



SEARCH

**Society for Education, Action and Research in Community Health
Gadchiroli, Maharashtra**

Annual Report 2015-2016

About **SEARCH**

Society for Education, Action & Research in Community Health (SEARCH) is a voluntary organization set up by visionary Drs. Rani and Abhay Bang in 1986 in Gadchiroli, one of the most impoverished districts in India with tribals constituting 40% of its population.

For the past 30 years, SEARCH has been working relentlessly among the poor and marginalized rural and tribal population of Gadchiroli spanning over 134 villages. SEARCH works together with the community to find relevant solutions to health problems. It has developed a bond with the community based on trust and equity, a bond that is central in the pursuit of its grand vision – empowerment for health, expressed as ‘Arogya Swarajya’.



'I will give you a talisman. Whenever you are in doubt, or when the self becomes too much with you, apply the following test. Recall the face of the poorest and the weakest man whom you may have seen, and ask yourself, if the step you contemplate is going to be of any use to him. Will he gain anything by it? Will it restore him to a control over his own life and destiny? In other words, will it lead to Swaraj (i.e. self-rule/freedom) for the hungry and spiritually starving millions?'

M.K. Gandhi

Our Approach:

*"Go to the people
Live among them
Love them
Listen to them
Learn from them
Begin with what they know
Build upon what they have"*

Our **Vision** and **Mission**

SEARCH's vision is '**Aarogya-Swaraj**' or putting the 'People's health in the people's hands.' By empowering individuals and communities to take charge of their own health, SEARCH aims to help people achieve freedom from disease as well as dependence. Empowerment for SEARCH is more than the mere involvement, participation or engagement of individual or communities. It implies community ownership and action that explicitly aims at social and political change. This, SEARCH tries to achieve by means of its four pillars of action –

1. **SERVICE** to prevent and treat the existing health problems
2. **EDUCATION** to impart knowledge on health promotion and disease prevention
3. **RESEARCH** for the pursuit of knowledge and its application in problem solving
4. Shaping **POLICY** to disseminate our successful methods / strategies / interventions

SEARCH, today, is recognized as a global leader amongst public health institutions.

Our Community-based Participatory Approach has made path-breaking contributions in the public health problems of not just Gadchiroli, but also globally.



Annual Report 2015-2016

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Thematic **Areas of work**

HEALTH CARE



COMMUNITY HEALTH CARE
MOBILE MEDICAL UNITS
TRIBAL FRIENDLY HOSPITAL
SURGERY CAMPS
SPECIALIZED OPDs

EDUCATION

HEALTH EDUCATION
TRAINING WORKSHOPS
YOUTH SEX EDUCATION
ACTION BASED LEARNING
AMCHI NIROGI ASHRAMSHALA



YOUTH EMPOWERMENT



NIRMAN
TRIBAL SPORTS & COACHING
TRIBAL YOUTH FESTIVAL
YLDP
(YOUTH LEADERSHIP DEVELOPMENT PROGRAM)

ALCOHOL & TOBACCO REDUCTION

MUKTIPATH
(DISTRICT ALCOHOL AND
TOBACCO CONTROL PROGRAM)
MATERIAL DEVELOPMENT
SCHOOL TOBACCO CONTROL
PROGRAM



RESEARCH



HBMNCC
STROKE, MALARIA, ANEMIA
POPULATION BASED CANCER REGISTRY
MORTALITY SURVEILLANCE
ALCOHOL AND TOBACCO SURVEYS OF
THE DISTRICTS

Beneficiary **Matrix** (2015—16)

Tribal Friendly Hospital

38242 Outpatient Consultations

1235 Inpatient Admissions

492 Surgeries

Village Health Care Program

85 Villages, **93000** Population, **108** Village Health Workers in rural area

21900 Treatments by female health workers other than HBMNCC

12309 Treatments provided by male health workers in rural area

1055 Pregnant Women, **771** mothers, **761** Neonates received
the Home based Mother - Neonates and Child care

Tribal Health Program

48 Villages, **12560** Population, **80** Village Health Workers in tribal area

19262 Treatments provided by tribal village health workers

27007 Clinic consultations by Mobile Medical Unit

1916 Tribal residential school students who were part of 'My Healthy Ashram-school Program'

207 Pregnant Women, **170** Neonates received the Home based Mother - Neonates and Child care

Tobacco and Alcohol Reduction Program

3649 Students in school health program

1676 Students screened by Dentists

Youth and adolescent Education

3734 Students attended Tarunybhan camps

224 Students attended NIRMAN camps

222 teams participated in sports in tribal and rural area

196 volunteers participated in action learning module

60 sportspersons received advanced volleyball training from Nagpur

SEARCH Hospital

Maa Danteshwari Dawakhana

SEARCH built a hospital addressing the health concerns with the people's chosen name: *Maa Danteshwari Dawakhana*. *Maa Danteshwari* is the supreme tribal goddess, and *Dawakhana* means hospital. There is a temple of the goddess at the entrance to the hospital. The aesthetically built **Tribal Friendly Hospital** is one of the only hospitals designed specifically to accommodate the health care needs of tribals.

Many of the nurses who work here are from the local tribal villages, eliminating language and cultural barriers. The architecture of the hospital mimics a traditional tribal village, including a reception area built in the style of the traditional “*Gotul*” or community centre and *kutis*, or tribal huts, which allow families to stay with the patient during hospitalisation.



Highlights from year 2015-16 :

- ◆ Outpatient consultation of **38242** patients
- ◆ The hospital has **three operating suites** with two operating tables each
- ◆ Total **492 surgeries** performed in Surgery Camps (general, spinal, urological, gynecological, plastic and pediatric)
- ◆ **736** patients benefited in **Specialist outpatient clinics** are conducted for Spinal, Urology and Mental Health
- ◆ **Daily Specialty Care** is available for Gynecology and obstetrics, Infertility clinic, Internal medicine, Neurology, Dental care
- ◆ **Laboratory services** include basic blood and urine investigations, tuberculosis, malaria, filarial and leprosy testing, cytology and pap-screening. Radiological services include X-ray and Gynecological ultrasound facilities
- ◆ Currently SEARCH hospital is the only place in the entire district which has a **ventilator**



Maternal and Neonatal Care

Home-based maternal, neonatal and child care programme

The home-based maternal, neonatal and child care programme (HBMNCC), a path breaking intervention developed by SEARCH, has significantly reduced infant deaths in rural Gadchiroli. The programme has been successfully replicated at other sites in Maharashtra as well as in other states. The Government of India has accepted this programme as a national health programme. It is also being implemented in the following other countries: Afghanistan, Bangladesh, Eritrea, Ethiopia, Kenya, Lesotho, Madagascar, Malawi, Nepal, Uganda, Yemen and Zambia.



HBNCC is part of India's National Rural Health Mission, the **11th and the 12th Five Year Plan**, to reduce infant mortality, as well as endorsed by WHO – UNICEF – USAID – Gates Foundation and supported by the Johns Hopkins University and Save the Children as a global policy. The Government of India under NRHM made HBNCC a part of module 6 and 7 of **training of ASHAs**.

The approach was celebrated by the Lancet as the *Vintage Paper in the Lancet*, thus receiving global recognition.

CASE STUDY : BIRTH ASPHYXIA

On 20th September 2015, Mrs. Soni Varkhade delivered her first baby at PHC, Amirza. But the baby did not respond after birth. It neither cried nor breathed. Mrs. Meena Usendi, the Female Health Worker was present during the delivery. While the on duty Doctor and Nurse were in a fix about what to do next, Meena took responsibility and cleared the air passage of the baby by aspirating the Meconium (Secretions trapped inside the air passage) through the Meconium Aspirator. Still the baby did not cry or move. The Female Health Worker then started resuscitating the baby by giving mechanical ventilation with the help of Ambu Bag. After 10 mins of continuous resuscitation, the baby started to show signs of life. It started struggling for breath. The resuscitation was continued for 4 more minutes and at the end of the 14th minute, the baby started crying loudly!



Monitoring and **Evaluation**

Monitoring and Evaluation (M&E) was established in 1989, to catch 100% data for the ongoing research works in 143 villages, 4 blocks and tending to nearly 110,000 population.

There is a constant up-and-coming Community Research work, updating of vital statistics of the population, and regular population based surveys for internal departments. M&E provides a proper system for data management for statistical back up and analysis. It also independently evaluates research work and helps in structured cross-checking of the modus operandi.

The team has well-trained 48 tribal and 39 non tribal Village Health Workers, and their supervisors covering vital statistics and population based surveys. The data quality and efficiency is maintained by extensive monitoring on two different levels in the field, and a final analysis is supplied form M&E for research publication.

Things to know about Monitoring and Evaluation

- ◆ The team has co-ordinated 13 NGOs network project called “Hidden Child Mortality in Maharashtra,” a study on underreporting of child deaths in Maharashtra
- ◆ Managed data of 7 NGOs network project in Maharashtra called ANKUR that achieved a 51% reduction in IMR
- ◆ Trained national level trainers in NRHM about data management
- ◆ M&E is going paper free on vital statistics and events
- ◆ Is working on Application of Demographic Surveillance System, and Analysis and evaluation of Non-communicable Diseases
- ◆ M&E has made SEARCH’s Journey of 30 years an inspiration by being its backbone in publishing 45 renowned articles



Tribal Health

In Gadchiroli, tribal people live in heavily forested areas and depend on paddy cultivation. Suspicious of strangers, they have little contact with modern facilities. SEARCH's tribal programme is unique because it uses a "participatory approach" as its framework. This approach catalyses programming and empowers people to care about their own health. Through their efforts, SEARCH has helped 48 tribal villages with the ultimate goal of "Arogya Swaraj"

Adiwasi Jatra

SEARCH organises Jatra, or **tribal health assembly** to leverage this "participatory approach." The Jatra is a platform for the tribal people to voice their health and livelihood concerns to their own community. In response to their discussions, SEARCH custom designs, evaluates and expands programmes, accordingly. Tribal people are involved from the beginning; they take ownership of their health, engage in change initiatives and feel responsible for a programme's continued success.

Mobile Medical Unit

Mobile Medical Unit (MMU) a Public-private partnership, funded by **NRHM** went live in February 2012. This unit provides totally free of cost, efficient and quality Diagnostic, Curative and Preventive health care services to a **tribal population of 12500 in 48 tribal villages** in the Dhanora Taluka of Gadchiroli.



Highlights from year 2015-16 :

- ◆ Mobile Medical Unit provided Primary Health Care to **27007** patients
- ◆ The Community Health Workers (Danteshwari Sevaks) treated **19262** patients at the village level
- ◆ Total **1916** Tribal residential school students received primary health care and health education in My Healthy Ashram school program
- ◆ Total **207** Pregnant women received care under HBMNCC Program in tribal area
- ◆ Total **170** Neonates received care under HBMNCC Program in tribal area
- ◆ First ever Yuva Jatra (Youth Parliament) conducted at SEARCH, Shodhgram with participation of **320** tribal youth
- ◆ **18351** were reached out in Health Education program in tribal villages and schools
- ◆ Around **6500** mosquito nets distributed in 48 tribal villages covering around 12000 population



Alcohol and Tobacco Control Program

The top three risk factors causing diseases and deaths globally include tobacco and alcohol consumption. Government of Maharashtra has banned gutakha and the scented tobacco in the state while alcohol is banned in Gadchiroli district. In spite of the ban, a study done by SEARCH in Gadchiroli district, showed that the money spent on tobacco products in one year was Rs. 260 crores, and Rs. 79 crores on alcohol.



Vyasanmukti Kendra (Tobacco and Alcohol Reduction Programme) was launched in 1994 to create awareness and an environment against alcohol and tobacco, by way of camps rendering medical detoxification, individual and family counselling, group therapy and follow-up.

Highlights from year 2015-16 :

MUKTIPATH : SEARCH in collaboration with the Government of Maharashtra, Gadchiroli district Administration and Tata Trusts has initiated the program for ‘A Tobacco and Alcohol Free Gadchiroli’. The program in its early phase consisted of recruiting the necessary work force and infrastructure in the 12 talukas of Gadchiroli.



Tobacco free School trial : A pair-match cluster randomized controlled trial was conducted in 50 schools across Gadchiroli with a goal of developing a replicable and sustainable model for reducing the prevalence of tobacco consumption in school going children. The trial received support from the CEO, Zilla Parishad, Gadchiroli and Education officer, Gadchiroli.

Representative surveys in two districts to measure alcohol use and economic expenditure:

In order to generate good quality population level data on alcohol use to help administrators and policymakers to implement the ban on alcohol effectively, SEARCH conducted a random sample survey of 2 districts to estimate the prevalence of alcohol use with the help of National Service Scheme (NSS) students from the Gondwana University, in Chandrapur and Gadchiroli. Survey in Gadchiroli also included the measurement of use and economic expenditure on tobacco. The result of this study was provided to the Chief Minister of Maharashtra and District collector of Gadchiroli.

Research on **Non-Communicable Diseases**

When consulted about their health problems, people from the tribal and rural regions of Gadchiroli reported back and limb pain as one of their top health problems. Furthermore, chronic diseases such as high blood pressure and diabetes are highly prevalent among the patients that visit us. And, cancers are on the rise, with increase in tobacco and alcohol consumption.



We evaluated the burden of chronic non-communicable diseases by evaluating the causes of death in a population of 100,000 in rural Gadchiroli using a method called verbal autopsy. Stroke emerged as a leading cause of death and accounted for one out of every seven deaths in the entire population.

The increasing burden indicates a need to study the burden of these disorders in rural and tribal regions of Gadchiroli.

Highlights from year 2015-16 :

Stroke Trial

- ◆ Designed and started a trial to reduce the deaths due to stroke in rural Gadchiroli and measure the effectiveness of the program.
- ◆ Under this program, we selected a cadre of young 39 female village health workers from 32 villages and their training workshops were conducted.
- ◆ Mobile medical Unit is started, team including physician and nurse visits a village each day and treats the hypertension patients.



Cancer Registry

In order to understand and tackle the emerging problem of cancer due to heavy use of tobacco SEARCH has collaborated with the Tata Cancer Hospital, Mumbai in order to start a Population-Based Cancer Registry in tribal and rural Gadchiroli. Through this registry population-level information on cancers will be collected. This is the first population-based cancer based registry collecting information on cancers from tribal area in India.

Life Skills Education

Tarunyabhan

Life Skill Education Department was formed in 1995, with the aim to increase awareness about reproductive and sexual health and sexuality among young adults. Tarunyabhan (which literally means **awareness about adolescence**) are co-learning camps, for students, ensuring that a healthy environment is developed within the society where there is mutual respect for both genders. The sessions have been carefully designed by Dr. Rani Bang. Tarunyabhan endeavours to conduct village and district level camps in school and colleges, across Maharashtra.



Tribal Sports

Around 1995, we sensed that the youth in tribals have a natural tendency towards sports and cultural activities. Promoting sports was the best tool to unite, energise and sensitise them. Our goal is to unite the youth and involve them in purposeful community work and ultimately envision village empowerment. We want to bring to light the quality of leadership from potential youth for community work of their tribal village.



Highlights from year 2015-16 :

- ◆ Life Skills education of **3734 students across Maharashtra** through 10 training programs
- ◆ Training workshop for parents at 7 different places in Maharashtra
- ◆ Focused group discussions, interviews with students and teachers from 10 ashram schools in Gadchiroli to know more about their knowledge, attitude and practices and access their needs.
- ◆ Pilot testing of **training modules of adolescent education** for tribal students from 5 ashram schools in Gadchiroli district
- ◆ Created a cadre of **56 young communicators in 48 tribal villages**, who will further act as a catalyst for games and sex education
- ◆ 222 teams participated in tribal and rural sports events - **volleyball and kabaddi**

NIRMAN - Youth for Purposeful life

NIRMAN is a youth leadership development initiative to identify, nurture and organize young change makers to solve various societal challenges. NIRMAN provides guidance, expertise and environment to inculcate self learning and encourages youth for social action.

NIRMAN aims at

- ◆ Sensitizing the youth towards societal challenges
- ◆ Enabling them to find & actualize their mission
- ◆ Cultivating and sustaining a large group of such youth



Newsletter

simillanghan.blogspot.in



Website

www.nirman.mkcl.org

Highlights from year 2015-16 :

Nirman 6 Batch camps

Camps for medical and non medical batch were conducted. Also a special camp was conducted for selected 45 participants who are working or willing to work full time to facilitate their entry into social sector.



Krutee Nirman

It includes the Action Learning Modules to bring young people face to face with social reality and engage them in acts of social contribution. **Around 80 youngsters** across Maharashtra participated in **drought related work** in Salaiban (Buldhana) and in Nashik district.

October Workshop

Every year in the month of October a special workshop is organized for Nirman alumina who are currently working full time in social sector. This year 48 Niranmanis from all previous batches participated in the workshop.

Nirman- IITB

NIRMAN and IIT Bombay collaborated to expose students in IIT Bombay to social issues and nurture problem solving skills and spirit among them. **5 days training workshop** was organized for **30 students** from various departments of IITB.

Other Activities

National workshop on the best practices in tribal health care :

Organized by the Ministry of Health and Family Welfare, Government of India and hosted by SEARCH, Gadchiroli between 11th – 13th October 2016 with the aim to bring together the best practices which offer the potential for scaling up or the learnings for the tribal health care policy in India. The workshop saw participation of 53 health care experts from all over India with a purpose to share, examine and find potential solutions which could be delivered on large scale



Inauguration of Shirish Building :

Shirish, was inaugurated on 17th September, 2015, by Drs. Rani and Abhay Bang. Six offices were moved to it, namely Tribal Health, Home-based Newborn Care, NIRMAL, Alcohol and Tobacco control (*Vyasanmukti*), Non-Communicable Diseases, and Jeevan Shikshan and Tarunyabhan .

The construction started in December 2013 and completed in September 2015. The building was constructed by Mr. Manish Samarth, designed by Mr. Parag Pandhripande and supervised by Mr. Tushar Khorgade.

The construction was supported by the MacArthur Foundationn.



Shaping **Policy**

SEARCH directors, Dr. Rani and Dr. Abhay Bang have been contributing to the development of health policies in India by serving on several national and state level committees and commissions.

Dr. Abhay Bang

At the national level, these include:

- ◆ Member, Central Health Council, Government of India,
The highest policy making body of the Health Ministry
- ◆ Chairman, Expert Group on Tribal Health, Ministry of Health and Family Welfare, Government of India, 2013 (cont..)
- ◆ National ASHA mentoring group, 2009 onwards (<http://nrhm.gov.in/communitisation/asha/minutes-of-asha-mentoring-group.html>).



At the state (Maharashtra) level-

- ◆ Advisor, the task force on alcohol and tobacco control. Government of Maharashtra
- ◆ Member, The Chief Secretary Committee on Malnutrition and Child Deaths in Tribal Areas

Dr. Rani Bang

- ◆ Member, Pre Conception and Prenatal Diagnostics Techniques (Prohibition of Sex Selection) Committee
- ◆ Member, Violence against Women committee



Award list 2015 - 2016

- ♦ Public Health Champion Award for outstanding contribution to public health in the country from WHO India (2016)



- ♦ 'Doctorate Honoris Causa' from Sanjay Gandhi Postgraduate Institute of Medical Sciences (SGPIMS), Lucknow (2015)
- ♦ 'Social Award of Krantisingh Nana Patil' from Krantisingh Nana Patil Lokvidyapeeth, Vita Dist : Sangali (2015)
- ♦ The 'D.Litt.' from Tilak Maharashtra Vidyapeeth, Pune (2015).
- ♦ 'Vidarbha Ratna Award' from Ramkrushna Paikujji Samarth Smarak Samiti, Nagpur (2015).
- ♦ Dr. Wankar Lifetime Achievement Award from IMA, Nagpur by Chief Minister, Mr. Devendra Phadanvis.(2015)
- ♦ Vidarbha Bhushan Award from Vidarbha Samaj Sangh, Mumbai (2016)
- ♦ Dr. Gujar Award of the Maharashtra Aarogya Mandal, Hadapsar, Pune (2016)
- ♦ IMC Juran Quality Medal 2015 from IMC Ramkrishna Bajaj National Quality Award Trust, Mumbai (2016)
- ♦ 'Civil Liberties Award' from Nani A Palkhiwala Memorial Trust, Mumbai (2016)
- ♦ Johns Hopkins Distinguish Alumni Award (2016)

Program **Partners**

Our Programme Partners (alphabetical order)

- ♦ American India Foundation, USA
- ♦ Dist. Administration, Gadchiroli, India
- ♦ Government Dental College, Nagpur, India
- ♦ Gondwana University, Gadchiroli, India
- ♦ Integrated Tribal Development Programme, India
- ♦ Mahila Arthik Vikas Mahamandal, India
- ♦ Maharashtra Knowledge Corporation Limited, India
- ♦ Ministry of Health and Family Welfare, Government of India
- ♦ National Health Systems Resource Centre, New Delhi
- ♦ National Rural Health Mission (NRHM), India
- ♦ Nagpur University, India
- ♦ Navajbai Ratan Tata Trust (NRTT), India
- ♦ Sangath, Goa, India
- ♦ Tata Steel Rural Development Society (TSRDS), India

Our Trustees

Shri. Chandrashekhhar Dharmadhikari

Dr. Prakash Amte

Dr. Upendra Vedpathak

Dr. Sudha Joshi

Dr. Rani Bang

Dr. Abhay Bang

SEARCH Team

1. Full Time Workers – 102
2. Part time Female Community Health Workers – 102
3. Part time Male Community Health Workers – 87

Executive Committe

Dr. Rani Bang

Dr. Abhay Bang

Shri. Hiranman Warkhade

Shri. Tushar Khorgade

Funding Support

Our Funding Support (alphabetical order)

- ◆ Cognizant Foundation, India
- ◆ Dalal Foundation, India
- ◆ GV Labs, Pune
- ◆ Heal For India
- ◆ Indians for Collective Action, USA
- ◆ Indira Foundation, USA
- ◆ Infosys Foundation, Bangalore
- ◆ MacArthur Foundation, USA
- ◆ Maharashtra Knowledge Corporation Limited, India
- ◆ Mahila Arthik Vikas Mahamandal, Gadchiroli
- ◆ National Rural Health Mission, Government of Maharashtra
- ◆ Navajbai Ratan Tata Trust, India
- ◆ Spine Foundation, Mumbai
- ◆ Tribal Development Department, Government of Maharashtra
- ◆ The Wellcome Trust / DBT India Alliance
- ◆ Wipro Cares, India

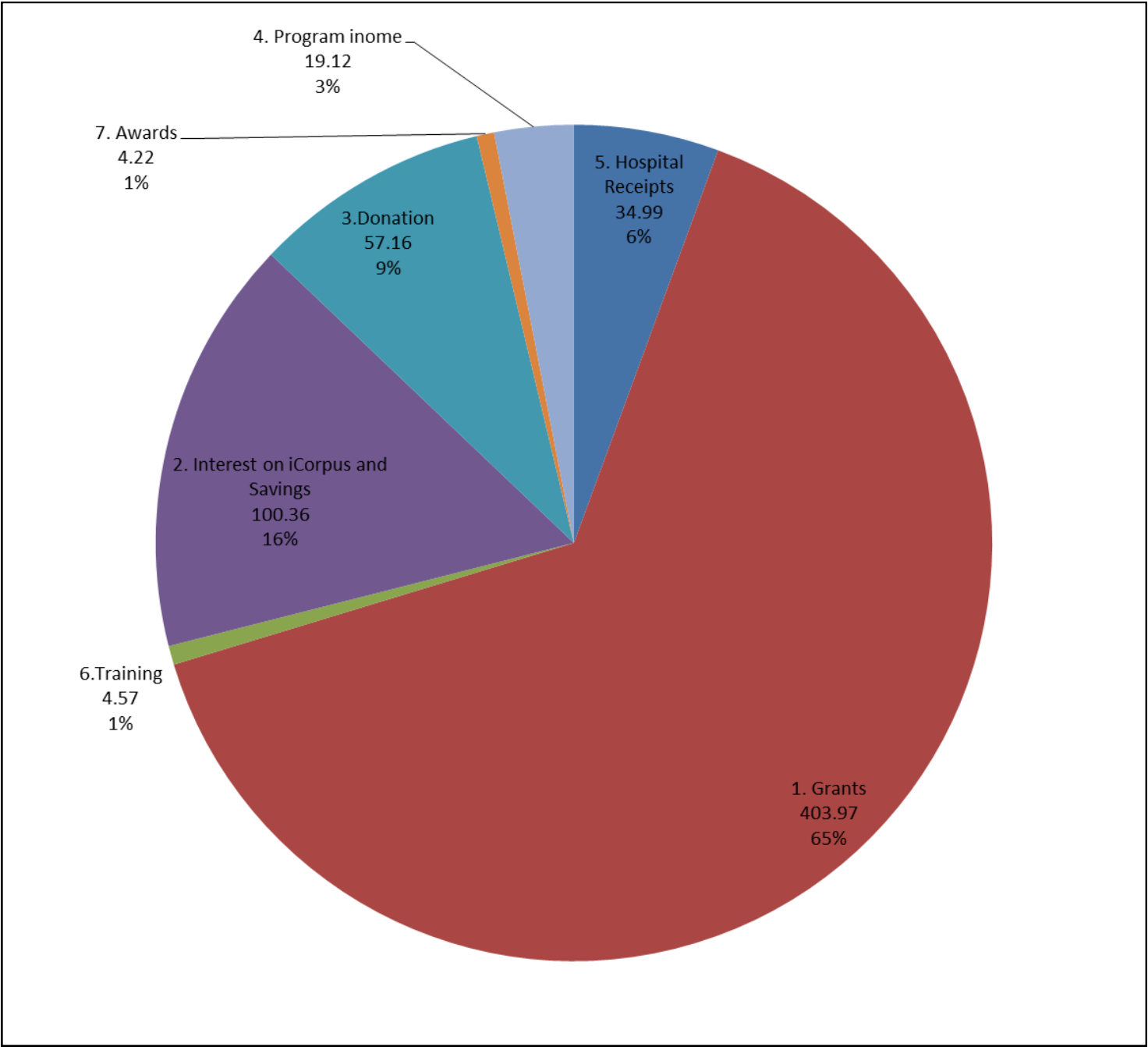
Our Esteemed Donors (alphabetical order)

- | | |
|--|--|
| ◆ ADAM Fabriwerk PVT Ltd, Kandivali | ◆ Suhasini Desai, Karwar |
| ◆ Anjali Yawalkar, Mumbai | ◆ Sumita Walke, Nasik |
| ◆ Chhaya Prakash Shah, Mumbai | ◆ Upendra Somani, Naupada, Thane |
| ◆ Indian Medical Association, Jaysingpur | ◆ Vijya Bhagwat, Talegaon Dabhade |
| ◆ Janta Sah.Bank(Late.P D Bhagvat-Will Letter) | ◆ Yeshwant Adhye Pvt Benefit Trust, Pune |
| ◆ K D Shardul, Aurangabad | ◆ Ulhas P paymaster, Mumbai |
| ◆ Madhukar Bholanath Pathare, Mumbai | ◆ Medha Arun Shete, Mumbai |
| ◆ MSS India Pvt Ltd, Nasik | ◆ Chandrasekhar D Seth, Pune |
| ◆ R B Bhawe, Pune | ◆ Manda S Punalekar, Borivali |

Income and **Expenditure Sheet**

Income (2015-16)

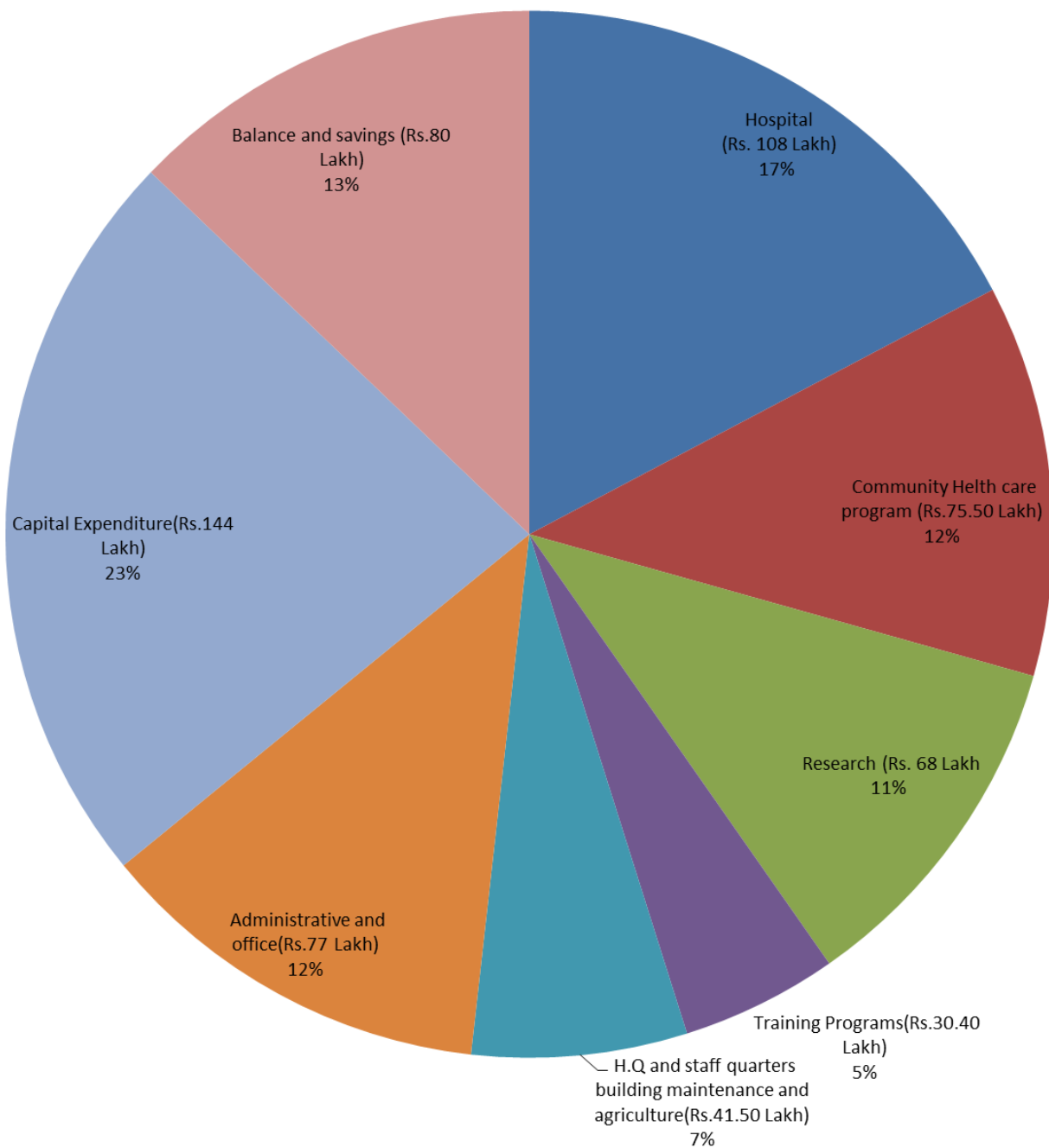
Total Rs. 624.40 Lakh(62.44 Million)



Income and **Expenditure Sheet**

Expenditure (2015-16)

Rs.624.40 Lakh(62.44 Million)



Join **Us**



Visit SEARCH



Partnership with SEARCH



Invite Tarunyabhan Team



Training Programs



Offer your expertise



Plan Study Tour



Obtain Publications



Donations



Participate in Dissemination

Bank Details :

Account title - SEARCH Central A/c

Bank Name - Bank of Maharashtra

Branch - Gadchiroli

Account No. - 20132954389

IFS code - MAHB0000940



सर्च | SEARCH

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