EMMANUEL HOSPITAL ASSOCIATION

FELLOWSHIP FOR TRANSFORMATION THROUGH CARING

ANNUAL REPORT 2025

Fellowship Transformation Caring

TABLE OF CONTENTS

01

ABOUT EHA - THE ORIGIN & HISTORY 03

02

VISION, MISSION & CORE VALUES 05

03

EHA LOCATION MAP 06

04

Highlights of the year 2023 -24 07

05

EXECUTIVE DIRECTOR'S REPORT 08

FROM THE DESK OF EXECUTIVE DIRECTOR DESIGNATE 09

CHAIRMAN'S MESSAGE 10

06

REPORT FROM HOSPITALS

Northern Region. 13
North-Eastern Region 17
North-Central Region 20
Central Region 24
Eastern Region 28

07

CLINICAL STATISTICS OF HOSPITALS 32

08

Nursing 33

09

EHA IN THE COMMUNITY

Disaster Management & Mitigation Unit 37
Community Health & Development 40
Palliative Care 43

10

Shalom 44
Research 46
Finicial stsatements 47

11

Directory 49

12

Statutory Reportings 54

ABOUT US

The 1940s was the Golden period of Indian medical missions, as every third bed in the country was a mission hospital bed! EHA began in the minds of a few, at a time when mission institutions were losing expatriate medical staff to stringent visa regulations in the 1950s and 60s. Thus, arose the need to have an indigenous-run medical organization overseeing mission hospitals from various missions.

The key question - ***"Would it be possible to attract Indian doctors with the necessary level of Christian motivation to renounce job prospects and to bury themselves in Village India??***

Though considered impossible during a major consultation in 1968, the Emmanuel Hospital Association was nevertheless registered in November of 1969, with no hospitals as yet under its banner! That several different missions decided to 'throw their hats in the ring' and commit to the concept of an organization that had no track record to fall back on, is in itself a clear indication of the hand of God in the birth of EHA, as described by Rev. Dr. Thirumalai, a founding member, ***as "more than a miracle"!***

The nucleus of EHA formed around 6 hospitals in the early 70s, with high quality dedicated professionals, meticulous accounting systems, code of Christian work ethics and close fellowship, among other benefits. More hospitals joined the Association with time.

The first major community health initiative based out of 7 EHA hospitals – the ambitious yet unique Master Plan - was launched in 1976, paving the way for the EHA model of comprehensive healthcare.
he 1980s ushered in a new model of community outreach in EHA which could best be described as stand-alone community programs. These ran independent of hospitals for more efficient and effective management of these health initiatives and proved successful in providing good services as well as being good examples to emulate.

In an initial environment of far-flung locations, poor means of transportation and communication, difficulty in recruiting appropriate staff and uncertain funding, the associated hospitals necessarily had to fend for themselves, often dependent on an individual or a couple to ensure their survival in an uncertain clime. As the work of coordination progressed over the years and more institutions were added to the group, the potential of such an organization was harnessed through a consultative process on the "Future Directions of EHA" in 1997. Clear vision and mission statements being prayerfully articulated, along with the attendant values to guide EHA - that we would be a "FELLOWSHIP FOR TRANSFORMATION" with a deliberate focus on the poor and marginalized in rural North India.

Right from its inception, the founding members were clear that:

- EHA would be an on-going, self-propagating indigenous Christian medical society - the first of its kind in mission history!
- The organization would, besides facilitating fellowship, cooperation and coordination among hospitals, also resume full responsibility for the operation and management of the institutions and their related facilities.
- EHA would move from just the provision of curative services to the then-revolutionary paradigm of capacity building of local communities towards holistic health and development, as per their felt needs.

With the articulation of Vision and Mission statements, the idea of thinking and moving strategically took root at both the central and unit levels, guided by the documented statements and ***non-negotiable values such as a commitment to fellowship, servant-leadership, teamwork, quality, focus on the poor and marginalized***. Significant strides forward included the introduction of computerization in our hospitals, Human Resource, financial systems and common reporting formats, that were progressively refined over time.

Nevertheless, the single most important factor that has kept the organization going and growing has been the unwavering emphasis on spiritual nurture and fellowship centred around its God-given vision, setting EHA apart from most other service-oriented organizations.

Governance & Ethos

EHA is a national Society registered in New Delhi, with its various hospitals, each being a locally registered Society, incorporated into the organization through a Deed. The Board of the central Society is responsible for the vision, mission and direction of the organization, through policies formulated by a participatory process involving all incorporated members and implemented uniformly across the board.

For ease of governance, the units are divided into five regions, each under a Regional Director, overseen by a central team of officers and thematic directors headed by the Executive Director. EHA strives to ensure that each hospital unit is self-sufficient in terms of running expenses, with large capital expenditure and the bulk of the community projects supported through external means.

It is part of the underlying ethos of EHA as an organization that no patient will be turned sway for lack of finances, while deliberately focusing on the socio-economically weakest sections of communities served through integrated community health and development initiatives. The locations of most EHA units are intentionally in most of the backward, least-developed States, where a multi-pronged approach is most needed and effective.

The Future: Where is EHA headed?

A great challenge will be the paradigm shift of **incorporating appropriate professionalism and modern technology** into the routine functioning of EHA, even while ensuring that the values that have sustained and guided EHA are not diluted.

The wealth of experience acquired by the organization in integrated initiatives can be fully utilized in developing holistic models of community care that address much-neglected aspects such as mental illness, suicide prevention, care of the elderly, the disabled and terminally ill, and the inculcation of value systems in the youth of today

The opportunity to utilize EHA's acquired expertise in training could potentially be an effective platform for working alongside the government in fulfilling the aim of effective promotive, preventive and primary health at the grassroot level, especially in the newly-designated Empowered Action Group (EAG) States in the country, keeping in mind our core calling – to be a transformative influence through our collective thinking and functioning for the glory of God.

RGB & RAC moments 2024-2025

VISION

FELLOWSHIP FOR TRANSFORMATION THROUGH CARING

MISSION

Emmanuel Hospital Association (EHA) is a Fellowship of Christian institutions & individuals that exists to transform communities by caring, with primary emphasis on the POOR & MARGINALIZED

WE CARE THROUGH

Provision of appropriate Healthcare
Empowering communities through health and development programs
We serve people and communities regardless of Race, Caste, Creed or Religion with a geographic focus on the Central, North & North-East of India. We do this in the Name & Spirit of JESUS CHRIST, so as to manifest Him in Word & Deed

CORE VALUES

01
We strive to be transformed people and fellowships

02
Our model is servant leadership

03
We value teamwork

04
We exist for others especially the poor and marginalized

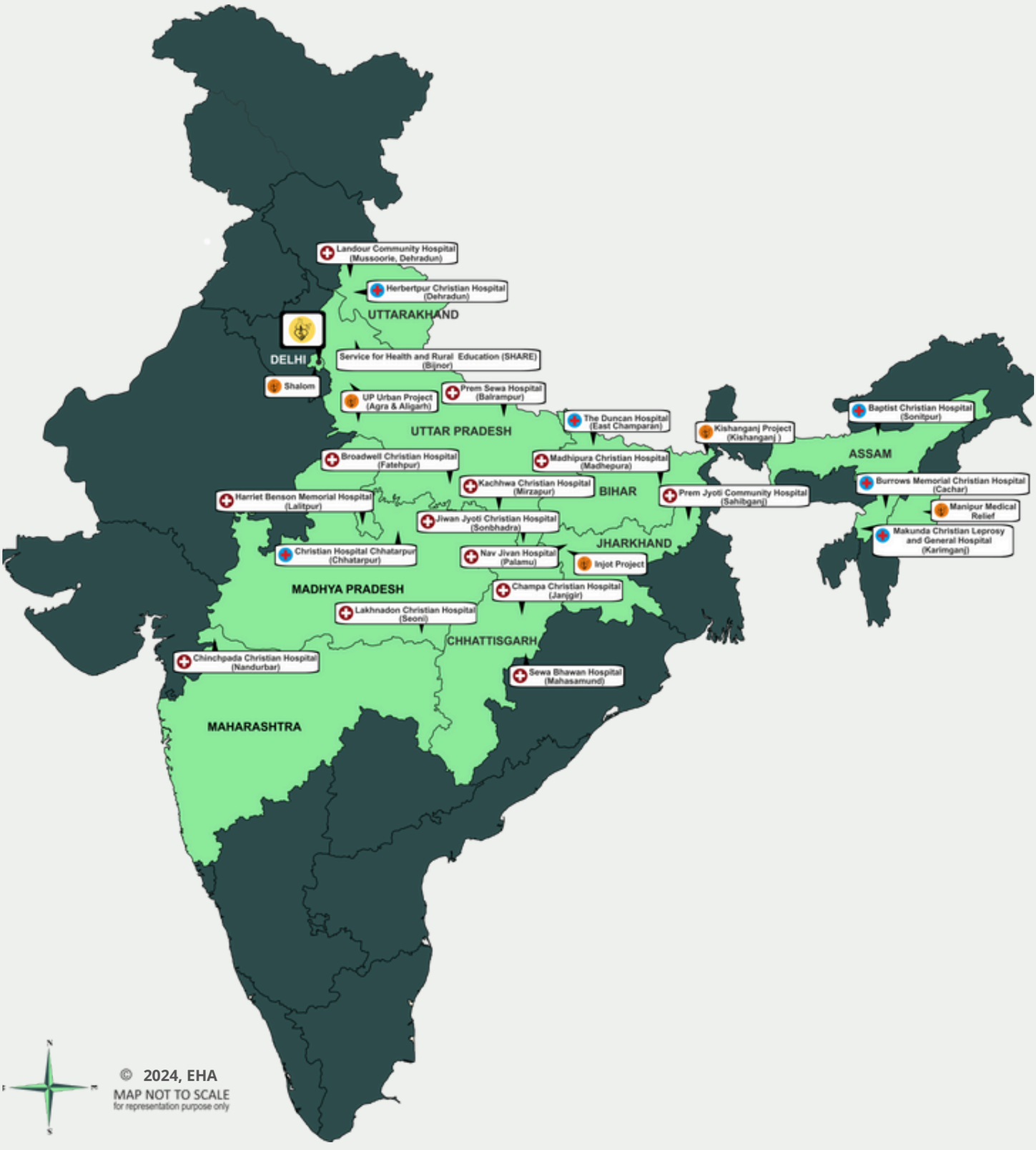
05
We strive for the highest possible quality in all our services

06
We maintain integrity at all levels

07
We strive to be a transparent organization

08
We focus on accountability

EHA LOCATION MAP



HIGHLIGHTS 2024 -25

19
Hospitals

51
Community and Development Projects (CHDP)

5
Nursing School

1
Nursing College

Healthcare Services Provided

864126
People gained access to health care through hospital Out-patient services

72365
People received appropriate healthcare and treatment through In-patient services

17258
Women in rural communities had access to safe and adequate hospital based maternity care services and safe deliveries

34208
People received surgical interventions

Executive Director's Report

As we reflect on the past year, we are humbled and deeply grateful for the way God has been at work in and through each of us in the Emmanuel Hospital Association (EHA).

The Emmanuel Hospital Association serves across nine states in central, northern, and northeastern India through its hospitals and thematic programs. We strive to offer comprehensive services that address health and development holistically. All initiatives are undergirded by faith and prayer, along with relationship-building with individuals, communities, and officials as we implement our programs. We also strive for greater integration of services between our base hospitals and outreach programs.

The past years have been quite turbulent, with many norms being challenged. This has compelled us, as an organization, to introspect and reaffirm who we are and why we do what we do—so that we are not swayed by the challenges we face.
This annual report offers a glimpse into the testimony of God's faithfulness to us as an organization.

On a personal note, I wish to record my sincere thanks to the Board of EHA for the privilege of serving as the Executive Director of such an organization. It has not been easy, but it has nevertheless been a tremendously enriching and valuable experience. May EHA continue to be a movement that makes a difference in our country.
I wish Dr. Deepak Singh and his team ,God's enabling presence and blessings as they lead this movement to be a "Fellowship of Transformation and Caring."

DR SAIRA PAULOSE

From the Desk of Executive Director Designate

When I think of the years I have spent in EHA, I picture God at work. God works in various ways to reconcile the world to himself. One of the ways is through healthcare and community development.

When Jesus walked the earth, He healed the sick, fed the hungry, gave sight to the blind, and restored broken relationships and people. Today, as people who serve in challenging locations, where we face many hurdles inside and outside, it is good to be focused on the One who called us to the work that we do. He calls us to be His hands and feet to be healers, comforters, restorers and peacemakers.

Over the last 55-odd years of EHA, we have seen many leaders give their lives to shepherd a community that strove to provide healthcare to the most marginalised among us. We stand on the shoulders of giants today as we see their vision for rural healthcare and development take shape and come to fruition. Today we reap the harvest of what they sowed with blood, sweat and tears.

Many hospitals led from the front in developing services and community engagement, which has had a great impact in many communities. These are doing well, and we praise God for the teams who have committed to serving in the most adverse circumstances so that the places continue to exist. Some of our hospitals have a lot of potential and are in very needy areas, but do not have the personnel to lead and work in these locations. We pray that God would provide us with the necessary people to help these locations turn around and be places of healing and wholeness again. Some of our areas of high impact have been the community engagement in health, development, palliative care, and disability rehabilitation. We hope that in the coming time, these engagements can be strengthened through partnerships in both funding and expansion so that many more of the people who need these services can be reached.

We are grateful for the organisations and individuals who partner with us in various areas of our work and engagement both within the hospital and the community. We hope that these networks will continue and grow for a lasting impact in our locations and our country.

As we look forward to the coming year, I would like to encourage us in the words of Eric Liddle, “God made me fast. And when I run, I feel His pleasure.”

God has made us healthcare professionals. When we work, may we feel His pleasure.

DR DEEPAK SAMSON SINGH

Chairman's Message

When we stand in a doorway, there are two perspectives possible. We can look in, or look out. However, both perspectives are relative to the doorway. As we stand on this threshold of another year and another annual report, we must allow our vision to include both perspectives, looking forward and looking back. Jesus said "I am the door." He is the keeper of time. In these tumultuous times, let us view the world from His doorway, a doorway that moves through time.

Reflections on Our Mission

The Emmanuel Hospital Association was founded on the simple yet powerful belief that every individual, regardless of circumstance, deserves compassionate, quality healthcare. This conviction, rooted in faith and a vision for justice and equity, continues to guide our actions and decisions. Our mission to provide holistic care remains as relevant and necessary today as it was at our inception.

This year, we have seen our teams embody this mission with remarkable resilience. In towns and villages, in bustling cities and remote communities, our doctors, nurses, allied health professionals, support staff, and volunteers have gone beyond the call of duty. Their dedication has brought light to those navigating illness, comfort to the suffering, and dignity to the marginalized. For this, I offer my heartfelt thanks.

Achievements and Milestones

Each chapter of our Annual Report illuminates the breadth and depth of what we accomplish together:

- Healthcare Delivery: Across our network of hospitals and clinics, we have seen a significant increase in patient outreach. Our facilities have handled a record number of outpatient visits and inpatient admissions this year, a testament to both need and trust in our services.
- Quality Improvement: Numerous quality assurance initiatives have borne fruit, seen in improved patient outcomes and increased satisfaction scores. We have invested in training, technology, and process optimization, ensuring that safety and excellence are at the heart of all we do.
- Community Health: Our community health initiatives have expanded, addressing the pressing needs of maternal and child health, infectious disease prevention, and chronic disease management. Grassroots education and preventive outreach remain cornerstones of our approach, empowering communities to take charge of their health.
- Capacity Building: The EHA has continued its tradition of training future healthcare leaders. Our educational programs, fellowships, and mentorship initiatives have equipped hundreds of young professionals with the skills and values needed to serve with compassion and competence.
- Innovation and Research: Amidst rapidly changing healthcare landscapes, our commitment to innovation has never wavered. This year, we launched new research projects and pilot programs designed to improve service delivery, especially in resource-limited settings.

Challenges and Lessons

No annual report would be complete without acknowledging the hurdles we have faced. The past year has tested us in many ways—resource constraints, public health emergencies, shifting regulatory frameworks, and the persistent inequities that beset our communities. Each challenge has been met with determination, adaptability, and a willingness to learn.

Stories of Impact

Behind every statistic is a human story. I am continually humbled by the accounts of patients who have found healing, families who have regained hope, and communities that have been transformed through our programs. I think of the mother who received lifesaving prenatal care, the child who overcame malnutrition, the elderly man who found solace in palliative support, and the countless others whose lives intersect with ours every day.

Partnerships and Collaboration

None of what we have achieved would be possible without collaboration. The EHA is blessed with a wide network of partners—government agencies, non-governmental organizations, faith-based groups, academic institutions, and generous donors. Together, we have leveraged resources, expertise, and shared vision to amplify our impact.

I extend my heartfelt appreciation to all our partners and stakeholders. Your support—financial, technical, and moral—has helped us navigate complex challenges and seize new opportunities. In the coming years, these partnerships will remain essential as we strive to reach more communities and address emerging health needs.

Gratitude and Acknowledgements

I wish to express my deep gratitude to all members of the EHA family. To our healthcare professionals who serve with skill and compassion; to our administrative and support staff whose contributions are vital yet often unseen; to our volunteers whose generosity uplifts our mission; to our Board of Directors for their stewardship and guidance—thank you.

To our patients and their families, thank you for placing your trust in us. Your courage in the face of illness inspires us to redouble our efforts.

To our supporters and friends around the world, your faith in our work sustains us. Whether through gifts, prayers, or partnership, you are a crucial part of our story.

I wish to express my gratitude to Dr. Saira Paulose who led with wisdom and skill, and welcome Dr Deepak Singh, into whose capable hands she has handed over leadership. May God lead and provide vision, and a team that rallies around him.

Conclusion

Let this annual report be more than a record of the past year; let it be a call to action for the future. Let us recommit to the vision that brought us together—to serve all with love, uphold the sanctity of life, and be a beacon of hope in a world that so desperately needs it. May the EHA go in and come out and find pasture, as our door moves through time.

DR. PHILIP ALEXANDER
CHAIRMAN

Report From Hospitals

Herbertpur Christian Hospital

Herbertpur Christian Hospital (HCH) was established in 1936 by Dr. Geoffrey and Mrs. Monica Lehmann and continues to serve as a beacon of compassionate healthcare in the Doon Valley and neighboring regions. A 150-bedded charitable mission hospital, HCH is dedicated to holistic healing—combining quality medical care with spiritual support and inclusive outreach.

Since 2019, HCH has been providing cashless services under the Ayushman Bharat scheme, extending affordable access to thousands. The hospital stands as a center for excellence in both secondary and tertiary healthcare for Pachwa Doon, Sirmour, and parts of Saharanpur.

HCH delivers multi-specialty care including General Medicine, Intensive & Emergency Care, Dialysis, Surgical and Laparoscopic procedures, Anesthesia, Maternity Services, Orthopedics & Traumatology, Paediatrics & Neonatology, ENT, Eye, and Dental Services, Physical Medicine & Rehabilitation, and Palliative Care. The hospital also offers Radiology, 24x7 Lab services, Pharmacy, and operates a Blood Bank—a vital resource for the region.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- Palliative and Rehabilitation Care: HCH's palliative care team provides compassionate care for terminally ill patients. The Physical Medicine & Rehabilitation Unit is the only one of its kind in the region, and HCH remains a Recognized Medical Institution (RMI) for morphine administration.
- Community Outreach & Disability Support: The Anugrah Early Intervention Center supports children and adults with disabilities. With a prosthetic & orthotic unit and carpentry workshop, HCH creates customized assistive devices and supplies them to patients and government institutions. The CBID (Community-Based Inclusive Development) training program certified its fourth batch, building local capacity.
- Mental Health Services: The SHIFA program in Sadoli Block and Burans initiative in Dehradun and Uttarkashi districts focused on counseling, awareness, and linking patients with government mental health institutes. Special emphasis was placed on parenting, adolescent well-being, and community resilience.
- Nari Niketan & Community Homes: HCH, in partnership with the Government of Uttarakhand, supported destitute women and individuals with psychosocial disabilities through residential care models.
- Partnerships: HCH collaborates with the Azim Premji Foundation, Ganga Prem Hospice, RGCIRC Delhi, CMC Vellore & Ludhiana, HANS Foundation, Believers Church Medical College, Bangalore Baptist Hospital, Entrust, EHA Canada, and other generous donors, enriching services and outreach.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
150	83963	3160	249	1779

Christian Hospital Chhatarpur

Christian Hospital Chhatarpur (CHC), established in 1925 by the Friends Foreign Missionary Society, has served the Bundelkhand region with dedication for nearly a century. Initially focused on women and children, CHC became part of the Emmanuel Hospital Association in 1974. Today, it functions as a 120-bed multi-specialty hospital, providing accessible, quality care to the communities in Madhya Pradesh and Uttar Pradesh.

The CHC School of Nursing, founded by Ms. Alena Calkins, celebrated its 50th anniversary in 2024–25. The institution has long empowered women from marginalized backgrounds through nursing education and continues to expand its reach.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- Clinical Services: CHC offers care in Gynecology, Pediatrics, Neonatology, Orthopedics, General Medicine, Anesthesiology, Dental, Ophthalmology, Cardiology, and Clinical Psychology, supported by both in-patient and out-patient units.
- Community Health Programs: CHC implemented three major community projects—the Comprehensive Primary Health Care Project (CPHCP), Palliative Care Project (PCP), and Joni House Partnership Project (JHPP). Together, they served 82 rural villages and 14 urban wards, covering over 14,960 families.
- Educational Milestone: The hospital's School of Nursing marked 50 years of existence with plans to expand into a B.Sc. Nursing degree program, enhancing healthcare workforce development in the region.
- Infrastructure Partnerships: Collaborations with the Thankamma Ithapiri Memorial Trust (TIMT) provided crucial medical infrastructure. Support from the Azim Premji Foundation enabled broader outreach and deeper community engagement.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
120	50841	6484	1996	1934

Landour Community Hospital

LCH is a 35-bedded hospital which has a catchment area of about 150 kms on the northern and eastern side of the Garhwal hils and is the only hospital providing medical service 24 hours a day, 7 days a week.

The hospital's empanelment under the PM-JAY scheme significantly enhanced visibility and access to affordable surgical care. Diagnostic services experienced sharp growth, with laboratory usage increasing by 20% and radiology by 15%, a sign of expanding demand for quality diagnostics. The Eye Department introduced pediatric screenings, and the Physical and Occupational Therapy units delivered consistent and patient-focused services.

Palliative care was further strengthened by recruiting new staff, reinforcing LCH's commitment to compassionate and specialized support for patients with chronic and terminal illnesses. Through all these developments, LCH remained grounded in its core values of integrity, service, and care.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- The hospital maintained stable financials with revenue reaching ₹43 million—on par with the previous year—despite being slightly below projections. A modest 6% increase in expenses underscored strong cost management.
- A revised salary scale introduced in April 2023 improved staff morale and retention, contributing to the continued delivery of high-quality care.
- Outreach programs expanded, increasing referrals for mental health and occupational therapy. Follow-up clinics led by specialists boosted patient engagement and encouraged healthier lifestyles.
- Collaborations with partner institutions supported trauma counseling and nursing student training, laying a strong foundation for future service expansion.
- Generous support from donors and well-wishers helped balance revenue shortfalls caused by seasonal illness fluctuations and staffing transitions.
- The Eye Department extended its services to include pediatric screenings, while diagnostic services grew steadily with increased lab and radiology usage.
- Challenges included the departure of several consultants and the ongoing strain on staff housing, which often requires maintenance due to age and limited availability.
- The hospital is exploring the development of a dedicated training facility, leveraging its location to support clinical excellence and address the need for professional development and suitable staff accommodation.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
35	26875	1028	1	2432

Harriet Benson Memorial Hospital

Located in Lalitpur, Uttar Pradesh, Harriet Benson Memorial Hospital (HBMH) is a unit of the Emmanuel Hospital Association (EHA) and operates in one of the most underserved districts of India in terms of healthcare access and outcomes. Rooted in a mission of compassion and service, HBMH provides essential clinical services along with impactful community programs that extend healthcare to the most vulnerable populations.
The hospital has served the region with a focus on dignity, inclusion, and spiritual care, making it a trusted name not only in health services but also in social transformation. Over the years, its home-based palliative care and disability support initiatives have become cornerstones of its service to the community.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- Hospital-Based Services: HBMH provides outpatient and inpatient services, supported by a High Dependency Unit (HDU) equipped with multipara monitors and ventilators. It operates both major and minor operation theatres with anesthesia support and offers diagnostic services including X-ray, spirometry, audiology, laboratory tests, and a fully stocked in-house pharmacy. Ultrasound services are also available, pending final registration. In addition, eye care services are available to the local population.
- Palliative Care Home Visits: For the past 14 years, HBMH has delivered trusted home-based palliative care to patients with cancer and other serious illnesses within a 50–55 km radius. The team manages physical symptoms, provides emotional and spiritual support, trains caregivers, and coordinates hospital stays when required, offering dignity and comfort during end-of-life stages.
- AccessAbility Initiative – Disability Support: This program educates people with disabilities about their rights, connects them with government and NGO schemes, and provides assistive devices and healthcare. It also promotes school enrollment for children with disabilities, encourages community inclusion, and builds local advocacy teams.
- Partnerships and Community Support: Through the support of the Savitri Waney Charitable Trust (UK) and EHA's palliative care division, home-based services have expanded significantly. Collaborations with Emmanuel Hospital Association USA, Jan Kalyan Empowerment Office, and CMO Office enabled access to disability pensions, mobility aids, and government linkages. NGOs like Goonj, Society for Pragati Bharati, Sain Jyoti, Grameen Development Society, and Lions Club offered further material and emotional support. Faith-based organizations also supported spiritual care, home visits, and community outreach.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
40	4260	632	136	219

Burrows Memorial Christian Hospital

Burrows Memorial Christian Hospital (BMCH) in Alipur is a 70 bedded mission hospital committed to delivering compassionate and affordable healthcare to underserved communities, especially in the Lakhipur Sub-division of Assam. Over the years, it has grown into a comprehensive center offering general medicine, surgery, obstetrics and gynecology, and dentistry.

The hospital runs an accredited School of Nursing (GNM), registered with the Assam Nursing Council and Indian Nursing Council. In collaboration with Christian Medical College (CMC), Vellore, BMCH offers Community Lay-Leaders Health Training Certificate Courses (CLHTC) to equip local volunteers in basic healthcare.

BMCH works under a Public-Private Partnership (PPP) with the National Health Mission (NHM), Assam, playing a vital role in maternal and child healthcare. During the crisis in neighboring Manipur, the hospital responded by organizing free medical camps and distributing food and essentials to Internally Displaced Persons (IDPs) who sought shelter in the region.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- Tele-Stroke Clinic: In partnership with Assam University, Silchar, BMCH launched a Tele-Stroke Clinic offering real-time consultation and stroke management, reducing delays and improving outcomes.
- CLHTC Program with CMC Vellore: BMCH trains community health workers in basic medical care, promoting a preventive, community-based approach to healthcare.
- Home-Based Palliative Care: Supported by Savitri Waney, UK, this service provides medical, emotional, and spiritual care to terminally ill patients and their families.
- Nursing Capacity Building with HATS: Specialized training by Health and Allied Training Services has enhanced the clinical and leadership skills of BMCH nursing staff.
- Government Partnerships: Collaboration with NHM Assam supports maternal and child health services in tribal and tea garden communities.
- MOU with ICDS: BMCH signed an agreement with the Banskandi ICDS Project to establish an Anganwadi Centre, promoting early childhood care.
- Support from Partner Institutions: The hospital received specialist support from volunteers such as Dr. Akshitha Sai Ragam (OBGY), helping sustain services in critical areas.
- Community Engagement: BMCH partnered with local groups to conduct health camps, cancer awareness drives, and humanitarian aid for IDPs.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
70	16634	1208	466	531

Makunda Christian Leprosy & General Hospital

Makunda Christian Leprosy and General Hospital is a 250-bedded, NABH-accredited hospital located in Sribhumi (Dist. Karimganj), Assam. The catchment population of the hospital includes communities in the districts of the three States of Assam (Karimganj district), Tripura (North Tripura, Unakuti) and Mizoram (Mamit district). It is operated by the Makunda Christian Leprosy and General Hospital Society, a unit of the Emmanuel Hospital Association. In addition to the hospital, the Society runs a higher secondary school and an agriculture and animal husbandry program, reflecting a holistic commitment to health, education, and rural development.
The hospital offers a wide spectrum of clinical services including general medicine, orthopedics, obstetrics and gynecology, psychiatry, pediatrics, surgery, and dentistry—the hospital has emerged as a key referral center in the region. Home-based care is provided for long-term patients and high-risk mothers. Regular community ANC and mental health clinics extend the hospital's reach into underserved areas.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- Clinical services include ICU care, pediatric and neonatal ICU, advanced surgery including laparoscopy, dentistry, psychiatry, and community health outreach.
- Monthly community clinics are held in collaboration with government health centers, offering antenatal care and mental health services in remote areas.
- Home-based care continues for chronically ill patients and high-risk antenatal/postnatal mothers, enhancing health equity.
- Partnership with the Azim Premji Foundation has launched the "PARIVARTAN" program to improve primary healthcare in 13 villages of Lowairpoa block.
- Government collaborations include participation in schemes such as Janani Suraksha Yojana and Pradhan Mantri Surakshit Matritva Abhiyan. The hospital also implements ICTC, RNTCP, NLEP, immunization, and AFP programs.
- Makunda is a training center for Dutch medical residents under a partnership with the Royal Dutch Tropical Institute (KIT), Amsterdam. Six residents completed internships this year.
- Through the ZEISS-supported "Aloka Vision Programme," affordable, high-quality spectacles are distributed in surrounding communities.
- MCL&GH supports clinical training for nursing students from CIHSR Dimapur, BMCH Alipur, CMC Vellore, and Believers Medical College, Kerala.
- Challenges include the lack of a resident surgeon and concerns around hospital data security.
- Future plans include establishing a blood bank, developing leadership within the institution, improving school education quality, building capacity at the Ambassa branch hospital, and starting a small-scale dairy under the agriculture department.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
250	120242	13289	6592	6258

Baptist Christian Hospital

Baptist Christian Hospital (BCH) in Tezpur, Assam, is a 130-bed mission hospital committed to delivering comprehensive and compassionate care in the northeastern region of India. Serving both tribal and urban communities, BCH offers specialized clinical services along with active outreach through palliative care, community-based rehabilitation, and women empowerment programs. The hospital also contributes to capacity-building through nursing and palliative care training programs, aligned with its vision of holistic healing and service.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- Clinical Services:BCH provided a wide spectrum of specialty services including General Medicine, General Surgery, Paediatrics, Orthopaedics, Dermatology, Radiology (CT, USG, X-ray), Anaesthesiology, Emergency Services, Intensive Care, Palliative Care, and General Dentistry.
- Palliative Care: A newly renovated Palliative Care Ward, funded by Rotary Club of Greater Tezpur, was equipped with donated furnishings and a van for home visits. A landscaped garden was also created with support from Ms. Gilly Burn (UK).
- Community Health Outreach:The Community-Based Rehabilitation Project reached 423 children across Sonitpur and Karbi Anglong districts. The Women Empowerment Project in Karbi Anglong benefited 80 women through livelihood and support initiatives.
- Government Collaborations:BCH continues to support the Universal Immunisation Program and the National Tuberculosis Elimination Program. While PMJAY (Ayushman Bharat) is currently on hold due to policy changes, CMAAY (Chief Minister Arogya Arunachal Yojana) continues to offer cashless health services.
- The Mobile Stroke Unit (MSU) Project in collaboration with ICMR entered its 7th year of emergency stroke care delivery.
- Non-Governmental Partnerships & Training:BCH maintained research collaborations with ICMR, INSTRuCT Network, and NIHR.
- A free dental camp (Oct 2024) was organized with German Dental Carehood International, and a cleft lip/palate camp (Nov 2024) was held with Love Without Reason.
- The second round of nurses' training was conducted by HITS, with Ms. Val Reade (New Zealand) as trainer.
- Ongoing palliative care training continued through IAPC.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
130	71606	5616	15	3768

Jiwan Jyoti Christian Hospital

Jiwan Jyoti Christian Hospital (JJCH), located in Sonbhadra district, Uttar Pradesh, continues to serve the community with a Christ-centered mission rooted in compassion, healing, and excellence. The hospital is part of the Emmanuel Hospital Association and has steadily evolved to meet the growing needs of the underserved rural population. With a team of 13 doctors and skilled medical staff, JJCH strives to provide the highest attainable standard of healthcare. Services are grounded in dignity, care, and a commitment to treating all individuals equally.

JJCH offers emergency care, general surgery, obstetrics and gynecology, ENT, ophthalmology, dentistry, and palliative care. Supportive services include physiotherapy, audiology, diagnostics, and an artificial limb center. The administration also oversees biomedical waste management, HR, and medical records.
Outreach efforts remain vital to JJCH's mission, with programs like school eye health screenings, animal health care, and village health camps. A significant component of the hospital's impact is its role in shaping future healthcare professionals through partnerships with Believer's Church Medical College and Christian Medical College Vellore.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- JJCH partnered with Qure.AI to pilot an AI-powered digital assistant for voice-captured, automated outpatient records—making it the first hospital in India to implement such a model. JJCH also uses qXR for AI-assisted chest X-ray interpretation for TB and recently joined Qure.AI's Q-Track project for improved TB care coordination.
- A new Sight Restorer Training Program was finalized this year in partnership with India Collaboration, focusing on training rural youth in refraction. Each trainee will establish a Vision Center in their village, extending JJCH's reach.
- Collaboration with Sight Savers is underway to perform 1,200 free cataract surgeries in the next nine months, backed by financial support.
- Challenges remain—flooding due to the hospital's low-lying structure affects operations during heavy rains, and prevailing misconceptions in the local community hinder conversion of outpatients to inpatients.
- JJCH plans to build a new OPD and labor room, continue training medical students, and expand its community programs, particularly in adolescent and maternal health with proposed support from the Azim Premji Foundation.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
75	76931	4107	324	2972

Kachhwa Christian Hospital

Kachhwa Bazar is a small rural town in Mirzapur district, Eastern Uttar Pradesh. Kachhwa Christian Hospital (KCH) was founded in 1897 by Dr. Robert Ashton of the London Missionary Society. After his retirement in 1929, the hospital was handed over to the Bible Churchmen's Missionary Society (BCMS), where it flourished under the leadership of Dr. Neville Everard. During that time, it became one of the region's most respected surgical hospitals, offering up to 150 beds and a nursing school that trained many local women.
Today, KCH is a 25-bedded secondary care multi-specialty hospital and a unit of the Emmanuel Hospital Association (EHA). It has served the community for 127 years, making it the oldest hospital in the EHA network. Alongside clinical services, the hospital provides an array of community health and development programs in the surrounding villages, reflecting its deep-rooted commitment to holistic rural healthcare.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- A wide range of services are offered, including general medicine, surgery, pediatrics, obstetrics, dental care, head and neck oncology, ICU/NICU, diagnostics, and palliative care.
- Project Safal, in partnership with the District TB Department, is helping eliminate TB through door-to-door surveys, testing, treatment, and nutrition support.
- The hospital collaborates with Kiran Society to identify and rehabilitate children with developmental delays, encouraging an inclusive approach to care.
- Partnership with VetNet Foundation supports cattle deworming and training of vets and para-vets in rural livestock care.
- The hospital faces growing competition from unregulated clinics and a seasonal drop in patients during winter, which has impacted finances and salary disbursement.
- A new three-year partnership with the Azim Premji Foundation will strengthen primary healthcare in local villages.
- The Head and Neck Cancer department is being developed further to meet rising demand in this area of care.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
25	38257	3751	58	656

Prem Sewa Hospital

Prem Sewa Hospital (PSH) in Utraula, Uttar Pradesh, is a mission hospital serving rural and under-resourced populations with essential healthcare services. With a legacy of compassionate, Christ-centered care, PSH has offered affordable treatment across multiple departments and extended health outreach through palliative and community-based programs.
Over the years, the hospital has been a trusted institution for maternal care, ophthalmology, and general medicine. While facing resource and personnel limitations in recent times, PSH has remained committed to serving the poor and marginalized through outpatient and community services.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- Ophthalmology (Eye Department):The hospital remains active in both OPD and surgical services, performing 787 eye surgeries in 2024–25, including 779 cataract surgeries and 8 for glaucoma. This represents an increase from the 701 surgeries performed in 2023–24.
- Palliative Care: Both inpatient and home-based services were provided for palliative care patients, supported by the Savitri Waney Charitable Trust. This program continues to offer dignified and compassionate care to terminally ill individuals in their homes and at the facility.
- Community Health Programs:The hospital has remained active in general health care, NCD (Non-Communicable Disease) awareness, and medical camps to reach the wider rural population with preventive and curative services.
- General OPD Services: The hospital recorded 44,925 OPD visits in 2024–25, reflecting continued trust from the community despite limited inpatient operations.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
35	44925	966	93	1156

Broadwell Christian Hospital

Broadwell Christian Hospital (BCH), Fatehpur, was founded in 1909 by Dr. Mina MacKenzie, a young missionary doctor from Nova Scotia under the Women's Union Missionary Society. What began as a small dispensary has grown into a multi-specialty hospital, serving all sections of society regardless of race, caste, creed, or religion.
In 1974, BCH became part of the Emmanuel Hospital Association (EHA), New Delhi. Despite various challenges, BCH has remained focused on its mission to provide quality and affordable healthcare to the underserved.

The year 2024 marked a turning point, as the hospital resumed uninterrupted services with a renewed team of doctors and paramedical staff. BCH is now a 40-bedded facility providing 24/7 emergency care, diagnostics, surgery, maternity care, palliative care, immunisation, and home-based services. New services in 2024 include ultrasound, physical medicine and rehabilitation, endoscopy, laparoscopy, and head and neck surgery.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- Mission Indradhanush Immunisation Drive: Provided free vaccines to 1,703 children, improving vaccination coverage among the marginalized.
- TB Elimination Nutrition Support: Adopted 50 TB patients, offering nutrition kits to aid recovery and prevent complications.
- Maternal Health Program (PMSMA): Delivered specialist antenatal consultations for 223 pregnant women and 216 general patients. Trained 190 ASHAs and ANMs on maternal and child health.
- PMJAY Scheme: Offered free healthcare services under the Ayushman Bharat insurance scheme for poor and marginalized groups.
- School Health Program: Reached 3,983 students to raise awareness about lifestyle, nutrition, mental health, and preventive care. Poster competitions promoted dialogue on substance abuse, gender equality, and mental health.
- BCH also aims to enhance quality through new software, accreditation, and patient-centered models. Future plans include a diagnostic center, school wellness initiatives, disability programs, and integrating technology into NCD care.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
40	19409	1483	706	445

Champa Christian Hospital

Champa Christian Hospital (CCH), a unit of the Emmanuel Hospital Association, serves the rural populations of Janjgir-Champa and Sakti districts in Chhattisgarh.
CCH has expanded its mission through impactful community-based work. Notable services include home-based palliative care, regular in-house and community medical camps, and disaster preparedness training. These were implemented as part of the Building Post COVID-19 Community Resilience and Recovery Strategy, covering the districts of Janjgir-Champa, Sakti, and Korba.

Through its Community Health and Development Project, the hospital engages in wide-ranging awareness and capacity-building activities. These include education on mental health, gender equality, disability, domestic violence, human trafficking, and prevention of non-communicable diseases. The project also strengthens grassroots advocacy and supports leadership development in alignment with national health priorities.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- Medical Outreach: CCH conducted monthly free in-house medical camps and quarterly community clinics, ensuring healthcare access to underserved populations.
- Disaster Preparedness Training: In partnership with Transform Aid International (Australia), CCH trained local communities and built a strong reputation for disaster preparedness and response.
- Palliative Care at Home: The hospital's commitment to compassionate care extended through its home-based palliative care program.
- Visiting Consultant Support: CCH benefitted from skilled professionals who supported pediatric and other services through short-term visits and partnerships within the EHA network.
- Community Empowerment: Workshops were held to address issues like child abuse, human trafficking, disability inclusion, and mental health awareness, reaching vulnerable and marginalized groups.
- Networking and Advocacy: CCH worked closely with local stakeholders to build community-level networks and promoted access to entitlements, public health schemes, and support systems for the disadvantaged.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
75	4010	552	11	6

Sewa Bhawan Hospital

Sewa Bhawan Hospital (SBH), located in Pithora Tehsil, Chhattisgarh, is a vital mission healthcare institution serving tribal and underserved populations. Rooted in the vision of "transforming the world through justice for the weak and vulnerable," and the mission of "holistic healing and community empowerment," SBH offers patient-centered, Christ-driven care that addresses both medical and spiritual needs.
The hospital operates under a charity-based model, empowering Junior Medical Officers (JMOs) to provide discretionary financial aid to prevent medical debt. In addition to inpatient services, SBH's ministry includes pastoral outreach, spiritual counseling, and community engagement, making it a beacon of hope for many in the region.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- Medical Services: SBH provided care across multiple departments, including the management of infectious diseases, hypertension, diabetes, snake bites, and toxicology cases.
- Obstetric & Gynecologic Services: Comprehensive perinatal care was provided through prenatal checkups, labor, delivery services, and gynecological surgeries. Emergency labor care was made available 24/7, and high-risk cases were managed with clinical diligence and prayerful support.
- ICU Services: A compact 4-bedded ICU handled critical cases such as sepsis, poisoning, trauma, and cardiac events, providing tertiary-level care in a resource-limited setting.
- Diagnostics: Significant diagnostic upgrades included the launch of a CT scan and Digital Radiography (DR) X-ray unit. A newly integrated diagnostic block now includes ultrasound (USG), echocardiography (ECHO), and lab services.
- Community Outreach: SBH conducted weekly medical outreach to remote villages, awareness camps, and spiritual counseling. Special events such as Christmas outreach at Anaath Bal Samiti, weekly Sunday home fellowships, and monthly devotion hall gatherings reinforced community ties and spiritual care.
- Partnerships: The hospital benefitted from visiting specialists including Dr. Kishen (Gynac Surgeon, Raipur), and received surgical and academic support from Dr. Abraham Mathew and Dr. Stephen Punnoose from Believers Medical College Hospital, Tiruvella.
- Dr. Tushar Naik, a visiting surgeon, provided ongoing surgical assistance.
- CMC Vellore extended support through short-term doctor deputation and diagnostic services like histopathology and ELISA.
- SBH also supported other EHA hospitals—Fatehpur, Robertsganj, and Champa—by deploying JMOs.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
50	13746	2567	914	948

Chinchpada Christian Hospital

Established in 1942, Chinchpada Christian Hospital (CCH) is a 50-bedded charitable mission hospital located in Western Khandesh, Maharashtra, serving a predominantly tribal population—over 70% of whom live below the poverty line. Rooted in the love of Christ, the hospital delivers compassionate, affordable, and high-quality healthcare with a vision to bring healing and dignity to the marginalized through holistic care and community engagement.
CCH remains committed to addressing not only the clinical but also emotional and spiritual needs of its community, providing both hospital-based and outreach services to those who have limited access to medical care.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- Provided essential general surgeries, including hysterectomies, appendectomies, and abdominal procedures.
- Treated a wide range of conditions in general medicine, such as tuberculosis, leprosy, sickle cell disease, and alcohol-related complications.
- Delivered obstetrics and gynecology care, including normal deliveries and cesarean sections.
- Offered dental services and oral health education, filling a critical gap in rural dental care.
- Upgraded diagnostic capabilities with a new Direct Radiology X-ray machine, resumed ultrasound services, and continued CT scan services for time-sensitive, accurate diagnoses.
- Operated the region's only rehabilitation center, supporting patients with cerebral palsy, strokes, neuromuscular and musculoskeletal disorders through physiotherapy and occupational therapy.
- Conducted home visits for terminally ill and home-bound patients, offering medical, emotional, and spiritual care.
- Organized SALT visits in villages to reflect on community issues, promote local leadership, and inspire transformation.
- Ran the Community Lay-Leaders Health Training Certificate Course (CLHTC) in partnership with Christian Medical College (CMC), Vellore, empowering local volunteers with basic healthcare skills.
- Maintained strong collaborations with partners like CMC Vellore and Ludhiana, Medic Assist International, Joni and Friends, Bryn Mawr Presbyterian Church, and others.
- Contributed to global research through involvement in the PENGUIN, Stroke, and DRAGON studies, enhancing evidence-based care and knowledge-sharing.
- Partnered with the Azim Premji Foundation to deliver comprehensive primary healthcare in 14 villages of Navapur block, focusing on TB, leprosy, diabetes, hypertension, and sickle cell disease.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
50	25375	3683	20	406

Lakhnadon Christian Hospital

Lakhnadon Christian Hospital, located in Seoni district of Madhya Pradesh, traces its origins to the early 1920s . The hospital was significantly expanded in the 1970s by Dr. D.M. MacDonald, a Scottish surgeon who developed it into a prominent surgical center. His legacy continues to inspire many.

The hospital was formally registered as Lakhnadon Christian Hospital Society in 1998. After its closure in 2019 due to a shortage of doctors, clinical services resumed in January 2022 with a new team of doctors.
Today, the hospital provides outpatient and inpatient services, minor surgeries, pediatric care, and home-based palliative services. It continues to serve as a vital healthcare hub for the region, committed to compassionate service and medical excellence.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- Outpatient services resumed in 2022 and saw steady growth, treating 5,080 patients in the past year. Care is provided for both infectious and non-infectious diseases, with special attention to pediatric patients.
- Inpatient admissions rose to 233 this year, up from 114 the previous year. Care includes management of gastroenteritis, pneumonia, TB, and surgical infections. The hospital currently offers 12 general beds, 4 high-dependency beds, and 4 private ward beds.
- Home-based palliative care is being provided to 68 enrolled patients, supported by Women for Missions of the Presbyterian Free Church (PFC).
- Key partnerships include the Presbyterian Free Church of Scotland and Australia, EHA USA, and other EHA hospitals like Duncan Hospital, which contribute through staff visits and financial support.
- Challenges include patients seeking alternative care first, leading to delayed treatment; poor health awareness; and limited diagnostic resources such as ultrasound or CT, resulting in frequent referrals to higher centers.
- The hospital plans to improve nursing care through weekly education and exposure programs, expand community outreach via village health awareness camps, recruit doctors in obstetrics, gynecology, and surgery, and develop new infrastructure including a 50-bed hospital building, a 10-room nurses' hostel, and a general mess facility.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
20	5267	232	0	0

Duncan Hospital

Duncan Hospital, Raxaul, managed by the Regions Beyond Medical Union Society, is a key mission hospital near the Indo-Nepal border, known for its legacy of quality and compassionate care. For decades, Duncan has served underprivileged populations in Bihar and Nepal through integrated medical services, education, and community programs.

Duncan Hospital offers an extensive range of services including Obstetrics & Gynecology, Pediatrics & Neonatology, General Medicine, Critical Care, Psychiatry, Orthopaedics, Dental, Radiodiagnosis, Physical Medicine and Rehabilitation, along with ART Clinic, DOTS Centre, and Prosthetic & Orthotic services.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- Nursing Education: The hospital runs an accredited School of Nursing (GNM) under MIBE, affiliated with the Bihar Nurses Registration Council (BNRC) and Indian Nursing Council, contributing to the professional development of local healthcare providers.
- Training Programs: Regular educational initiatives include the Community Lay-Leaders Health Training Certificate Course (CLHTC) in collaboration with CMC Vellore, PGDFM contact classes for doctors, and SBA training for government ANMs to improve delivery and maternal care.
- Community Outreach Programs: The hospital provides accessible services beyond its walls. A medical outpost in Champapur offers twice-weekly antenatal and dental clinics. The Chetna Palliative Care program provides compassionate home-based and occasional inpatient care for over 60 terminally ill individuals. The CBR project supports people with cerebral palsy, autism, and spinal cord injuries, while Nayi Roshni addresses mental health challenges. Additionally, Nayi Umeed promotes maternal well-being, and the Nyay Kendra focuses on the prevention of human trafficking and offers aftercare services to survivors.
- Strategic Partnerships: Duncan Hospital collaborates with several key organizations. It functions as a DOTS Centre in partnership with the Government of Bihar for TB care. Through Love Without Reason, it offers free cleft lip and palate surgeries. Further, it partners with CMC Vellore, CMC Ludhiana, and Believers Medical College under the SHP program, enhancing training and expanding service delivery. These alliances significantly boost the hospital's outreach, training capacity, and access to specialized care.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
200	148365	11331	2496	7050

Prem Jyoti Community Hospital

Prem Jyoti Community Hospital (PJCH), located in Godda District, Jharkhand, is providing critical healthcare to tribal communities in one of India's most underserved regions. With a deep commitment to preventive and promotive health, PJCH focuses on holistic and community-based care for marginalized populations, including the Malto tribe.

The hospital's mission extends beyond clinical services to encompass community development, capacity building, and youth empowerment through education and skill training. Over the years, PJCH has evolved into a trusted name in tribal healthcare through outreach, palliative services, and institutional partnerships.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- Outpatient & Inpatient Services: A total of 10,797 OPD visits and 1,453 IPD admissions were recorded. The hospital prioritized non-communicable disease management, including stroke, hypertension, diabetes, CKD, and provided mental health counselling.
- Emergency & Palliative Care: Emergency admissions were dominated by complex infectious diseases, psychiatric cases, and alcohol-related complications. Palliative and symptomatic care was delivered for terminally ill, cancer, stroke, and TB patients.
- Critical Care & Neonatal Services: The 6-bed High Dependency Unit (HDU) provided vital support to critically ill patients and neonates, including post-op care, blood transfusions, and CKD stabilization. The NICU and Pediatric HDU managed neonatal conditions like birth asphyxia, sepsis, and jaundice, with reduced referrals due to in-house care.
- Maternal and Child Health: A well-equipped labor room handled high-risk pregnancies and LSCS, though cultural preferences and growing local alternatives led to fewer institutional deliveries.
- Diagnostics & Radiology: The lab was supported by EQUAS (CMC Vellore) and Thyrocare. Radiology services resumed after equipment upgrades including a new X-ray machine and CR printer. Antenatal ultrasounds were conducted through special permission due to lack of a radiologist.
- Community Outreach & Development: Through mobile clinics, PJCH reached 40 villages, offering ANC, vaccinations, lab tests, and health awareness. The Watershed Project introduced new agriculture techniques, engaged Village Development Committees (VDCs), and linked communities with government welfare schemes. Palliative care was extended to home-based patients within a 30-km radius.
- BSS Training Program: Since 2017, PJCH has run two-year diploma programs (DMLT, X-ray, OT Tech) under Bharat Sevak Samaj, empowering tribal youth. Over 35 students have graduated and found employment across EHA and private hospitals.
- Government Partnership for Malaria Control: In response to a 2023 cerebral malaria outbreak, PJCH trained 40 Community Health Volunteers across 153 villages, covering 23,283 people—with zero malaria deaths reported since the intervention.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
30	10797	1453	243	185

Madhipura Christian Hospital

Madhipura Christian Hospital (MCH), located in one of India's most underserved regions, was established in 1953 by the Mission Board of the Brethren in Christ Church. Despite years of adversity, MCH has grown into a vibrant center of healing and transformation for Madhepura and neighboring districts.

The region's poor healthcare infrastructure and widespread poverty have compelled MCH to evolve rapidly, both in scope and scale. Over the past three years, the hospital expanded from a 35-bed facility to a 100-bed NABH entry-level accredited institution. It now provides advanced medical care in disciplines such as medicine, surgery, obstetrics, pediatrics, ENT, psychiatry, rehabilitation, dentistry, and pain management.
Beyond clinical services, MCH has a thriving community health program that includes mobile village clinics, home healthcare, Tele-ANC for pregnant women, nutrition programs in Mahadalit villages, and disaster risk mitigation. Educational services have also grown through non-formal schools and training programs like the SHRISHTI College of Community Training.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- The hospital saw a leadership transition with Dr. Ashish Abraham taking over as Managing Director.
- Inauguration of the 'Lowell Mann' ICU added 12 new beds to the existing critical care setup, and the expanded 'Kreider' Operation Theatre Complex now houses five operating rooms.
- The Dental Department launched advanced implant services and participated in outreach camps in underserved regions like the Sundarbans.
- ENT, plastic surgery, and neurosurgery camps brought advanced procedures like cataract and brain tumor surgeries to rural patients for the first time.
- MCH conducted outreach surgical camps in EHA units without surgeons, completing 315 surgeries in underserved areas.
- The outpatient department exceeded 300 daily visits, and inpatient numbers crossed 100 for the first time in hospital history.
- The Department of PMR organized the first Inclusive Wheelchair Marathon, engaging wheelchair users from Madhepura and beyond.
- Community programs operated in 28 villages through HEAL Madhepura, including initiatives like Rupantaran for women entrepreneurs and Koshi Kisaan Umeed for local farmers.
- MCH Academy expanded to over 35 children, with 11 non-formal schools incorporating digital learning.
- Future plans include expansion of hospital infrastructure and staff housing, establishing satellite centers, starting a residential school and nursing school, and recruiting consultants in key specialties.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
100	54251	4841	1260	1317

Nav Jivan Hospital

Nav Jivan Hospital (NJH), situated in the Satbarwa block of Palamau district , continues to serve as a beacon of healing and hope in its community. The hospital has navigated a year of both challenge and growth, holding fast to its vision of transforming lives through compassionate healthcare.

Despite a decrease in outpatient registrations—due to operational pressure and a smaller medical team—NJH experienced a rise in inpatient admissions, demonstrating the community's continued trust in its services. Staff workloads increased as the hospital adjusted to capacity demands, yet the team remained resilient and committed to their mission.

This year saw significant infrastructure development: the new expanded labour room, Neonatal ICU, and Intensive Care Unit were inaugurated in August 2024. The maternity ward was renovated with better post-operative care space, and a new waiting area was constructed for patient families, improving the hospital experience for all.

MAJOR HIGHLIGHTS OF THE HOSPITAL

- OPD numbers saw a slight decline, while inpatient admissions increased, indicating stronger demand for critical care services.
- Registration to the OPD was limited to manage the high workload handled by a smaller team of doctors.
- Two new specialists—a psychiatrist and a surgeon—joined the hospital in March 2025, expanding the scope of medical services.
- The newly opened labour room, NICU, and ICU complex addressed rising patient needs and increased bed occupancy.
- Renovation of the maternity ward added a designated post-operative care area, improving recovery and care delivery.
- A comfortable new waiting area for IPD patient relatives was constructed, offering respite and dignity to families.
- A new doctor's quarters was inaugurated, built with modern amenities like tiled flooring and a modular kitchen —enhancing staff welfare and retention.
- The hospital's leadership emphasized vision alignment and spiritual growth through evening devotions, SWOT analysis exercises, and weekly presentations on mission and core values.
- Staff were encouraged to see their work as a calling rather than a career, inspired by the testimony of pioneers like Dr. Isac and Vijila from Prem Jyothi Community Hospital.
- Looking ahead, NJH plans to prayerfully define short- and long-term goals for continued service and transformation.

Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
100	48372	5982	1678	2146

CLINICAL STATISTICS OF HOSPITAL

Hospital Name	Total Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
Champa Christian Hospital	75	4010	552	11	6
Chinchpada Christian Hospital	50	25375	3683	20	406
Lakhnadon Christian Hospital	20	5267	232	0	0
Sewa Bhawan Hospital	50	13746	2567	914	948
Makunda Christian Leprosy & General Hospital	250	120242	13289	6592	6258
Burrows Memorial Christian Hospital	70	16634	1208	466	531
Baptist Christian Hospital	130	71606	5616	15	3768
Kachhwa Christian Hospital	25	38257	3751	58	656
Jiwan Jyoti Christian Hospital	75	76931	4107	324	2972
Broadwell Christian Hospital	40	19409	1483	706	445
Prem Sewa Hospital	35	44925	966	93	1156
Duncan Hospital	200	148365	11331	2496	7050
Madhepura Christian Hospital	100	54251	4841	1260	1317
Nav Jivan Hospital	100	48372	5982	1678	2146
Prem Jyoti Community Hospital	30	10797	1453	243	185
Harriet Benson Memorial Hospital	40	4260	632	136	219
Christian Hospital Chhatarpur	120	50841	6484	1996	1934
Landour Community Hospital	35	26875	1028	1	2432
Herbertpur Christian Hospital	150	83963	3160	249	1779
Totals	**1595**	**864126**	**72365**	**17258**	**34208**

Nursing

Mr. Vinay John
Nursing Director

Nurses form the heart of healthcare delivery in 19 EHA units, offering critical services in hospital settings and through outreach in remote and underserved communities. They provide emergency and neonatal care, train caregivers, and deliver home-based services for the elderly and terminally ill.

Despite facing staff shortages, limited resources, and geographic isolation, EHA nurses remain committed and innovative. Many lead quality improvement, protocol development, and support district and national health initiatives. They also extend care through antenatal visits, wound care, discharge counseling, and family support—ensuring a wholistic approach rooted in EHA's values of hope, healing, and dignity.

> We praise God for His abundance and grace in the nursing department. We celebrate a remarkable year marked by change and significant progress as we advance on our journey to nursing excellence!

EHA Nursing Schools: Shaping Future Caregivers

EHA runs six nursing institutions—1 college, 5 schools, and 1 ANM school—which serve as transformative platforms for young men and women, especially from tribal, rural, or disadvantaged backgrounds. Students not only gain clinical knowledge but also learn servant leadership, compassion, and resilience.

Graduates support EHA hospitals and often go on to serve in leadership roles, government institutions, and globally, carrying the EHA ethos. Their stories reflect a cycle of transformation—uplifting families, inspiring others, and sometimes returning as educators or leaders.

International Partnership with VIAA Netherlands

The “Bridging Gaps” program, a 10-week virtual exchange with VIAA Netherlands, fosters cross-cultural learning among nursing students. They collaborate on health challenges, conduct research, and develop proposals—growing in leadership and innovation. This initiative deepens global connections while strengthening the foundation of compassionate care.

Neonatal Survival Training (NeST)

The NeST program trained 391 nurses and doctors in neonatal resuscitation, illness management, and safe equipment use. It strengthens birth attendance, breastfeeding promotion, and postnatal care across EHA and partner hospitals. Community health workers are trained to identify and refer sick neonates, while Kangaroo Mother Care is actively promoted. A research study is underway on neonatal resuscitation knowledge among nurses.

Rise of Nurse Leaders

Over a decade, the number of MSc-qualified nurses in EHA has grown from a few to over 35, with 80% in leadership roles. These nurse leaders guide clinical practices, mentoring, and quality care, contributing to organizational growth. This progress highlights the importance of investing in higher nursing education.

Nurse Leaders’ Workshop

A workshop titled “Advancements in Emergency and Critical Care” was held at Duncan Hospital Raxaul in March 2025. Sponsored by EHA USA and Dr. Robyn K. Hale-Bullock, the event focused on evidence-based nursing, best practices, and shared governance to improve emergency care in resource-limited settings.

Smartboards for Enhanced Teaching

Thanks to a donation from Mrs. Reny Loewen and EHA Canada, three nursing schools (Herbertpur, Chhatarpur, and Tezpur) now use SMARTBOARDS to deliver interactive, engaging lessons—transforming the teaching-learning process.

Continuing Nursing Education (CNE)

Regular CNE sessions are held across all units to ensure nurses stay updated on clinical advancements. These include weekly CNEs, workshops, and participation in national forums covering palliative care, maternal and neonatal health, infection control, and emergency response.

Institutional Milestones and Events

- **College of Nursing Launch:** EHA's first College of Nursing was launched at Herbertpur Christian Hospital on February 28, 2025, marking a major educational milestone.
- **Golden Jubilee – Chhatarpur:** The School of Nursing at Christian Hospital Chhatarpur celebrated its 50th anniversary on February 26, 2025.
- **New College Building – Duncan Hospital:** Duncan Hospital inaugurated its new College of Nursing building, a step toward expanding nursing education.
- **Principals' Meet:** The first gathering of all EHA Nursing School Principals was held at the EHA Central Office. Updates were shared with the Executive Director and EHA USA representatives to strengthen academic planning and collaboration.

Nurses in Palliative Care

EHA nurses are playing a central role in palliative care, often leading patient management and symptom control in nearly all units. This nurse-led service reflects compassionate, evidence-based care and exemplifies EHA's mission of dignified service.

EHA in Communities

EHA-Disaster Management & Mitigation Unit (DMMU)

Mr. Shem Raomai
Head - DMMU

For nearly two decades, the EHA- DMMU has supported both disaster-affected and high-risk communities through a long-term, integrated approach. Our work spans all phases—before, during, and after disasters prioritizing capacity building and empowering communities to strengthen their resilience. We prioritize the needs of the most vulnerable and marginalized individuals and families.

Emergency Response: In the reporting year we responded to two major disasters in two states, namely Assam and Manipur.

> By equipping over 1,900 first responders, supporting disaster-affected families in Assam and Manipur, and partnering with communities for long-term recovery, we continue to turn compassion into action—before, during, and after disasters."

A. Conflict situation:

Since the Manipur conflict began on 3rd May 2023, many displaced individuals have remained in relief camps. EHA continued its support in Kakching and Kangpokpi districts, offering medical and psychosocial care to internally displaced people. These efforts were made possible with support from the Azim Premji Foundation and local donors. The EHA study titled "Ethnic Clashes: Implications among Women and Children in Manipur"

In June 2024, rising tensions in Manipur's Jiribam district forced many residents to flee to Assam's Cachar district. In response, EHA, in partnership with BMCH, provided dry food rations and medical care to those affected and taking shelter there.

B. Flood situation:

Heavy monsoon rains severely impacted the Barak Valley, leading to loss of life, injuries, and widespread damage. In response, EHA assisted flood-affected communities in Cachar and Karimganj districts, partnering with Makunda Christian Leprosy and General Hospital and Borrows Memorial Christian Hospital, highlighting DMMU's dedication to prompt, localized emergency action.

Activities	**Relief Distribution- Food and non-food items**	**Medical Camp, health teaching & psychosocial care**	**Safe drinking water (Chlorine Tablet)**
Beneficiaries	680 families	1998 people	560 families

Ms. Phalkhohat Singson

Along with her family of 13, was forced to flee their home during the conflict in May 2023. After spending several months in relief camps, they resettled in Phaijol, where they received community support, and vital assistance from EHA. The family continues to express heartfelt gratitude for the support.

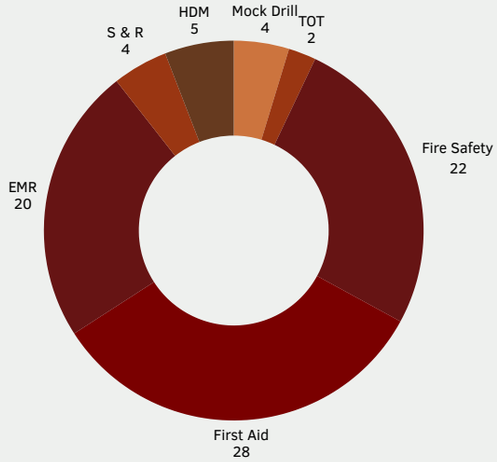
Mrs. Kh. Jamini

An 83-year-old widow from Serou Makha Leikai, fled her home after it was burned in May. Relocated to Lamjao relief camp, she struggled with health issues but received treatment and medicines from the EHA medical team. She is deeply grateful for the timely support.

Disaster Preparedness - Training & Capacity Building

The EHA-Disaster Education & Emergency Medicines (DEEM) training program offers practical, interactive exercises, hands-on instruction and real-life scenario simulations in essential lifesaving skills such as fire safety, first aid, CPR, BLS, search and rescue, as well as disaster management for hospitals and schools. It also promotes disaster preparedness, equipping communities to respond effectively.
During this reporting period, 1,918 first responders were trained through 64 training sessions.

1. Safety-First Project: A total of 1,351 individuals were trained as First Responders under the Safety-First project, supported by DVN.
2. DEEM Program: Under the regular DEEM training initiative, 601 individuals received First Responder training.

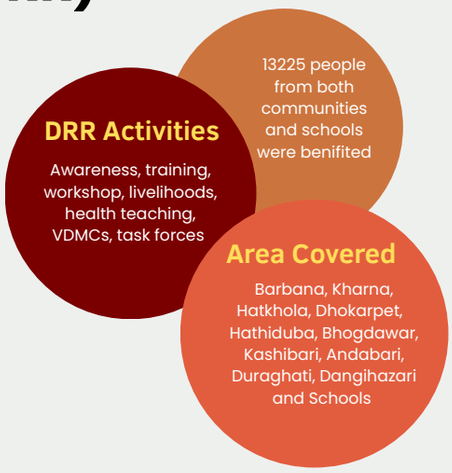


> I was able to save a life by performing CPR on someone who was unconscious. I'm deeply thankful for the First Aid and CPR training I received from EHA, which gave me the skills to make a life-saving impact. - Aruna (Name Changed)

Our New Partners: GMR Varalakshmi Foundation (GMR Group is a leading Indian multinational infrastructure conglomerate), University of Delhi, and Jagannath International Management School, New Delhi.

Disaster Risk Reduction (DRR)

DRR Pilot Project: Supported by EHA Canada and DVN, the DRR Pilot Project was implemented in 10 villages and selected schools to build the capacity of communities and local stakeholders. Adopting a multi-hazard, multi-stakeholder approach, it enhanced resilience through training, technical support, and resource distribution. The project concluded in 2024 with a closing workshop attended by over 100 beneficiaries, partner organization representatives, and the Senior Deputy Collector and Disaster Management In-charge of Kishanganj district, Bihar.



Networking & Partnerships

Robust and long-term collaborations are key to EHA's success. Through active engagement with local communities and strategic partners, we deliver interventions that are both effective and sustainable.
A Village Disaster Management Committee reached out to the Sashastra Seema Bal (SSB) in Thakurganj for assistance in protecting their crops from pests, insects, and weeds. In response, the SSB provided four spray machines, which proved to be extremely beneficial for the entire village.

Health Emergency Alliance (HEAL): The HEAL project, an initiative by EHA with support from Verre Naasten, aims to strengthen regional preparedness and coordination within the healthcare community across South Asia. The North-Eastern regional consultation was held on 8th November 2024 at CIHSR Hospital, Dimapur, gathering 36 delegates from 18 potential healthcare institutions across 8 Indian states. Delegates from each state shared insights and strongly emphasized the urgent need for such a network in the region, especially considering the increasing frequency of disasters and the evident gap in medical emergency preparedness and response capabilities.

Looking Ahead : DMMU's upcoming priorities include:

1. **Empowering communities** with life-saving skills and resilience strategies.
2. **Strengthening emergency responses** to reduce losses and support quick recovery.
3. **Expanding training** programs to build individual and community-level preparedness.
4. **Deepening collaboration** with stakeholders to advance a unified disaster risk reduction approach.

EHA DMMU follows a comprehensive, community-focused approach to disaster preparedness, prioritizing prevention, response, and recovery. By investing in people and building strong partnerships, DMMU strengthens local capacities, reduces risks, and promotes the creation of safer, more resilient communities. We encouraged individuals to share their knowledge, sparking a ripple that extends awareness to families, workplaces, and the broader community.

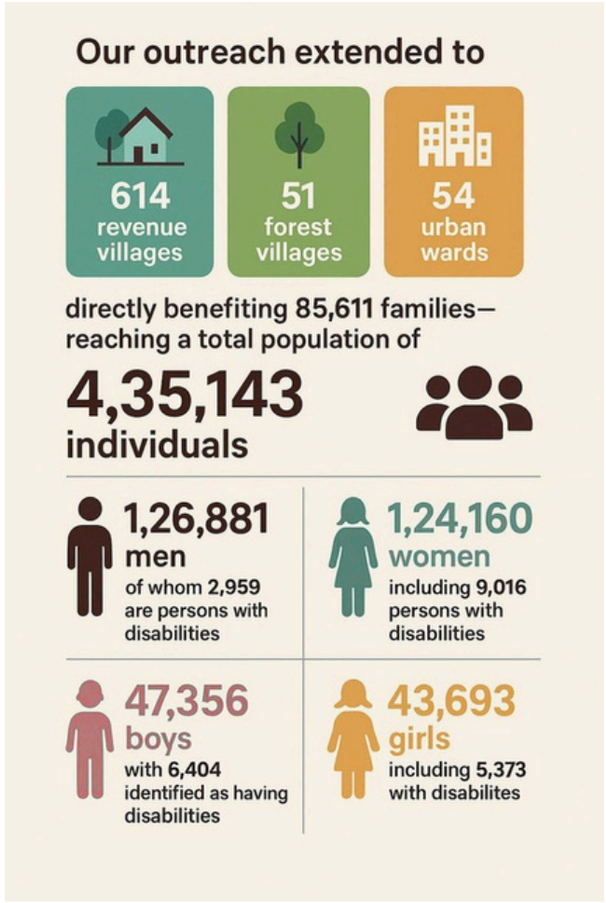
Community Health and Development

Robert Kumar
CHD Director

I am pleased to present the report on our Community Health and Development Projects. This makes my final report as CHD Director. I am deeply grateful to the entire Community Health staff and the teams from Units for their unwavering support and cooperation throughout my tenure.

In 2024–25, EHA and its Units made significant strides in advancing inclusive development and holistic community transformation. Over the course of the year, we successfully implemented **51 projects across 86 blocks in 10 states**, impacting a broad and diverse spectrum of communities.

These numbers are more than statistics—they represent lives touched, communities engaged, and progress made toward equity and inclusion. Our work this year reflects EHA's unwavering commitment to reaching the most marginalized and underserved populations, whether in remote rural settings, forested areas, or urban environments



Reproductive, Maternal, New-born, Child and Adolescent Health (RMNCAH):

This year marked a significant step forward in maternal and child health. A total of 5,677 antenatal and 489 lactating mothers were supported through regular home visits, awareness sessions, and medical outreach, strengthening care at the community level. Additionally, 753 institutional deliveries were facilitated across government, private, and EHA facilities, promoting safe childbirth practices and improving maternal and newborn outcomes.

Disability:

The disability programme created inclusive spaces and improved individual well-being through home-based therapy for over 1,400 children and adults, enhancing mobility, communication, and independence. The initiative also formed 142 Disabled People's Organizations (DPOs) with 1,885 active members and reached over 26,000 people through public awareness events, fostering empowerment and inclusion across communities.

The CHD Strategic Direction for 2020–2025:

The table below shows the number of people reached by each programme during each financial year.

PROGRAMME	2024-25	2023-24	2022-23	2021-22	2020	Total
PREVENTION OF HUMAN TRAFFICKING AND CHILD ABUSE	1456	2290	4722	5389	1534	15391
DISABILITY	33012	38404	23009	23576	4609	122 610
RMNCAH	7281	12942	4061	5248	1888	31 420
CLIMATE CHANGE AND DISASTER RISK REDUCTION	8700	1 331	18 912	9681	3776	42 400
MENTAL HEALTH	248 149	133 947	85 666	156 211	128 125	752088
NUTRITION	1513	1445	1981	3295	241	8475
NON-COMMUNICABLE DISEASES	34 411	36 400	53 251	48 124	13 287	185 473

Climate Change and Disaster Risk Reduction (CCDRR)

To promote sustainable livelihoods, the CCDRR initiative trained over 600 farmers in the System of Root Intensification (SRI) for rice and maize and linked 711 farmers with Krishi Vigyan Kendras for continued agricultural support. The programme also improved household resilience by facilitating MNREGA access for 83 families, enabling bank accounts for 2,920 individuals, and helping 3,641 people obtain ration cards.

Mental Health:

Breaking the stigma around mental health, the programme reached over 1.36 lakh community members and 1.01 lakh individuals through large-scale awareness and inclusion campaigns. 1,297 ASHA and Anganwadi workers were trained as frontline supporters, while 3,695 persons with psychosocial disabilities received tailored counselling and recovery planning, fostering a culture of care and inclusion.

Non-Communicable Diseases (NCDs):

The NCD initiative emphasized prevention and early detection through 7,924 health screenings, identifying 1,628 individuals with NCDs and completing 984 cancer screenings. Through 4,149 health education sessions, over 19,700 people were educated about lifestyle changes and preventive care, contributing to more health-conscious communities.

Prevention of Human Trafficking and Child Abuse (PHTCA)

Focused on child safety and community protection, the programme conducted 380 community awareness programs, equipping local stakeholders with tools to prevent trafficking and abuse. It also formed 86 youth groups, 20 children groups, and established 66 community-based organizations, laying a strong foundation for long-term child protection.

Staff Capacity Building:

A comprehensive Community-Based Rehabilitation (CBR) training program was conducted in Kachwa, Uttar Pradesh, from 10th to 12th March 2025. The event brought together 40 participants, including staff from Emmanuel Hospital Association (EHA) units and partner organizations. Expert facilitators from CMC Vellore led the sessions, focusing on effective strategies for managing challenging behaviours in individuals with disabilities. A specialized module on neonatal care was delivered specifically for therapists, addressing the distinct rehabilitation needs of newborns. The training emphasized an interdisciplinary approach, with collaborative sessions involving therapists, lay leaders, and frontline workers. This integration encouraged a more holistic and community-centered model of disability care. Additionally, the program included a focused discussion on enhancing the delivery and effectiveness of home-based rehabilitation services. The interactive and practical nature of the training strengthened the capacity of grassroot workers and promoted sustainable rehabilitation strategies within the community.

Parenting and Nai Disha:

EHA facilitated extensive capacity-building and community engagement activities across seven districts in six states. A total of 162 facilitators were trained, including specialized training for both Parvarish (parenting support) and Nai Disha (adolescent engagement) programs. The initiative reached 1,794 adolescents through Nai Disha sessions and engaged 2,446 parents/families under the Parvarish model. In addition, 107 Core Committees were formed to sustain community-led efforts.

Inclusion Work:

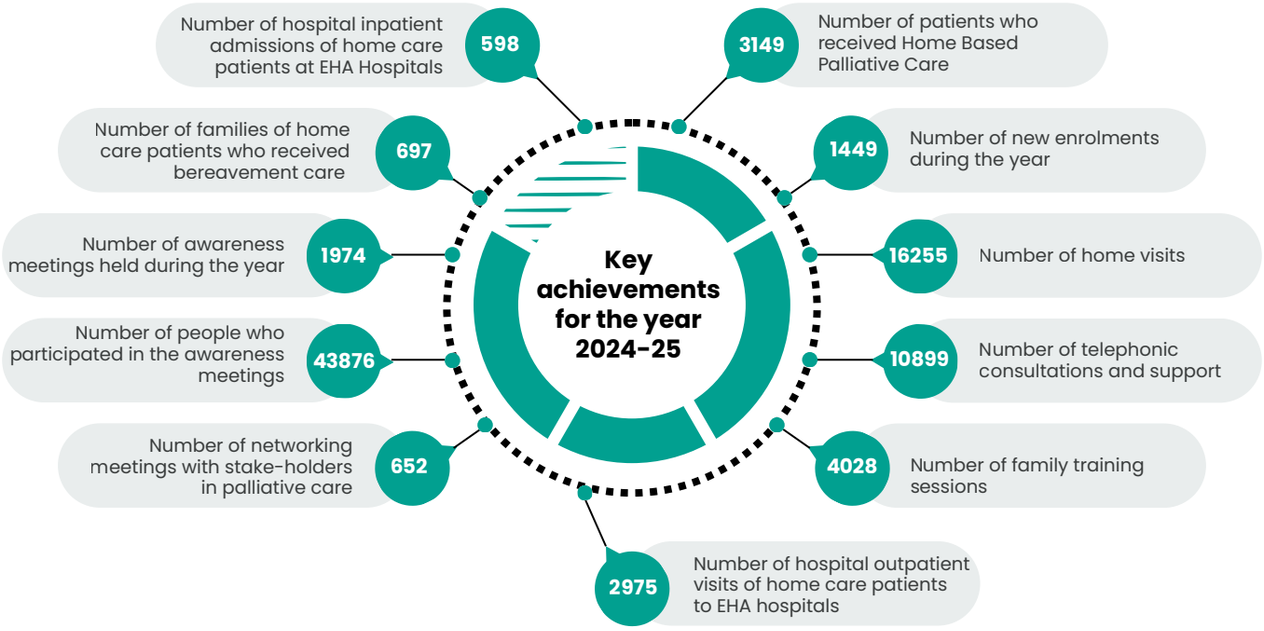
In Aligarh and Agra, a total of 321 beneficiaries were reached through various community-based initiatives focused on inclusion, leadership, and group engagement.

We remain deeply grateful to our dedicated teams, partners, and community members whose collaboration and resilience continue to drive our mission forward. Together, we are building pathways to health, dignity, and opportunity for all.

EHA Palliative Care

Dr. Ashita Rebecca Singh
Head - Palliative Care

EHA's palliative care services first began under the visionary leadership of Dr. Ann Thyle in March 2010 at Harriet Benson Memorial Hospital, Lalitpur. Since then, there have been many strides in scale, quality, and impact through the work of palliative care across EHA, for which we give all glory to God.
The goal of palliative care is to affirm the dignity of those who suffer from life-limiting illnesses by optimising their quality of life through relief of physical symptoms, as well as a holistic approach that seeks to bring multidimensional comfort. The desire to provide this holistic care with dignity is grounded in the conviction that each human being is created in the image of God and therefore is of inestimable worth.
Over the past year, home-based palliative care was provided by 18 EHA units. The table below shows the quantum of the valuable palliative care work carried out by all the units.



Partnerships: We are grateful for the partnerships with the Savitri Waney Charitable Foundation, EHA USA, EHA Canada, Medic Assist International, Elmbrook Church USA, and other friends and supporters who have partnered with us in the work across the various units.

The challenges include difficult working conditions for our staff, vehicle breakdowns and the need for continued funding support to be raised. We are grateful for the dedication and commitment of all our staff who continue to labour despite all that challenges, providing much needed multidimensional care to our dear patients. We are grateful to the Bruderhof community, USA, for providing a vehicle for the Utraula palliative care program, and the Samvedana Foundation for the gift of laptops for some of our teams.

Future plans: We plan to strengthen the palliative care services across the various locations, improving in quality as well as the scope of services. We have incorporated some universal tools for palliative care across our units, such as the iPOS 7 and the Australia modified Karnofsky Performance Scale, to characterise and prioritise our patient care better.

SHALOM DELHI

A PALLIATIVE CARE UNIT OF EHA

Dr. Rajni Herman
SHALOM

Shalom Delhi, is a Palliative care unit of EHA, providing holistic care for patients with HIV, Terminal Cancer and NCD. Its various components include a hospital clinic with inpatient and outpatient facilities, home care programs for patients with HIV, Cancer and NCD, an Adolescent program, Mental wellness program, Palliative care work among transgenders, Support groups, awareness program on disability and a Livelihood program.

Hospital Care: Outpatient: 842 patients were seen in the OPD, of which 517 were HIV-positive patients, which also include 65 transgenders. Inpatient: 75 patients availed inpatient care of which 14 were newly enrolled HIV positive patients.

Research done in Shalom, was published in 2025 in the Christian Journal for Global Health. this paper titled “Comorbidities, Opportunistic Infections, and Helminth Infections among HIV positive patients at a small hospital in Delhi, India” combines work from multiple projects over the years at Shalom and was truly an amazing team effort of Shalom staff and interns from Wheaton college Illinois.

Community health :

23rd July 2024- a health camp was conducted by Shalom staff in the Munirka region of Delhi. A two-day training was conducted by the Shalom team for adolescents from the Burmese Refugee Families.

Home Based care HIV program:

584 visits to HBC families and 316 visits to HBC transgenders (Transwomen). 2 TGs and 8 families were enrolled into Shalom’s Home-Based Care- HIV program. 12 family regionals get together and 8 TG regional get togethers were conducted during the reporting year. 194 ration hampers were distributed to families and TGs. Special programs conducted are as follows: 1 couples get together, 1 Widows get together, 1 Stabilized family get together. 16 older adolescents, and 3 younger adolescents were provided educational assistance through stationery hampers. Other programs conducted were: World AIDS Day- commemorated with 20 families. 1 TGs annual get together & 2 Shalom Children’s get together. Shalom supported the education of 6 girls from families affected with HIV. They include- 4 girls pursuing the 3-year General Nursing Midwifery course and 2 girls pursuing Nursery Primary Teacher Training (NPTT). 1 girl successfully finished her 1 ½ year Diploma course in Fashion Designing and started working. Annual medical review services were provided to 55 individuals from HBC families, 21 TGs and 7 children infected with HIV. Mental health care services - 12 Training sessions provided for artisans from the Shalom livelihood centre, 1 training session provided to Stabilized Families ,12 support group meetings provided for widows struggling with loneliness, 11 support group meetings provided for fully disclosed HIV+ older adolescent girls and 54 counselling sessions provided for clients seeking support. 17 girls from Home Based Care families enrolled into Shalom Invisible Girl Project (IGP). 36 girls enrolled with Invisible Girl Project (IGP) were provided educational assistance.

The reporting year, marked the successful completion of Batch 11 of Character Development and Batch 21 of Life Skills education program. 1 Pre-program Orientation cum parenting workshop, 1 Orientation class each for Character Development and Life Skills Education program, 14 Topical classes each within Character Development and Life Skills Education program, 6 Cell group meetings each within Character Development and Life Skills Education program, 3 Revision feedback sessions each within Character Development program and Life Skills Education program, 1 picnic, 1 Peer leaders Orientation, 3 Peer Leader counselling sessions, 1 Peer Leader Assessment sessions, 1 Peer leader appreciation lunch and 1 graduation day celebration each was conducted.

Home-Based Care Cancer and NCD program

550 home visits were made including 28 bereavement visits. 49 cancer awareness programs were held during the reporting year and 312 people benefited from these awareness programs. 558 family trainings were conducted for our patients and their families, and 1299 individuals benefitted from them. 38 networking visits were made to different NGOs. 49 food hampers were distributed to our cancer-affected patients during the reporting year. (pic below Home Based Care -cancer visits)

Livelihood program

9 Artisans are being trained in the Kiran centre. 18 sales were held throughout the year. Some of the venues were: Swiss German Embassy mela, Woodstock School Mussoorie, JMC College, Delhi University, YMCA Disability Program and in different FBO's. Mental wellness classes were conducted monthly for the artisans. Health awareness classes were conducted by Shalom nurses on various topics, and marketing strategy classes were held twice a month for the artisans. During the reporting period Kiran Artisans were trained in "Fire Safety Measures". 2 of the Kiran staff and 2 artisans were trained in making Jewellery also during the reporting year .

Partnerships: New Partnerships forged with

- Howard University-Global Community Health lab
- CCA -Christian Conference of Asia - Action Together in Combating HIV and AIDS in Asia (ATCHAA).
- Lume movement of Verre Naasten.
- Discipleship Care network

Challenge faced:

Funding for one component of Shalom had come down, we were able to raise local funds to sustain the program.

Plans for the future:

- To conduct trainings and health camps for other NGOs -which will be a source of funding for Shalom.
- Strengthen the psychosocial aspects and disability work provided by the Shalom team.
- To work on enhanced collaborative networking and strategic partnership with organisations doing palliative work in Delhi and across India.
- To search for a permanent place for Shalom to be established.
- To explore areas of raising local funds and resources so that we sustain the ongoing programs on a long-term basis.

EHA RESEARCH

Mrs. Christy Martina
Head - Research

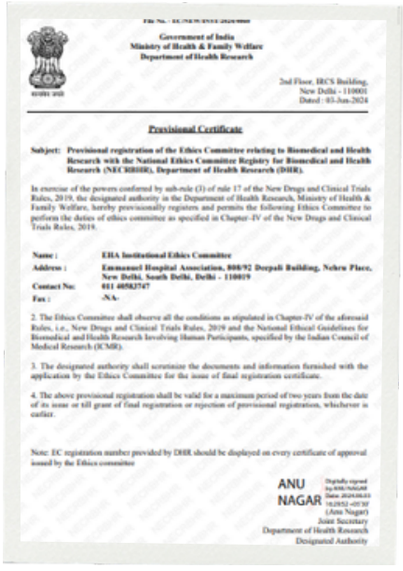
EHA's research has positively impacted the lives of many patients and communities. I am grateful to God, as well as to the research teams and the patients, for their support in building and nurturing a culture of research within EHA. The first Institutional Ethics Committee (IEC) of EHA was formed as per the guidelines of the Indian Council of Medical Research in 2006. This marked the beginning of a structured approach to overseeing the research activities within the organization.

I am thankful to the EHA board for the opportunity for entrusting me with the research responsibility and for their continued trust and support. The EHA Institutional Ethics Committee (IEC), chaired by Dr. Jacob Puliyel, continued to utilize an online platform to evaluate the research protocols. Dr. Jacob Puliyel, along with other members Dr. Savita Duomai, Dr. Annamma John, Mr. Abraham Matthews, Ms. Namrata Mohapatra, Ms. Imtimenla Aier, Dr. Khushboo Nand, who contributed their time and expertise to ensure protocols were reviewed with the highest ethical standards.

During the reporting year, the IEC conducted 5 meetings and reviewed 16 new protocols from various projects and hospitals. The IEC also reviewed 5 protocol deviations and 9 serious adverse events with 2 protocol amendments. Out of the 16 new protocols, EHA initiated were 12 research, 3 multicentric study, and 1 outside institution.

All ethics committees reviewing biomedical, social, and behavioral science research for health conducted in India involving human participants are required to register on the Naitik portal with the Department of Health Research (DHR). The EHA Institutional Ethics Committee received the provisional registration certificate in June 2024, for which we offer our thanks and praise to God.

EHA hospitals have been actively involved in impactful research initiatives. We sincerely appreciate the commitment to research across all EHA units and projects. In June 2024, we conducted an eight-day online workshop on qualitative research and analysis (online) with 33 participants from within and outside the EHA.



Government of India
Ministry of Health & Family Welfare
Department of Health Research

2nd Floor, IRCS Building,
New Delhi - 110001
Dated : 03-Jun-2024

Provisional Certificate

Subject: Provisional registration of the Ethics Committee relating to Biomedical and Health Research with the National Ethics Committee Registry for Biomedical and Health Research (NECRHHR), Department of Health Research (DHR).

In exercise of the powers conferred by sub-rule (3) of rule 17 of the New Drugs and Clinical Trials Rules, 2019, the designated authority in the Department of Health Research, Ministry of Health & Family Welfare, hereby provisionally registers and permits the following Ethics Committee to perform the duties of ethics committee as specified in Chapter-IV of the New Drugs and Clinical Trials Rules, 2019.

Name : EHA Institutional Ethics Committee
Address : Emmanuel Hospital Association, 808/92 Deepali Building, Nehru Place, New Delhi, South Delhi, Delhi - 110019
Contact No: 011 40583747
Fax : -NA-

2. The Ethics Committee shall observe all the conditions as stipulated in Chapter-IV of the aforesaid Rules, i.e., New Drugs and Clinical Trials Rules, 2019 and the National Ethical Guidelines for Biomedical and Health Research Involving Human Participants, specified by the Indian Council of Medical Research (ICMR).

3. The designated authority shall scrutinize the documents and information furnished with the application by the Ethics Committee for the issue of final registration certificate.

4. The above provisional registration shall be valid for a maximum period of two years from the date of its issue or till grant of final registration or rejection of provisional registration, whichever is earlier.

Note: EC registration number provided by DHR should be displayed on every certificate of approval issued by the Ethics committee

ANU NAGAR
Joint Secretary
Department of Health Research
Designated Authority

Provisional Registration Certificate, IEC- Department of Health Research

Plans for the coming year

1. Conducting capacity-building workshops on research methodology and grant writing
2. Encouraging more staff members to actively engage in research within their respective units.
3. To initiate new research and apply for research grants
4. Form a research core team within EHA

Highlights from the field: Research in Action

Mr. Arputh Martin, Herbertpur Christian Hospital

FINANCIAL STATEMENTS

EMMANUEL HOSPITAL ASSOCIATION
808/92, Deepali Building, Nehru Place, New Delhi - 110 019
Consolidated Account
Balance Sheet as at 31st March 2025

EMMANUEL HOSPITAL ASSOCIATION

(In INR)

Particulars	Schedule	As at 31st March 2025 (Rs.)	As at 31st March 2024 (Rs.)
LIABILITIES			
General Fund			
Reserves & Surplus	1	8,12,95,844	8,46,83,781
Fund Balances	2	4,01,12,348	4,01,12,348
Funds & Liabilities			
Earmarked Project Funds	3A to 3E	2,27,69,244	2,66,54,652
Other Current Liabilities			
Other Payables	4	19,59,162	18,65,699
Total		**14,61,36,598**	**15,33,16,480**
ASSETS			
Fixed Assets	5	3,00,17,516	3,02,27,635
Current Assets			
Cash & Bank Balances	6	11,27,95,702	11,93,45,950
Other Current Assets			
Others	7	33,23,380	37,42,895
Total		**14,61,36,598**	**15,33,16,480**

Significant Accounting Policies and Notes forming an integral part of accounts **(Schedule-10)**

As per our report of even date
For **KUMAR MITTAL & CO.**
Chartered Accountants
FRN : 010500N

(Amrish Gupta)
Partner
M. No. 090553

For **Emmanuel Hospital Association**

Dr. Deepak Samson Singh
Executive Director

MS. Deepti Singh
Treasurer

Place: New Delhi
Date : 19 AUG 2025

FINANCIAL STATEMENTS

EMMANUEL HOSPITAL ASSOCIATION
808/92, Deepali Building, Nehru Place, New Delhi - 110 019
Consolidated Account
Income and Expenditure Account for the Year Ended 31st March 2025

(In INR)

Particulars	Schedule	For the Year ended 31st March 2025 (Rs.)	For the Year ended 31st March 2024 (Rs.)
INCOME			
Voluntary Contributions & Donation		1,11,15,385	1,19,30,284
Earnmarked contribution to the extent utilised		4,28,87,258	6,53,49,420
Expenses met out of R & S		8,98,195	-
Interest Income			
:-Saving Bank		3,08,212	5,82,006
:-Fixed Deposit		77,86,489	71,42,903
:- Income Tax Refund		3,78,960	40,344
Other Income	8	22,42,742	12,82,196
Total (A)		**6,56,17,241**	**8,63,27,153**
EXPENDITURE			
Program Expenses	9		
Palliative Care		28,99,258	29,68,046
Community Health		1,73,11,411	1,76,14,596
HIV Aids Life Development		1,31,12,267	1,52,18,375
Disaster Mangement Mitigation		35,94,581	1,03,55,018
Patient Care		45,76,503	1,99,15,291
Central Support Programme		26,23,974	17,09,587
Support to Staff (J&J)		2,65,650	1,37,510
Sub Total		**4,43,83,644**	**6,79,18,423**
Administrative Expenses			
Salaries & Allowances		1,65,48,018	1,27,48,537
Travelling		5,81,017	5,35,702
Office & Other Supplies		2,08,742	2,09,853
Printing and Stationery		1,49,377	1,16,431
Repairs & Maintenance		5,58,812	6,10,852
Communications		1,67,286	1,24,509
Conference, Meetings and Workshops		10,77,148	7,16,341
Hospitality		66,293	73,332
Legal & Professional Charges		12,10,300	11,92,700
Charity & Donation		14,20,000	
Utility		4,18,986	4,93,562
Rent		3,11,456	3,84,600
Activity		3,98,723	
Bank Charges		61,461	34,539
Membership and Affiliation Fee		1,32,600	2,16,080
Training & Promotion		3,11,244	
Taxes & Duties		1,77,681	1,27,783
Audit Fees		5,16,250	5,16,250
Adjustment Related to Previous Year/Tds written off		-	(1,299)
Depreciation		18,71,088	19,81,995
Total (B)		**7,05,70,126**	**8,80,00,190**
Balance being Excess of Expenditure over Income (A-B)		**(49,52,885)**	**(16,73,037)**

Significant Accounting Policies and Notes forming an integral part of accounts (Schedule-10)

As per our report of even date
For KUMAR MITTAL & CO.
Chartered Accountants
FRN : 10500N

(Amrish Gupta)
Partner
M. No. 090553

Place: New Delhi
Date : 09 AUG 2025

For Emmanuel Hospital Association

Dr. Deepak Samson Singh
Executive Director

MS. Deepti Singh
Treasurer

DIRECTORY

NORTH-CENTRAL REGION

BROADWELL CHRISTIAN HOSPITAL

Mrs. Merin Thomas
Managing Director

Collectorganj, Fatehpur,
Uttar Pradesh -212601

05180-224487 (O), 225021 (R)

md.fatehpur@eha-health.org

JIWAN JYOTI CHRISTIAN HOSPITAL

Mrs. Ava Topno
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PREM SEWA HOSPITAL

Dr. Paominlien Singson
Managing Director

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LAKHNADON CHRISTIAN HOSPITAL

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STATUTORY REPORTING

Annual Report of the Internal Commitee (IC) for Prevention of Sexual Harassment at Workplace of Emmanuel Hospital Association Central Office and Central office run projects.

During the period from January 01, 2024 to December 31, 2024, there were no cases of sexual harassment referred to the Internal Committee of EHA's Central Office and Central office run projects, by any staff or volunteers.

Dr. Rajni Herman
Presiding Officer

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