



12th Annual Report

2015-16

**Healis-Sekhsaria Institute
for Public Health**

*...LEADER of quality public health
research in India*

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Message from the Director

Dear Friends,

It is my great honour to share with you the Healix Annual Report 2015-16. This report comes to you with pride, as it is a compilation of our major accomplishments and our experiences from the past financial year. Healix has been in existence for more than a decade now (12 years). Institute vision is to advance public health through innovative science and evidence based policy.

To accomplish its vision and mission, this year Healix has successfully managed 14 projects in different categories viz., Research, Advocacy and Review Projects and initiated two new projects. During the year Healix has successfully collaborated with leading International and National Health and Research organizations.

In addition to research, Healix also engaged successfully in evidence based advocacy through its project Voice of Tobacco Victims Campaign, and contributed to several novel policies towards tobacco control. Healix contested and received grant from the Tata Trusts, through this grant Healix is working towards creating Tobacco free Educational Institutions by implementing requisite sign boards under Cigarettes and Other Tobacco Products in State of Assam.

During the year, Healix has produced about 18+ publications in peer reviewed journals along with Review Documents and Reports published by the World Health Organization. As a part of its initiative Healix hosted/co-hosted and conducted several meeting, symposiums and awareness programs/campaigns in project States advocating for innovative policies and its implementation.

Thank you all for your continued support on our journey.

Sincerely,

Prakash C. Gupta

About Healix

About Healix-Sekhsaria Institute for Public Health (Healix)

Healix is a Section 25 not-for-profit organization operational since 2004. Since its inception the organization is committed to improving the public health in India and in other developing countries through epidemiological research. It is among the few institutes that are solely dedicated to public health research and thus a leader in this field in India. Healix works in collaboration with leading National and International Health and Research organizations. Since January 2015, Healix is operating from the premises of its own situated at MIDC, Mahape, Navi Mumbai.

Healix Vision

Advancing public health through innovative science and evidence-based policy

Healix Mission

To conduct quality research in public health and carry forward its outcome for the benefit of the society.

Goals & Objectives

The current goal of Healix is to advance public health in India and in other developing countries by pursuing the following objectives:

- ✦ To undertake timely, high quality, and population-based epidemiological research that addresses important and pertinent public health issues.
- ✦ To facilitate and guide the translation of research findings into policies and programs at national and international levels

Registrations & Recognitions

Healix Ethics Committee is registered with National Institute of Health and has Federal wide Assurance (FWA). Healix Institutional Ethics Committee is also registered with the Office of Drugs Controller General; Central Drugs Standard Control Organization, India.

Healix recognition as a Research and Development Organisation (R & D) by Department of Science and Technology, Ministry of Science and Technology has been renewed for further period of three years. For CSR recognition, Healix is also empanelled with the Tata Institute of Social Sciences CSR Hub.

Abbreviations

ACC	Asia Cohort Consortium
ACT- India	Action Council Against Tobacco, India
ACTREC	Advanced Centre for Treatment, Research and Education in Cancer
ASPH	Arnold School of Public Health
CDC	Centers for Disease Control and Prevention, USA
CFI	Cancer Foundation of India
CGHR	Center for Global Health Research
CM	Chief Minister
COTPA	Cigarettes and Other Tobacco Products Act, 2003
CTFK	Campaign for Tobacco Free Kids
DFCI	Dana Farber Cancer Institute, Boston, USA
DGHS	Directorate General of Health Services
DKFZ	German Cancer Research Center
FDA	Food and Drug Administration
FSSA	Food Safety and Standard Act
FWA	Federal Wide Assurance
GATS	Global Adult Tobacco Survey
GBD	Global Burden of Disease
GOI	Government of India
GSPS	Global School Personnel Survey
GTSS	Global Tobacco Surveillance System
GYTS	Global Youth Tobacco Survey
HSPH	Harvard School of Public Health
IARC	International Agency for Research on Cancer
ICMR	Indian Council of Medical Research
IRB	Institutional Review Board
ITC	International Tobacco Control Project
IUATLD	International Union Against Tuberculosis and Lung Disease
MCGM	Municipal Corporation of Greater Mumbai
MLA	Member of Legislative Assembly
MMC	Mumbai Municipal Corporation
MOHFW	Ministry of Health and Family Welfare
MP-VHAI	Madhya Pradesh Voluntary Health Association
MWTCS	Mumbai Worksite Tobacco Control Study
NCD	Non Communicable Disease
NCI	National Cancer Institute, USA
NGO	Non Governmental Organization
NIH	National Institutes of Health, USA
NIRRH	National Institute for Research in Reproductive Health
NSF	Narotam Sekhsaria Foundation
PHFI	Public Health Foundation of India
SBF	Salaam Bombay Foundation
SEAR	South-East Asian Region (of the WHO)
SFM	SmokeFree Mumbai
TCP	(International) Tobacco Control Project, India
TIFR	Tata Institute of Fundamental Research
TMH	Tata Memorial Hospital
VoTV	Voice of Tobacco Victims
WHO, India	World Health Organization, India Office

Dr. Prakash C. Gupta – Executive Director, Healis-Sekhsaria Institute for Public Health

Dr. Prakash C. Gupta is the Director of Healis - Sekhsaria Institute of Public Health since its foundation on August 1, 2004. He is also an Adjunct Professor, at the Department of Epidemiology and Biostatistics, Arnold School of Public Health, University of South Carolina, USA and Visiting Scientist at the Harvard School of Public Health, Harvard University, USA. He is a recipient of Luther Terry Award from the American Cancer Society for Exemplary Leadership in Tobacco Control in the category of Outstanding Research Contribution

Dr. Mangesh S. Pednekar- Executive Director, Healis-Sekhsaria Institute for Public Health

Mangesh S. Pednekar is Director (Development & Research) of Healis - Sekhsaria Institute for Public Health, Navi-Mumbai. He is also a visiting Scientist at the Department of Society, Human Development, and Health, Harvard School of Public Health, USA and Visiting Faculty, Tata Institute of Social Science, Mumbai, India. He received the WHO Regional Director's appreciation award for World No Tobacco Day, 2012

Prof. P. V. S. Rao-Independent Director, Computer Scientist

Prof. Rao is past President of the Bombay Association for the Science Education, past President and Fellow of the Computer Society of India, Distinguished Fellow of the Institute of Electronics and Telecommunication Engineers, Fellow of the Indian Academy of Sciences, the Indian National Science Academy, Indian National. He is recipient of the Padma Shri (1987) from the President of India, the Om Prakash Bhasin Award (Electronics and Telecommunications 1987), the VASVIK (1987) awards [Electrical and Electronics (combined) for 1985] and the Vikram Sarabhai Research Award (1976).

Dr. Purvish Parikh- Independent Director, Oncologist

Dr. Purvish M. Parikh is a vice president and managing director of Ameri Cares India, He is an expert in medical oncology and hematology and founder of the Indian Co-operative Oncology Network. He is recipient of Excellence in Medicine Wockhardt Award by Harvard Medical International 2009; Dr TB Patel Oration Award 2009, Distinguished Visiting Fellow, Harvard Medical 2009, Honorary Senior Fellow, Oxford University

Mr. Noshir Dadrawala, Independent Director, Chartered Accountant, Centre for Advancement of Philanthropy

Noshir H. Dadrawala is Chief Executive of the Mumbai-based Centre for Advancement of Philanthropy, a company specializing in the areas of charity law and good governance practices for nonprofits. He conducts seminars and workshops for nonprofits all over the country, and is visiting faculty member at the Tata Institute of Social Sciences, SNDT University, Nirmalaniketan (College of Social Work), Narsee Monjee Institute of Management Studies, the SP Jain Institute of Management & Research, and SIES, College of Management Studies.

Ethics Committee

Healis Ethics Committee consists of 11 members, out of which eight are external members and three are from Healis. The committee is multidisciplinary and multi-sectoral in composition, and maintains gender equity. This body has two functions, one is to assess the compliance of the research with the ethical guidelines and the other is to assess the scientific value of the studies. The Chairperson of the Committee, a basic medical scientist, with many years of scientific experience, is from outside the Institution so that the independence of the Committee is maintained. Other members are a mix of medical / non-medical, scientific and non-scientific persons including a lay person to reflect differing viewpoints. The Committee is highly qualified, through the experience and expertise of its members, and the diversity of its member backgrounds, to foster respect for its advice and counsel in safeguarding the rights and welfare of human subjects in research.

List of Members

- ✦ Dr. Daniel Joseph, Medical Scientist, Professor of Pharmacology, MGM Medical College
- ✦ Dr. Surendra Shastri, Medical Scientist, Professor and Head, Department of Preventive Oncology Head, WHO Collaborating Centre for Cancer Prevention, Screening and Early Detection
- ✦ Dr. Pankaj Chaturvedi, Medical Scientist, Professor and Head and Neck Surgeon Tata Memorial Hospital
- ✦ Dr. Prakash C. Gupta, Epidemiologist, Director (Managing), Healis-Sekhsaria Institute for Public Health
- ✦ Dr. Mangesh Pednekar, Epidemiologist, Director (Research and Development), Healis-Sekhsaria Institute for Public Health
- ✦ Ms. Farida Poonawala Tata, Advocate, Partner, M/s Pandya & Poonawala, Advocates and Solicitor
- ✦ Ms. Cecily Ray, Epidemiologist Senior Scientific Officer, Healis-Sekhsaria Institute for Public Health
- ✦ Ms. Manorama Agarwal, House wife
- ✦ Ms. Devika Chaddha, Social Scientist, Program Director, Salaam Bombay Foundation
- ✦ Dr. Nobhojit Roy, Surgeon, Head, Dept. of Surgery, BARC Hospital (Govt. of India) and Visiting Professor in Public Health, Tata Institute of Social Sciences
- ✦ Dr. Anita Kar, Public Health Scientist, Director, Interdisciplinary School of Health Sciences, University of Pune

Collaborators

Healis work is carried out in collaboration with leading national and international organizations leading to publications in peer-reviewed journals and resulting in key policy level actions to improve public health, epidemiological research, tobacco control and dissemination and capacity building.

● International Collaborators [project(s) in collaboration]

- ✦ Arnold School of Public Health (ASPH), University of South Carolina, USA- [Role of Genetic and Dietary Factors in Breast Cancer Risk Study]
- ✦ Asia Cohort Consortium (ACC), Seattle, WA, USA- [meta-analysis study of Body Mass Index (Modifiable Causes)]
- ✦ Campaign for Tobacco Free Kids (CTFK), Washington, DC- [VoTV and Legal Project]
- ✦ Centers for Disease Control and Prevention (CDC)- [Smokeless Tobacco Monograph for India]
- ✦ Global Burden of Disease (GBD) group, London School of Public Health,
- ✦ Harvard School of Public Health and the Dana Farber Cancer Center, Boston, USA- [Mumbai Worksite Study, Dissemination of Tobacco Free Teachers Tobacco Free Society Study]
- ✦ Institute for Community Research (ICR), Hartford Connecticut, USA- [community study on smokeless tobacco and women]
- ✦ University of Michigan [Protecting Mothers and Newborns: Integrating Anaemia Reduction with Tobacco control During Pregnancy in Urban India]
- ✦ University of Waterloo, Canada- [the (International) Tobacco Control Project;
- ✦ World Health Organization, South-East Asia Regional Office (WHO-SEARO)- [Report on Smokeless Tobacco in South-East Asia and the Monograph on Smokeless Tobacco in India]

National Collaborators

- ✦ Action Council against Tobacco, India (ACT-India) [Legal Project]
- ✦ ACTREC, Navi Mumbai- [the Role of Genetic and Dietary Factors in Breast Cancer Risk Study]
- ✦ Cancer Foundation of India (CFI), Kolkata, West Bengal [TCP India Project]
- ✦ Department of Consumer Affairs, Government of India [Project for consumer safety of children from health hazards of tobacco products]
- ✦ Indian Council of Medical Research (ICMR), New Delhi- [National Cancer Registry Programme]
- ✦ Madhya Pradesh Voluntary Health Association (MP-VHAI), Indore, MP [TCP India Project]
- ✦ Municipal Corporation of Greater Mumbai (MCGM)- [Mumbai Cohort Study]
- ✦ Navi Mumbai Municipal Corporation[Ascertaining Link between tuberculosis and diabetes in Navi Mumbai population]
- ✦ Public Health Foundation of India (PHFI), New Delhi, India [Smokeless Tobacco Monograph for India]
- ✦ Narotam Sekhsaria Foundation (NSF), Mumbai [A study on prevalence and patterns of tobacco use among patients at urban primary health centre in Mumbai: Baseline study]
- ✦ School of Preventive Oncology, Patna, Bihar [TCP India Project]
- ✦ Tata Memorial Centre (TMC), Parel, Mumbai- [the Voice of Tobacco Victims Campaign]
- ✦ Tata Trusts [Tobacco Free Educational Institute in Assam]

Project Updates

● Research Projects

1. Protecting Mothers and Newborns: Integrating Anaemia Reduction with Tobacco Control During Pregnancy in Urban India

Background:

The primary focus of the project is to conduct a needs assessment on this particular vulnerable population (pregnant women) from a developing region of the world (Mumbai, India) to determine the most appropriate and efficacious interventions for prenatal and antenatal care within this setting. Looking at the proximal risk factors in the study, in general, tobacco use is a problem across South Asian countries, and is not a phenomenon exclusive to pregnant women. A misperception regarding tobacco use is that smokeless tobacco is "less harmful" to the user's health (Subramoney, Gupta 2008), and by extension, less harmful to foetuses in pregnant women. Similarly, Indian people of low-income status tend to have inadequate nutrition which affects their health and wellbeing and can lead to anaemia. Inadequate nutrition is particularly harmful to pregnant women, because a lack of iron and folic acid in their diets prior to and during pregnancy can hinder fetal development and increase the risk of anaemia in their babies. Although this study is not meant to clinically treat pregnant women with these health behaviours, we attempt to link multiple environmental, social and nutritional risk factors to find the most appropriate point of intervention for Indian women's health and their babies' ensured wellbeing.

Objectives:

Research Objectives of Project: The overall goal of this project is to develop and assess the feasibility of a behaviour change intervention that integrates evidence-based strategies for both mitigating anaemia due to iron and foliate deficiency, and tobacco cessation into routine ANC services at Primary Health Centres (PHCs).

Our specific objective is: Identify barriers and facilitators for optimal delivery and adoption of two behaviour change strategies for anaemia prevention during pregnancy, namely, iron-folic acid supplementation with tobacco use cessation when indicated;

Current Progress:

Data collection is over and Data analysis is going on.

Number of Publications: Nil

2. Ascertaining the link between tuberculosis and diabetes in Navi Mumbai Population

Background:

India, a low and middle income country (LMIC), is currently experiencing a double burden of infectious diseases (IDs) and non communicable diseases (NCDs). With lifestyle and economic transitions; NCDs such as cancer, diabetes, cardiovascular diseases are becoming prevalent. As the disease outlook in India is changing, it is essential to examine a link, if any, between IDs and NCDs to integrate health practices. One such proposed link is of the association between tuberculosis and diabetes. Studies from western countries have shown that diabetes increases the risk of TB two-three fold. Studies within India have shown that those with TB are more likely to be diabetics compared to those without TB.

Objective:

The objective is to understand the association between TB and diabetes in population of Navi Mumbai.

Current Progress:

- Data collection has been completed since February 25th, 2015 and data analyses is going on currently.
- Status of participants:
- 400 participants were to be contacted for administration of survey.
 - 309 participants approached
 - 83 were successfully interviewed
 - 13 completed blood collection successfully
 - 10 completed Fasting and PP Test
 - 3 completed Fasting, PP and Glycosylated Haemoglobin Test
 - 226 participants not interviewed
 - 107 addresses not located
 - 25 expired (1 from households)
 - 22 shifted location (4 from households)
 - 9 refused (1 from approaching at households, 1 over the phone)
 - 2 medical condition1 not able to talk on phone
 - 16 number not contactable
 - 17 repetitions
 - 25 not at address (either shifted or not, not sure)
 - 1 household locked
 - 1 person not identified
 - 91 participants not approached at household level

- The pilot field work was stopped as there was difficulty in approaching, locating and identifying the participants. Based on resources and information available for use, it was best to stop the data collection.
- Data analyses have been completed and a report was prepared and submitted to Navi Mumbai Municipal Corporation (NMMC) as per their request. Further analyses and report for the institute has been finalized.

Number of Publications: Nil

3. Dissemination of “Tobacco Free Teachers Tobacco Free Society Programme” in two States- Maharashtra and Bihar

Background:

Bihar School Teachers’ Study (BSTS), a cluster randomized controlled trial have been tested and shown to be effective in increasing tobacco use cessation among school teachers in the Indian state of Bihar. This one-year pilot study builds on the BSTS intervention program and will be conducted to generate an in-depth understanding of the factors associated with schools’ capability and willingness to adopt a comprehensive tobacco control program aimed at supporting cessation among school teachers. This involves data collection through quantitative and qualitative methods, including surveys of principals of randomly selected schools in two states, Bihar and Maharashtra, and focus groups with a subsample of principals and potential lead teachers to determine any changes needed in existing program materials and identify effective ways to promote the program to schools. This study is being conducted by Healix Sekhsaria Institute for Public Health in collaboration with Dana-Farber/Harvard Cancer Center (DF/HCC).

Objectives:

1. Determine schools’ willingness to adopt a comprehensive tobacco use cessation intervention for teachers;
2. Describe the characteristics of organizations, school principals, and the broader environment associated with schools’ willingness to adopt such programs; and
3. Describe perceptions of school principals and potential lead teachers of the feasibility and acceptability of implementing the program tested in BSTS, including identifying the need for any program adaptations.

Current Progress:

- All field related work is completed.
- Quantitative and Qualitative analysis for the dissemination pilot mixed method paper is ongoing.
- Discussion on the manuscript and data analysis with Healix and Boston team is ongoing.

Number of Publications: Nil

4. Mumbai Worksite Tobacco Control Study

Background:

This is a five years' randomized control trial aimed at testing and developing a tobacco control intervention suitable and effective in the context of Indian worksites. It is being conducted at 20 manufacturing worksites in the Mumbai, Thane and Raigad districts in Maharashtra, India. Dana Farber Cancer Institute, Harvard School of Public Health (United States of America) is the collaborator for this project.

If demonstrated to be effective, it will result in a tested worksite tobacco control intervention ready for dissemination in India, and will be able to inform worksite tobacco control in other developing countries. Healis will make this tested intervention product available for dissemination through its network of collaborators, including American Cancer Society (ACS) through their ACS University, Tata Memorial Center (TMC), and other members of the Advisory Board

Objectives:

To assess the efficacy of the comprehensive tobacco control intervention in terms of two outcomes:

- increased cessation of tobacco use among workers (primary outcome) and
- increased adoption and enforcement of worksite tobacco control policies (secondary outcome)

To meet these objectives, 20 participating worksites were randomly allocated to two groups following the recruitment, with 10 worksites in each group: i) group receiving active intervention or Program A (including 6 health education events) and ii) group receiving alternative intervention or Program B (including one health education event unrelated to tobacco and the health communication material). Pre and post intervention surveys were planned to be conducted in each of the 20 worksites. Worksites in the program B group additionally receive one tobacco related health education event immediately after completion of the post intervention survey.

Current Progress:

- The results baseline and follow-up data have been published for the information on prevalence of tobacco use, its correlates and quit rates at the end of the intervention.
- The data on process tracking and OSH reports was entered and shared with the Boston team.

Number of Publications: 3

- Cordeira LS, Pednekar MS, Nagler EM, Gautam J, Wallace L, Stoddard AM, Gupta PC, Sorensen GC. Experiences recruiting Indian worksites for an integrated health protection

and health promotion randomized control trial in Maharashtra, India. Health Educ Res. 2015 Jun;30(3):412-21.

- Sorensen G, Pednekar M, Cordeira LS, Pawar P, Nagler EM, Stoddard AM, Kim HY, Gupta PC. Effects of a worksite tobacco control intervention in India: the Mumbai worksite tobacco control study, a cluster-randomised trial. Tob Control. 2016 Feb 16. pii: tobaccocontrol-2015052671.
- Pednekar MS, Nagler EM, Pawar P, Sorensen G, Narake S, Stoddard AM, Gupta P. The prevalence of tobacco use among manufacturing workers: Findings from the baseline survey of the Mumbai Worksite Tobacco Control Study. Journal of preventive medicine 2016, Vol.1, No.1:3, 1-10.

5. Tobacco Control Policy Evaluation, India Project

Background:

This is a five year population based prospective cohort study aimed at measuring the psychosocial and behavioural impacts of tobacco control policies. This project is going on in four States (Maharashtra, Madhya Pradesh, Bihar and West Bengal) in collaboration with University of Waterloo.

Objective:

The broad objective of TCP India Project is to evaluate and understand the impact of tobacco control policies of the Framework Convention on Tobacco Control (FCTC) in low and middle income countries (LMICs) that participate in the International Tobacco Control Policy Evaluation Project (the ITC Project).

Effectiveness study aims:

- To examine whether a policy introduced in India will affect self-reported tobacco use behavior (e.g., quit attempts, successful quitting, quit intentions) among tobacco users, as compared to tobacco users in countries where that policy is not being introduced;
- To examine whether a policy introduced in India will enhance policy-relevant psychosocial variables (e.g., warning labels: measures of label salience) among tobacco users, as compared to tobacco users in countries where the relevant policy has not changed;
- To examine whether a policy introduced in India will impact levels of general psychosocial variables that have been identified in past research to be related to tobacco use and quitting (e.g., beliefs and attitudes, perceived risk, subjective norms, perceived behavioral control/self-efficacy, intentions)

Mediation and moderation study aims:

- To examine whether the effects of FCTC policies that have been introduced in India are being offset by compensatory behaviors (e.g., whether price increases lead to switching to discount brands rather than to quitting);
- To examine whether the effects of tobacco control policies are moderated by situational and individual-difference factors such as (a) demographic variables (age, gender, socio-economic status (SES); (b) personality variables (e.g., time perspective); (c) environmental context (e.g., number of peers/family members who smoke or use other forms of tobacco), and (d) tobacco use history of the individual (e.g., past quit attempts, tobacco use intensity). Of particular note will be whether FCTC policies serve to reduce disparities of tobacco use burden as a function of SES;
- To examine whether the effects of each policy on tobacco use behavior are mediated by those psychosocial variables that have been identified by past research to be important in predicting and understanding tobacco use behavior.

Contextual study aims:

- To conduct analyses that will examine the natural history of tobacco use and cessation in India and also whether the factors that predict tobacco use and quitting are the same or different across the ITC countries;
- To compare the impact of FCTC policies in India, an LMIC, to their impact in high income countries (HICs) to test the hypothesis that for some policy domains, the impact of FCTC policies will be stronger in LMICs

Current progress:

- The TCP executive summary report for wave 2 has been finalized.
- The TCP India Wave 2 (2012-2013) Technical Report published at ITC Project Website.
- Review process of proposed manuscripts (from wave 1 data) between Healis and University of Waterloo research team has been completed. Following manuscripts are ready to be submitted in the appropriate journals
 - Social Correlates of Adult Tobacco Use in India, An Analysis of TCP-India Wave-I Data. Ray C, Pednekar, M.S., Gupta, P.C., Bansal-Travers, M., Quah, A.C.K., & Fong, G.T. Submitted to Journal: WHO South-East Asia Journal of Public Health; waiting for reviewer's comments.

Number of Publications: 2

6. Mumbai Cohort Study (MCS)-2nd Follow Up

Background:

The Mumbai Cohort Study is a prospective cohort study following around 1, 48,000 individuals from Mumbai. The study has been conducted in two phases with phase one following 100,000 individuals, both men and women, and phase two following 48,000 men. By 2008, two follow-ups were completed for phase one individuals. For phase two, the first follow-up was completed in 2003 and the second follow-up for 48,000 individuals is currently in process of being completed.

Objectives:

The objective of this study is to study mortality associated with tobacco and alcohol use.

Current Progress:

For the second follow-up, 134,912 persons are to be followed-up of which, at present 4,289 are still needed to be followed up:

- 1,30,623 persons have been followed-up
 - 36231 persons have been re-interviewed
 - 29730 persons have expired
 - 54617 persons have migrated
 - 3215 persons have not been interviewed
 - Due to reasons of:
 - Participants being unavailable after multiple visits
 - Participants being hospitalized
 - Household is temporarily locked
 - Participants' are at native place
 - Participants' have refused for interview
 - 6830 persons have been lost to follow-up
 - Due to reasons of:
 - Addresses being incomplete or participant is not traceable
 - Area of address being demolished
 - Status of participant as alive or expired is unknown

Number of Publications: 1

Pednekar MS, Vasa J, NarakeSS, Sinha DN, Gupta PC. Tobacco and Alcohol Associated Mortality among Men by Socioeconomic Status in India. *Epidemiol Open J.* 2016; 1(1): 2-15. doi: 10.17140/EPOJ-1-102

7. Global Youth Tobacco Survey (GYTS) in Maharashtra.**Background:**

Maharashtra GYTS survey will help to understand the prevalence of tobacco use among school students and the feasibility of conducting GYTS using electronic tablets. It will also help to understand the effect of tobacco related laws on its consumption

Project objectives:

- To document prevalence of tobacco use among school students of grades 8 to 10.
- To better understand and assess students' attitudes, knowledge and behaviors' related to tobacco use and its health impact, including cessation, environmental smoke, media and advertising, minors' access and school curriculum.
- To understand the awareness about the tobacco related laws and its effect on tobacco use.
- To investigate the feasibility of conducting GYTS using electronic tablets in actual field conditions.

Current Progress:

Collection of school lists from DOEs, To take letter of Support from DOEs, Finalization of sample design and sample selection, Revision and pre-testing of data collection tool and consent, Revision of data collection protocol, Translation of data collection tools, GYTS training workshop, School Arrangements, Data collection using electronic tablets, Survey data entry, Data analysis, To write GYTS 2015 report.

Publications: None

8. Analysis of Karunagapally cohort data

Background:

Karunagapally cohort study was planned to establish a cohort of the entire residents in Karunagapally taluk in order to examine the risk of cancer. All household (n=71674) in Karunagapally taluk were surveyed using six page standardized questionnaire, starting from January 1, 1990 and ending on December 31, 1990. Healis has collaborated with RCC, Kerala to analyse the cohort data.

Objective:

The objective of the study is to estimate all cause and cause specific mortality by analysing the cohort data.

Current Status:

All-Cause mortality estimated from the data received from Regional cancer center, Kerala. Further analysis of cause specific mortality could not be completed as the required data set yet not received. We are awaiting for the data of cause of death (Recorded into ICD 10) from regional Cancer Center, Kerala. Data analysis is still going on.

Number of Publications: Nil

9. Asia Cohort Consortium Projects

Background:

The Asia Cohort Consortium (ACC) is a collaborative effort seeking to understand the relationship between genetics, environmental exposures, and the etiology of disease through the establishment of a cohort of at least one million healthy people around the world. The countries involved include China, India, Japan, Korea, Malaysia, Singapore, Taiwan, the United States, and few others. The Investigators from these countries meet on a biannual basis to report on the progress of each country's cohort, to discuss issues relevant to the development of common protocol guidelines, and to prepare for collaborative projects. The participants will be followed over time to various disease endpoints, including cancer. The collaboration also involves seeking partners among existing cohorts across Asia to facilitate the exploration of specific research questions that need more immediate answers. Mumbai Cohort study data are contributed to this Consortium. The study on BMI was completed and a paper has been published on relationship between body mass index and pancreatic cancer-No significant association was found.

Current Progress:

A paper has been published on Associations of Body Mass Index, Smoking, and Alcohol Consumption With Prostate Cancer Mortality.

Fowke JH, McLerran DF, Gupta PC, He J, Shu XO, Ramadas K, Tsugane S, Inoue M, Tamakoshi A, Koh WP, Nishino Y, Tsuji I, Ozasa K, Yuan JM, Tanaka H, Ahn YO, Chen CJ, Sugawara Y, Yoo KY, Ahsan H, Pan WH, Pednekar M. et.al, Associations of Body Mass Index, Smoking, and Alcohol Consumption With Prostate Cancer Mortality in the Asia Cohort Consortium. *Am J Epidemiol*. 2015 Sep 1;182(5):381-9. doi: 10.1093/aje/kwv089. Epub 2015 Aug 4. PubMed PMID: 26243736.

Number of Publications: 1

10. Role of Genetic and Dietary Factors in Breast Cancer Risk: Study of a Population in Demographic Transition

Background:

This is a case-control study on 500 breast cancer study cases and 500 controls in Mumbai with the tripartite collaboration between Arnold School of Public Health, Tata Memorial Hospital and Healis – Sekhsaria Institute for Public Health.

Objectives:

- Genotype 500 cases and 500 controls for 19 candidate single nucleotide polymorphisms (SNPs) association with inflammation, carcinogen metabolism and cell cycle/ DNA repair pathways
- Perform a case-control analysis to test the hypothesis that candidate SNPs are associated with increased BCCA risk and that subjects with both poor (pro-inflammatory, high-fat) diets and

candidate risk genotypes have even greater BrCA risks compared to subjects without a risk allele and with more healthy diets.

Current Progress:

We have a total of **2,105** food frequency questionnaire (FFQ) coded so far at Healix and out of which a total of **1911 FFQs** are shared with the team so far.

Number of Publications: 1

● Advocacy Projects:

11. Project for Consumer Safety of Children from Health Hazards of Tobacco Products

Background

Studies show that 5,500 children initiate tobacco use every day. Most of these become tobacco addicts and the quit rate in India is less than 3%. Thus a sensible tobacco control strategy is to prevent children from initiating and using tobacco altogether. This project, supported by the Department of Consumer Affairs (DOCA), Government of India, works on the consumer safety of children by making educational institutes tobacco free. The methodology is to work with the government to create a sustainable, institutionalized model.

Healis' on-going campaign, Voice of Tobacco Victims, plays a critical part in this project as VoTV doctors will sensitize key officials to the harms of tobacco and the need to take action. A central Healix team will provide the technical know-how and design and manage the project; while state level teams will work with state- and district-level government machinery for implementing the program. An objective measurement module will be created within existing MIS of the education department to monitor project progress and report.

Objectives of the project:

The key objectives of the study are:

- To make 100,000 educational institutes from 2-3 states tobacco-free, which means (a) no sale or usage of tobacco-products on campus; and (b) putting up the signage required by the tobacco-control law, COTPA (Cigarettes and Other Tobacco Products Act, 2003)
- As the tobacco consumption in/around schools reduces, the litter from tobacco-products will decrease thereby assisting the Swatchh Bharat campaign.
- As part of the project a lot of media will be generated, which will highlight the tobacco issue amongst public and officials.

Current Progress:

Collectively the project activities have lead to increasing numbers of educational institutes becoming “tobacco-free”. There is also an increasing ownership of the project state government officials – the Education Minister, ACS Education, Education Commissioner, Divisional Commissioners, Collectors and DEOs – all are taking pride in the project. As per the latest compliance report more than 55 thousand schools from 37 districts reported, as compliant. The schools have also started going beyond the project deliverables. In thousands of schools the Principals are making students take pledges not to use tobacco

12. Voice of Tobacco Victims**Background:**

VoTV (Voice of Tobacco Victims) is an advocacy campaign by the victims of tobacco (mostly patients of mouth and throat cancers) to advance tobacco control policies in India. The VoTV campaign provides a platform to tobacco victims to share their sufferings with the policymakers, policy implementers, social leaders and bureaucrats. The patients use the platform to tell the policymakers “this is what tobacco did to us, we want to save others.” These patients are accompanied by their treating doctors.

Objectives:

The key objectives of the projects are,

- In coordination with state partners (in 4-5 focus states) and TFK, advocate to ensure commitment from the state leadership in support of developing a comprehensive tobacco control program for that state. The major activity the patrons associated with VoTV is to organize public events and advocacy meetings.
- In other states and at the National level, mobilize VoTV in building up support in favour of tobacco control policies within policy makers and the public, and work towards tobacco control
- Conduct media advocacy around meetings and events at state and national level to highlight the outcomes and impact of these meetings and events.

Current Progress:

Below are the activities and achievement of VoTV projects during the report period,

- Sensitization of Various key Politicians for increase of Tax on Tobacco products.
- Sensitization of Health Department and Judicial department at both State and National Level for Implementation 85% Pictorial Health Warning.
- Sensitization of Judiciary members for Tobacco control at Allahabad High Court and Workshop conducted at Belgaum.
- MLA Pledge campaign run in Kerala to support tobacco control.

- Campaign run through VoTV Whatsapp state groups to support the Pictorial Health warning and media generated on same.
- Supported activities organized by State partners on occasion of WNTD, WHNCD, etc.
- VoTV also organized various Media sensitization workshops at various districts / divisions of Madhya Pradesh & Uttarakhand.
- VoTV sensitized several Policy makers and implementation of Juvenile Justice Act, Legal Metrology act (Ban on sale of loose cigarettes).
- 143 Policy Makers were sensitized at various levels during Apr 2015 – March 2016. Also 760 media coverage(s) were generated.

Number of Publications: Nil

13. Legal Assistance Project

Background:

This is an ongoing project in collaboration with the Campaign for Tobacco Free Kids (CFTFK). Under this project Healix provides legal technical assistance to Mumbai based tobacco control organisation and liaison with government officials for enforcement and enactment of strong policies on tobacco control.

Objectives:

The key objectives of the project are,

- Undertake legal actions including litigation, where appropriate, to promote tobacco control goal, to hold accountable those that violate laws relating to tobacco control, and to promote efforts to enforce existing tobacco control laws.
- Assist other non-governmental organization to initiate and undertake legal actions to promote tobacco control goals, to hold accountable those that violate laws relating to tobacco control, and to promote efforts to enforce existing tobacco control laws.
- Provide other legal advice and assistance to promote tobacco control goals in India.

Current Status:

- a) Healix through ACT India continued assistance to the government in the following cases challenging tobacco control laws (ban on all forms of packaged and flavoured tobacco and areca nut) in the past one year.
 - WP/204/2014, M/s.Milan Supari Company Pvt. Ltd. V/s State of Maharashtra and 3 Ors. and Action Council against Tobacco, India
 - WP 605/2015; M/s Godfrey Philips India Pvt. Ltd. V. Union of India & Others.

Worked on responses and representations to Ministry of Health and Family Welfare on draft Cigarettes and Other Tobacco Products Bill 2015

- b) WP (C) 134/2016, Umesh Narain Sharma V. Union of India,

Assisted in filing of PIL on plain packaging in Supreme Court which includes drafting of the application and affidavits, compilation, regular coordination with the Delhi counsel about the matter. Preparing précis and brief of the matter, regular updates to the team about the case status.

- c) Original Application 433 of 2015, Doctors for You v. Ministry of Environment, Forests and Climate Change and Ors.

Assisted team in National Green Tribunal Matter which includes, drafting of application, rejoinders and additional affidavits, coordination with Delhi Lawyer for filing of the applications and affidavit and drafting of précis and briefing, regular update to the team about the case status.

- d) Special Leave to Appeal (C) No(s). 10119-10121/2016, Karnataka Beedi Industry Association and Anr. V. Union of India

Assisted in filing Intervention applications on behalf of Doctors for You and Adv. Umesh Narain Sharma in above SLP.

Number of Publications: Nil

14. Tobacco Free Educational Institute Project in Assam:

Background: Tobacco Free Educational Institute in Assam is a one year project supported by Tata Trusts. Through this project Healis is working for the welfare of children by protecting them from the menace of tobacco by making Educational institutions tobacco free.

Objective: Protect children from tobacco by making educational institutes in Assam “tobacco free” by,

1. Making schools COTPA Compliant i.e.
 - a) put up specified boards
 - b) no sale/use within campus
2. Conducting participative anti-tobacco activities in the educational institutions

Current Status: Sensitization programme for officials of Educations Department viz. Secretary/Commissioner Elementary Education, Secretary/Commissioner Secondary Education, Joint Secretary and Administrative officials. Also sensitized officials of police department. Had a successful meeting with Shri Himanta Biswa Sarmah, Minister of Finance, Health and Education.

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5. Pednekar MS, Nagler EM, Pawar P, Sorensen G, Narake S, Stoddard AM, Gupta P. The prevalence of tobacco use among manufacturing workers: Findings from the baseline survey of the Mumbai Worksite Tobacco Control Study. Journal of preventive medicine (in press).
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9. Sujata Mishra, Renu Ann Joseph, Prakash C Gupta, Brendon Pezzack, Faujdar Ram, Dharendra N Sinha, Rajesh Dikshit, Jayadeep Patra, Prabhat Jha. Trends in bidi and cigarette smoking in India from 1998 to 2015, by age, gender and education. BMJ Glob Health 2016;1:e000005. doi:10.1136/bmjgh-2015-000005.
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Healis Activities

Guest Lectures

S. No.	Presenter	Title	Date
1.	Mark Parascandola PhD, MPH, Tobacco Control Research Branch Behavioral Research Program Division of Cancer Control and Population Sciences National Cancer Institute	NCP's Tobacco Control Research Portfolio	July 31st, 2015
2.	Prof. PVS Rao	Conversing with Computers	July 24th, 2015

Journal Club Presentations

Month	Year	Date	Presenter	Topic
April	2015	17-Apr	Ms. Gauri Dhumal	Journal Club: "Assessment of unsafe injection practices and sexual behaviors among male injecting drug users in two urban cities of India using respondent driven sampling."
July	2015	17-Jul-15	Mr. Sameer Narake	Journal Club: Oral cavity cancer risk in relation to tobacco chewing and bidi smoking among men in Karunagapally cohort study, Kerala, India.



Colloquium Presentations

Month	Year	Date	Presenter	Topic
April	2015	03rd April	Ms. Arpita Singh	Rescheduled to May 15, 2015
May	2015	15th May	Ms. Arpita Singh	Judicial Interventions –Expanding the Tobacco control legislation beyond COTPA
		22nd May	MS. Neha Mathur	NGO Fundraising Strategy and Implementation
June	2015	05th June	Ms. Jooi Vasa	Ascertaining the link between TB and Diabetes in Navi Mumbai Population
August	2015	07th August	Mr. VitthalKshirsagar	To assess the compliance level of Healix members towards Healix Guidelines
		14th August	Dr.PratibhaPawar	Assessing schools’ willingness to adopt a tested tobacco control intervention in two Indian states: Learning for dissemination
September	2015	04th September	Ms. Gauri (Hemlata) Dhumal	Preliminary results of the study 'Protecting Mothers and Newborns: Integrating Anemia Reduction with Tobacco Control during Pregnancy in Urban India
October	2015	16th October	Ms. Arpita Singh	Tobacco and the Environment
November	2015	24th November	Mr. VitthalKshirsagar	To assess the compliance level of Healix members towards Healix Guidelines

● Visits by Healis staff members

⊕ International Visits

- April 27-May 01, 2015: Dr. Gupta was invited as a resource person for the National Tobacco Summit held at the Bandaranaike Memorial Conference Hall (BMICH), Colombo, Sri Lanka. The theme of the meet was “Towards a Tobacco Free Sri Lanka- Eliminating Tobacco as a public health problem”. He attended all the sessions and co-chaired few. At the meet he also gave an invited lecture on the topic “The case for banning smokeless tobacco”.
- September 19-22, 2015: Dr. Gupta was invited to attend the Richard Doll Epidemiological Studies Consortium on the subject “Classis Causes-Smoking, Drinking and Adiposity” to be held at Oxford, England during September 20-22, 2015. He attended the Dinner Meeting on September 20, 2015. On day 1 he attended all the sessions of the Consortium. On day 2, Dr. Gupta gave a presentation about the Phase I and II: Smoking, Drinking, Adiposity and Mortality and Phase III: A next –generation epidemiological study.
- September 23, 2015: Dr. Gupta attended a planning meeting for next stage of the NCI project with Dr. James Herbert.
- September 24, 2015: Dr. Gupta left for Italy to attend the discussion meeting on how to accelerate learning regarding the impacts of alternative nicotine delivery system (ANDS) policies to be held in Florence, Italy on September 25, 2015. He attended and participated in the discussion meeting on ANDS policies.
- October 29, 2015: Dr. Gupta had a meeting with the Dean of Rutgers School of Public Health in New Brunswick Campus along with Dr. Cristine D. Delnevo, Professor and Chair of Health Education and Behavioral Science, Rutgers School of Public Health.
- October 30, 2015: Dr. Gupta travelled to New York to attend the meeting with Bloomberg Grant Initiative officials Dr. Kelly Henning and Ms. Neena Prasad.
- November 01, 2015: Dr. Gupta travelled to Atlanta to attend the Orientation meeting of Global Adult Tobacco Survey (GATS) to be held during November 02-06. At the meet, he served as a resource person for teams from four countries China, India, Russia and Ukraine.

✚ National Visits

- May 29, 2015: Dr. Gupta attended the National Consultation on Illicit Trade in Tobacco Meet organized jointly by World Health Organization (WHO) India Office and Ministry of Health and Family Welfare in New Delhi. At the meet Dr. Gupta participated in group discussions.
- June 27-28, 2015: Dr. Gupta attended the VoTV Patrons Meet organized by Healix in New Delhi. On June 27th several government officials attended the meeting. Mr. K. C. Desiraju was chief guest and was present a plaque for his contribution and help to VoTV. Mr. Amal Pusp, Director, Tobacco Control, MoHFW, Dr. Swasticharan, CMO, DGHS, Mr. Ramesh Chandra ex-secretary, Health, Govt. of Delhi and special advisor to former health minister Mr. Harsh Vardhan also participated in the meeting. Dr. Gupta welcomed the participants on behalf of Healix and conducted the proceedings as and when required.
- July 06-07, 2015: Dr. Gupta left for New Delhi to attend the International Consultative Workshop on “Assessing and Prioritizing Needs for the Occupational Health Infrastructure”. The Workshop was jointly organized by Department of Social Work (UGC Centre of Advanced Study), Faculty of Social Sciences, Jamia Millia Islamia and University and School of Public Health, University of Minnesota, USA. He attended and participated in the workshop as a resource person.
- July 08, 2015: Dr. Gupta was invited by Prof. Ravi Mehrotra of Institute of Cytology and Preventive Oncology (ICPO) in Noida. At the Institute Dr. Gupta gave a seminar on ‘Doubts about Tobacco Control’ to the staff members.
- July 09-10, 2015: Dr. Gupta attended the South East Asia Regional Meeting on Strengthening NCD Civil Society Organization organized by WHO, SEAR office. He attended the meet as a resource person and chaired a session on ‘The Role of SEAR civil society in monitoring the NCD response at national and regional level’.
- August 17-18, 2015: Dr. Gupta was invited to attend the Meeting of Scientific Advisory Committee of National Centre for Disease Informatics and Research, Bangalore. He attended and participated in the meeting as a resource person.
- February 15-17, 2016: Dr. Gupta left for Bangalore to attend the meeting of the Directors of Regional Cancer Centres to be held on February 16-17, 2016. The meeting was organized by National Centre for Disease Informatics and Research (NCDIR). It also included a meeting on Global burden of disease studies with Public Health Foundation of India (PHFI). Dr. Gupta attended and participated in the two days meeting.
- February 17-18, 2016: Dr. Gupta travelled to Thiruvananthapuram, to attend the 1st International Conference on Effective Strategies for the Prevention of Alcohol & Substance Abuse to be held at Mascot Hotel Convention Centre during February 17 to 19, 2016. On the second day of the

Conference, Dr. Gupta spoke in a session on Effective Demand Reduction Strategies; using lessons from tobacco control for alcohol control.

- March 10-12, 2016: Dr. Gupta left for New Delhi in the afternoon to attend the Scientific Advisory Committee Meeting of the Institute of Cytology and Preventive Oncology (ICPO) in Noida. In addition to receiving past and proposed scientific work the name of the institute was changed to National Institute of Cancer Prevention and Research. From New Delhi he left for Amritsar in the evening on a personal trip.
- March 12-13th 2016: The personal trip tickets had to be canceled and new bookings was made on March 13th 2016 for an urgent meeting at North Block New Delhi with a member of CBDT and other officers in connection with the Institute section 35 exemption applications.
- March 14th 2016: Dr. Gupta along with Mr. Himmat Chandaliya attended the meeting at the North Block with Mr. S. K Sahay (Member, CBDT) and Mr. Pradeep and Mr. Niraj Gupta. In the afternoon, Dr. Gupta went to MoHFW, to meet Mr. Amal Pushp, Director NTCP and Dr. Amandeep Garg Principal Secretary to Health Ministry and Ms. Vineet Munish Gill from WHO-India office.

✦ Local Visits

- April 01, 2015: Dr. Gupta along with Dr. Mangesh Pednekar visited to Tata Memorial Hospital to meet Dr. Rajendra Badwe, Director, TMC, to discuss about the proposal on Mumbai Cohort Study. Dr. Badwe agreed to collaborate and to issue the letter of support for the project.
- April 04, 2015: Dr. Pednekar was invited as a panel to evaluate the S.P. Jain Institute of Management and Research initiative Centre for Development of Corporate Citizenship (C-DOCC) Social Projects. At the meeting he shared his experiences in the field.
- May 28, 2015: Dr. Gupta attended the World No Tobacco Day (WNTD) symposium on the theme “Stop Illicit Trade of Tobacco Products” organized by ACT India at Tata Memorial Hospital on the occasion of WNTD, 2015. At the event, he gave the introductory address and participated in the panel discussion. In the late evening Dr. Gupta left for New Delhi to attend WNTD function organized by WHO and MOHFW.
- May 30, 2015: Dr. Gupta participated in the State level consultation meet for tobacco –free Maharashtra organized by Salaam Bombay Foundation at the Yashwantrao Chavan Auditorium in Mumbai at the eve of WNTD 2015. The meeting took place under the leadership of Smt. Supriya Sule, Member of Parliament. Nearly 200 participants were present for the meet. Participants included government officials, NGOs, health professional, school teachers, trade unions and representatives of political parties.

- June 03, 2015: Dr. Pednekar was invited as a speaker for the CME on “Update on Oral Cancer and Tobacco control in India”. The CME was organized on the eve of World No Tobacco Day by Tata Memorial Hospital in collaboration with Scientific Association of Medical Officers, Jagjivan Ram Hospital.

- June 17-18, 2015: Dr. Gupta attended the Learning Initiative meeting organized by Harvard School of Public Health and Harvard Business School at Taj Lands end, Mumbai. The participants/individuals were mostly from USA, and also from other parts of World including India, who have completed one phase of their lives in corporate sector and are now looking for a change in to social sector. At the meeting Dr. Gupta participated in the panel discussion on tobacco control.

- July 27-28, 2015: Dr. Gupta along with Dr. Pednekar and Ms. Arpita Singh attended the Expert Group Consultation on Smokeless Tobacco and Public Health in WHO SEAR Countries held at Tata Memorial Hospital. Dr. Gupta attended the meeting as a speaker and chaired few sessions. Dr. Pednekar and Ms. Singh attended the meeting as an Observer.

- August 02, 2015: Dr. Gupta attended and participated in the Data Safety and Monitoring Board Meeting of NIH project at TMH with other members Dr. Sankar Narayan and Dr. Gajalakshmi. He also participated in the meeting along with the PI Dr. Surendra S. Shastri, Head, Department of Preventive Oncology, TMH; Dr. Rajendra Badwe, Director, TMC and Dr. Sudeep Gupta, Dy. Director, ACTREC, TMC.

- August 12, 2015: Dr. Gupta along with Mr. Sanjay Seth and Dr. Rupesh Mahajan attended the Learning Collaborative Network coordinated by Prof. Vishwanath and hosted by Dr. Rati Godrej at Taj Lands End, Mumbai. The discussion was oriented towards involving youth for tobacco control. Representatives from PHFI, NSF, SBF and McCann Associates and several youth representatives participated in the meeting.

- September 10, 2015: Dr. Pednekar was invited as a panel to evaluate the S.P. Jain Institute of Management and Research initiative Centre for Development of Corporate Citizenship (C-DOCC) Social Projects. At the meeting he shared his experiences in the field.

- September 28-29, 2015: Dr. Gupta was at Tata Institute of Social Sciences to attend the GATS 2 Questionnaire Finalization Workshop. Representatives from CDC, Atlanta, WHO SEARO, MOHFW and ICMR were also present at the work shop.

- October 05-06, 2015: Dr. Gupta was at Tata Memorial Hospital to attend the XXXI Annual Review Meeting of National Cancer Registry Programme. He chaired and participated in different sessions of the meeting on both days.

- October 08, 2015: Dr. Gupta was invited as a resource person for the 37th International Association of Cancer Registries (IACR) Annual Scientific Conference held at the Taj Mahal Palace Hotel, Mumbai during October 8-10, 2015. At the conference, Dr. Gupta co-chaired a session on Cancer Registration in India-Challenges and Opportunities along with Prof. Matti Hakama. During the session he also presented a paper titled 'Cancer related productivity losses in emerging economies: An alternative perspective on Cancer burden'
- October 09, 2015: Dr. Gupta met Mr. Noshir Dadrawala at his office in Fort, Mumbai.

Finance and Human Resource

The institute has received **Rs. 1, 37, 79,601** by way of Grants during the current year and has utilized the same for implementing various Research & Development Projects encompassing charitable objects.

Human Resources

Directors

Dr. Prakash C. Gupta, Director (Managing)

Dr. Mangesh S. Pednekar, Director (Development & Research)

Healis Staff Members

(In order of seniority within categories, with dates of joining/leaving if during the year)

Sr. No.	Name	Designation	Date of Joining	Date of Resignation
Management Staff				
1	Ms. Ashima Sarin	Project Director		
2	Ms. Shraddha Khot	Finance Manager		
3	Ms. Arpita Singh	Legal Officer		
Research Staff				
4	Ms. Gauri Dhumal	Sr. Research Fellow		October 15, 2015
5	Dr. Pratibha Pawar	Jr. Research Scientist		November 19, 2015
6	Mr. Vitthal Kshirsagar	Project Coordinator		
7	Mr. Sameer S. Narake	Statistician		
8	Ms. Geeta Anil Kumar	Project Coordinator		
9	Ms. Joovi Vyas	Research Associate		August 31, 2015
10	Mr. Neha Mathur	Research Manager		
11	Dr. Namrata Puntambekar	Research Fellow	November 04, 2015	
Consultants				
12	Dr. Mira B. Aghi	Behavioral Scientist		
13	Mr. Sanjay Seth	Chief Operating Officer		
14	Ms. Preeti Advani	Project Communication Consultant		March 11, 2016

15	Mr. Himmat Chandaliya	Chartered Accountant		
16	Mr. Sandip Parikh	Company Secretary		
17	Mr. Pramod Kumar	Admin Consultant	January 25, 2016	
18	Mr. Requibus Zahan	Consultant Coordinator	March 04, 2016	
Administrative Staff				
19	Mr. Vijay Godambe	Sr. Data Administrator		
20	Mr. Prashant Kalamkar	Administrative Executive		
21	Mr. Suraj Sawant	System Administrator		
Field Staff				
22	Mr. A. K. Payal	Sr. Field Investigator		
23	Ms. Karuna More	Sr. Field Investigator		
24	Mr. D. Y. Kashid	Sr. Field Investigator		
25	Mr. P. N. Narawade	Sr. Field Investigator		
26	Mrs. Rakhi Madhavi	Sr. Field Investigator		
27	Mr. Prashant Mahajan	Field Investigator		
28	Mr. Narendra Chitte	Field Investigator		
29	Mrs. Susmita Dongarkar	Field Investigator		March 31, 2015
Data Entry Staff				
30	Ms. Gauri Nikam	Data Entry Operator		
Other Supporting Staff				
31	Mr. Avinash Kamble	Office Assistant		
32	Mr. Shivaji Jogadand	Driver		

Statutory Compliance

A policy on Sexual Harassment Prevention and Redressal Guidelines is in place to ensure that the governance standards are met.

No complaints in the given category were received during the Financial Year 2015-16.

Thank You

HEALIS-SEKHSARIA INSTITUTE FOR PUBLIC HEALTH

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