585.00		By Interest on Bank Account	1,42,578.00	
To Establishment Expenses	61,41,672.00		By Interest on Fixed Deposit	3,29,569.00	
To Depreciation	3,22,258.00		By Other Income	2,79,571.00	
			By Interest on IT Refund	9,370.00	
To Expenditure on object of the Trust :-		3,32,89,599.00	**By Donation**		4,18,54,657.00
a. Donation	40,00,000.00		By Donations - Local	3,76,58,053.00	
b. Educational	17,26,328.00		By Donations FCRA	41,96,604.00	
c. Commercial	-				
d. Relief of poverty	2,69,13,271.00				
e. Others	-				
f. Medical Relief	-				
g. Advancement Of General Public Utilities	6,50,000.00				
To Amount to be utilised as per 11(2)	35,25,718.00	35,25,718.00			
To Surplus carried over to Balance Sheet	12,82,649.00	12,82,649.00			
TOTAL		*4,47,49,481.00*	*TOTAL*		*4,47,49,481.00*

For D Dalal & Associates LLP

Chartered Accountants
Auditors

Dated: 22nd September 2026

UDIN No: 26040793DEV80K1217
Dated: 22nd September 2026

For Animedh Charitable Trust

Trustees

THE ACT ECOSYSTEM

The people who make the difference

Behind every number in this report is a person — and behind every person is a team that chose to show up. If fourteen years have taught us anything, it is that programmes do not change lives; people do. Curricula, kits and clinics are only ever the tools. What turns a tool into a transformation is a human being who cares enough to carry it the last mile, into a home, a classroom, a workshop, a life.

This is the quiet truth of ACT: we are not, in the end, an organisation of projects. We are a community of people, staff, field workers, volunteers, partners and the families we serve, bound together by a single belief that change is possible, and a shared willingness to work for it.

Our people

ACT's greatest strength has always been the people who do the work closest to the ground. Our Child Development Associates, Community Health Workers and Community Mental Health Workers are, for the most part, drawn from the very villages and neighbourhoods we serve. They speak the local languages — Gujarati, Marathi, Hindi — and they carry something no outside expert can: trust. When a mother opens her door to a health worker she has known for years, when a hesitant family finally speaks about a child's delay by the third home visit, that is not a programme working. That is a relationship working.

This is deliberate. We believe the people best placed to lift a community are the people of that community. So we invest in them — training them, equipping them, and entrusting them with real responsibility. Over time, the person who once received our support becomes the person who delivers it. A daughter educated through our scholarships returns to mentor the next girl. An artisan who learned to stitch now teaches others on the workshop floor. A young person Mantrana once reached now reaches out to help a friend. The circle widens, and the strength stays in the community where it belongs.



TO EVERYONE WHO IS PART OF THIS ECOSYSTEM: THANK YOU.

YOU ARE THE DIFFERENCE WE SET OUT TO MAKE.

