

In Pakistan Where nearly

half of the population

lacks access to primary healthcare services and health insurance, SINA emerges as a beacon of hope, transforming the landscape of healthcare.

accessibility & affordability



Every Life, Every Moment, Every Impact SINA Cares

We at SINA, the Social Innovation in Healthcare Alliance, aren't just another healthcare provider. We're a family dedicated to making sure everyone gets the care they need, when they need it. With 40 clinics spread across Pakistan, we're reaching out to over 1.5 million people every year, ensuring they have access to quality healthcare right in their neighborhoods.

It's our commitment to making every penny count. We've set a goal of providing top-notch care for just \$3.5 per patient, and we're sticking to it.

Even in the face of tough challenges, we've managed to lower costs to just PKR 650, that's around USD 2.50. That includes everything from check-ups to lab tests and medicines.

But we don't stop at the basics. We're tackling big issues like diabetes, hypertension mental health, and infectious diseases head-on. From making sure every child gets their vaccinations to screening for diseases like Hepatitis, we're doing everything we can to keep our communities healthy.

And it's not just about

treating illnesses

We're all about prevention too. Our ante-natal and post-natal care programs are saving lives before they're even in danger. We're also fighting malnutrition and providing support for chronic conditions, all at a price that families can afford.











At SINA

we believe in treating people with dignity. That's why we offer medicine baskets at a fixed price, so everyone can get the treatment they need without worrying about costs. It's about giving people the power to take control of their health and their lives.

So, as we keep pushing forward,

we're not just changing lives.

We're making a difference in every moment; in every community we touch.

Because at SINA

caring isn't just what we do it's who we are.

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Vision

The core vision of SINA is to establish an authentic, scalable, and replicable quality primary healthcare model that is affordable and accessible to underprivileged populations in urban slums, reducing the strain on tertiary public healthcare hospitals.













Mission

SINA's goal is to provide affordable, accessible, and high-quality primary healthcare to underprivileged communities living in the most impoverished areas to help them lead happier and healthier lives







Affordable Accessible

Quality Primary Healthcare

Clinic Road Map

With 40 clinic locations, including 3 mobile clinics, strategically dispersed across underprivileged areas of Karachi, we're providing quality healthcare to over 1.5 million people every year, ensuring they have access to essential medical services right in their neighborhoods



40 Clinic 03 Mobile Clinic

Our Milestones

A Journey of Growth and Compassion

2024 Strengthening Our Impact

SINA reaches 44 clinical sites. ISO certification for its diagnostic lab.

2023 Expanding Horizons

SINA grows to 39 locations and introduces mental health services at the community level, addressing an essential aspect of holistic health.

2020 Reaching New Heights

With 33 operational locations, including mobile clinics, SINA ensures that healthcare reaches even more people.

2018 Touching More Lives

630,000 patients treated in 2017 and 850,000 in 2018.

2016 Doubling Our Efforts

In an impressive two-year period, SINA doubles its reach by launching 10 new clinics.

2014 Accelerated Growth

In just four years, SINA opens five new clinics, underscoring our rapid expansion and growing capacity to serve more patients.

2010 Continuing the Journey

Opening of the Ittehad Colony clinic, further expanding our footprint.

2007 Official Recognition

SINA becomes officially registered with the Sindh Healthcare Commission, solidifying our commitment to healthcare excellence.

2003 Expanding Our Reach

The Machar Colony Clinic opens, extending our services to more underserved communities.

1998 The Beginning

Inauguration of the first clinic in Baldia, marking the start of our mission to provide accessible, high-quality healthcare.

Message From the Co-Founder



Dr. Asif Imam

Co Founder - SINA Health Education & Welfare Trust

As we mark 25 years of the SINA Clinics network, it's a time for both celebration and reflection. Our journey began in 1998 with a vision to revolutionize primary healthcare in Pakistan. We aimed to create a model that could make a real difference, not just for a few, but for many across the nation.

Back then, we identified three major challenges in the primary healthcare system: the absence of standardized procedures, a shortage of properly trained healthcare workers, and a lack of effective governance and data analytics. We knew that addressing these issues would require a long-term, houghtful plan and a lot of hard work

So, how have we done over these 25 years? Here are some of our key achievements:

- We have established a network of 40 high-quality primary healthcare clinics in Karachi's urban slums
- Our SINA PHC model has earned recognition from international organizations like Medicines Sans
 Frontiers and the Bill and Melinda Gates Foundation
- The WHO has chosen SINA as a model for primary healthcare systems in the Eastern Mediterranean region.
- We are providing high-quality primary healthcare to up to 1.5 million patients every year.



Patients every year

Network of high-quality primary Healthcare

40 CLINICS



While these accomplishments are significant, they only begin to address the vast challenge of achieving Universal Health Coverage (UHC) by 2030

Looking ahead, here's what we need to do to reach our goal:

- * Standardize our operations, training, and quality monitoring using a user-friendly digital platform
- Develop a comprehensive training system focused on primary healthcare to meet the large-scale needs of UHC in Pakistan
- Advocate for policy changes at the government level to ensure proper recognition and funding for this
 crucial work.
- Expand outreach to more Communities & vulnerable people

This mission is not one we can achieve alone. It will require the collaboration of all organizations dedicated to improving primary healthcare in Pakistan.

As we celebrate this 25-year milestone, let's honor our achievements and renew our commitment to the path ahead. Together, we can continue to make a profound impact and move closer to our vision of universal healthcare coverage for all.



Impact & Growth



Lives Protected

Lives Protected

Lives Protected

Lives Protected

Lives Protected

Lives Protected



CEO's Message



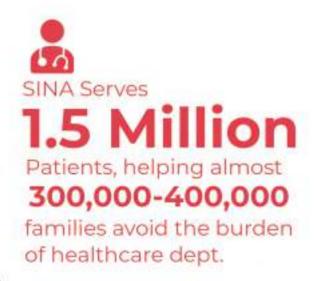
Ambareen Kazim Thompson

CEO - SINA Health Education & Welfare Trust

The right to equitable healthcare is enshrined as a basic right of every citizen of Pakistan. The SDG 2030, adopted universally, lists health and well-being, gender equality, and reduced inequality for all. These goals are achieved when primary healthcare needs are accessible, affordable, and available to all citizens

In Pakistan, women have long been discriminated against and remain unequally represented in health and economic empowerment. Pakistan has not invested in women's health as it should, resulting in many women dying from pre- and post-partum complications, treatable cancers, infectious diseases, and non-communicable diseases. The health burden in Pakistan remains high due to chronic underspending in healthcare, with up to 40% of the population at risk of diabetes and hypertension.

In this challenging context, SINA not only provides affordable, accessible quality care but also fosters innovation, expands service offerings, and promotes physical and mental well-being. Serving 1.5 million patients, SINA helps 300,000-400,000 families avoid healthcare debt. It remains one of the lowest-cost providers with an advanced Electronic Medical Record (EMR) system ensuring data retention and algorithm-based protocols for consistent care quality. By the end of 2024, SINA aims to launch an even more advanced EMR system, developed over 25 years of experience, which promises to be a game-changer for both SINA and partner organizations.



SINA operates a state-of-the-art ISO 9000 certified laboratory capable of conducting 1 million tests annually. Through programs like the Expanded Program on Immunization (EPI), over 200,000 children have received essential vaccinations. Ten clinics offer mental health programs, malnutrition intervention, and Hepatitis screenings, alongside health camps and awareness initiatives.

1 Million
Lab Test per anum

200,000

Children vaccinated



SINA has grown significantly as a caregiver and an institution, leveraging years of data to study disease patterns, raise awareness, and inform policy. Its burgeoning research department has published several papers in PubMed-indexed journals and successfully completed its first international clinical trial.

Supported by visionary donors committed to a healthier Pakistan, SINA believes in transforming destinies by improving the health of vulnerable communities. The tireless SINA teams deliver compassionate healthcare, reflecting the organization's greatest strength.

With over 40 clinics and six mobile sites, SINA's growth is made possible by generous donors, dynamic partnerships, and its dedicated team 40 Clinics
03 mobile sites

Our Awards





PCP Certified Organization

SINA Health Education and Welfare Trust is proud of its certification by the Pakistan Center for Philanthropy (PCP). This certification validates our credibility and trustworthiness, reaffirming the excellence we consistently uphold in meeting all regulatory standards and requirements. Being part of the PCP network empowers us to strengthen nonprofits and foundations, fostering the development and enrichment of local communities, a cause we are deeply committed to supporting



ISO 9001 2015 Certified Organization



Our ISO 9001:2015 certification reaffirms SINA Diagnostics laboratory dedication to providing outstanding primary healthcare services. This accreditation showcases our consistent adherence to patient and regulatory standards, ensuring superior patient satisfaction. It underscores our commitment to continual system enhancement and improving the overall patient experience.

Healthcare Commission Certified Organization



SINA Diagnostics laboratory is honored to be certified by the Sindh Healthcare Commission. This certification is a reflection of our steadfast commitment to excellence in primary healthcare services. It validates our adherence to rigorous patient care standards and regulatory guidelines, ensuring the highest level of service. This achievement also underscores our ongoing efforts to innovate and enhance the quality of care we provide, consistently prioritizing patient well-being and satisfaction.

Public Healthcare (Primary) and Digital Accessibility & Financial Inclusion Awards by KE-Karachi Awards

SINA Health Education and Welfare Trust is honored to have received two prestigious awards for our significant contributions in Public Healthcare (Primary) and Digital Accessibility & Financial Inclusion at the KE-Karachi Awards. This accolade serves as a testament to our unwavering dedication to achieving excellence in healthcare and advaning accessibility and inclusion through innovative initiatives



Our Services





Antenatal &

Postnatel Care

From July 2023, SINA has provided antenatal and postnatal care (ANC/PNC) services to 26,888 women. These services are crucial for ensuring the health and well-being of both mothers and their babies during pregnancy and after childbirth. Our comprehensive ANC/PNC programs include regular check-ups, nutritional advice, and essential screenings to detect and address potential health issues early. By offering these vital services, SINA helps to reduce maternal and infant mortality rates, supporting mothers throughout their journey to motherhood with compassion and expertise.





Malnutrition

In addressing the pressing issue of malnutrition, SINA has assisted thousands of children since July 2023. Malnutrition severely impacts the physical and cognitive development of children, and addressing it is critical for their growth and future potential. Our malnutrition program includes comprehensive assessments, nutritional supplementation, and education for families on proper dietary practices. By tackling malnutrition head-on, SINA ensures that children receive the necessary nutrients for healthy development, helping to build a healthier future for our communities.



The Health Foundation

Hepatitis Screening Program_



Since 2022, SINA has partnered with The Health Foundation to implement a comprehensive hepatitis screening program in Pakistan. This initiative is pivotal in detecting and preventing Hepatitis-C early, addressing a critical public health concern.

As of July 2023, SINA has conducted thousands of hepatitis screenings, significantly contributing to public health efforts. Hepatitis, particularly types B and C, remains a formidable challenge in our region. Through these screenings, SINA facilitates early diagnosis and timely intervention, essential for effective treatment and reducing transmission rates

Upon a positive diagnosis, SINA provides crucial support to patients with Hepatitis-C, ensuring they receive essential medication and care. This holistic approach not only improves individual health outcomes but also plays a vital role in reducing community transmission.

SINA and The Health Foundation remain steadfast in their commitment to enhancing access to healthcare and promoting public health through proactive initiatives like the hepatitis screening program. Together, they aim to create a healthier future for all individuals across communities served by SINA.



Vital Pakistan Trust

-Immunization

Vital Pakistan Trust (VPT) has been an invaluable ally in our immunization initiative, making a profound impact on our mission to shield communities from preventable diseases. Since July 2023, SINA has achieved a remarkable milestone by administering vaccinations to 32,432 households. This impressive accomplishment highlights our steadfast commitment to advancing public health and signifies the success of our collaborative endeavors.



Immunization is a cornerstone of our healthcare services, essential for safeguarding the health of children and adults alike. Through our network of clinics, we offer a wide range of vaccines, ensuring protection against illnesses such as measles, polio, and hepatitis. By providing these essential services, we aim to prevent outbreaks and foster herd immunity, thereby enhancing the overall well-being of the community.



Our dedication to immunization goes beyond individual health improvements; it is a crucial component of our strategy to maintain public health and safety. The significant number of vaccinations administered underscores our commitment to this cause and highlights the impact of our collaborative efforts with Vital Pakistan. Together, we are working towards a healthier future, one vaccine at a time.

Diagnostics

SINA's mission is to delivering essential healthcare services to underprivileged communities through our advanced laboratory facilities. Since July 2023, our labs have conducted 190,180 diagnostic tests, including important ultrasounds and blood tests.



These diagnostics are integral to the early detection and management of health issues, ensuring patients recieve timely and precise care. Our laboratory, equiped with cutting-edge technology and staffed by professionals, maintain top standards of accuracy and efficiency in every test conducted



Pharmacy



At SINA Clinic's pharmacy, patient safety and optimal care are our top priorities. As a crucial component of our service, the pharmacy ensures that the right medicines are provided with the correct dosage, playing a vital role in saving patients' lives

To maintain the quality and sterility of medicines, they are stored at prescribed temperatures to ensure their efficacy.

Our pharmacists regularly check the expiry dates of the stock and keep them organized to ensure that medicines are used in the right manner and at the right time. They Explain dosage & time to patients carefully

In addition to dispensing medications, our pharmacists play a critical role in ensuring quality health care. They actively investigate adverse drug reactions, proactively identify and mitigate potential risks, and ensure that up to 45 days' stock is maintained



Mental Health

Support

Recognizing the importance of mental health, SINA has provided 12,853 mental health consultations from July 2023 to now. Mental health is integral to overall well-being, and our services include counseling, therapy, and support for individuals dealing with various mental health challenges. Our trained mental health professionals work diligently to create a supportive environment where patients can openly discuss their concerns and receive the help they need. SINA's mental health program aims to reduce stigma and ensure that mental health care is accessible and effective for all.



These communities are the most vulnerable given the social economic pressures, lonliness, physical and mental abuse, lack of opportunities that they encounter on a daily basis.

Spirit D Mental Health

Program for Sina Clinics

Center for Impact and the University of York



SINA Health, Education and Welfare Trust, in collaboration with the Center for Impact and the University of York, is leading a transformative mental health program under the SPIRIT-D initiative. Our project, "Strengthening Primary Care for Recognizing and Treating Depression," is dedicated to directly addressing mental health challenges. By integrating the University of York's extended mental health program, SPIRIT-D, into Sina Clinics, we have significantly enhanced our ability to provide comprehensive support, including both counseling and medication, to our mental health patients. Together, we are working towards a stronger and healthier future for all.

Community Advisory Panel (CAP) Meeting

On January 10th, we convened the first Community Advisory Panel (CAP) meeting of the SPIRIT-D project. This event brought together community members, patients, and health professionals to share insights and discuss initiatives



It marked a significant step forward in our mission to advocate for positive change in mental health care.

Highlights from Our Clinical Team Session

Our recent stakeholder meeting with clinical staff was a pivotal moment in our ongoing mental health program. Key themes discussed included interdisciplinary collaboration, continuous staff training, and evidence-based interventions to enhance patient care, Further updates on our progress and future initiatives aimed at strengthening clinical practices and support systems will follow.



Insights from Our Second Stakeholder Meeting



Departmental heads and key decision-makers convened for a significant meeting, engaging in discussions that shaped policies and strategies to address mental health challenges. The collaborative spirit and commitment to transformative change in mental health care were evident throughout the exchanges.

Success of the First Co-design Workshop



In collaboration with the Center for Impact, we hosted the first Co-design Workshop under the SPIRIT-D Project. This initiative aims to strengthen primary care for recognizing and treating depression. Our management team provided valuable insights that are enhancing our mental health programs across Pakistan. SINA Health is committed to ensuring accessible and quality care for all.

Second Co-design Workshop Session



The second and final session of the Co-design Workshop brought together patients, caregivers, and community members. Their valuable contributions are helping us enhance primary care for recognizing and treating depression nationwide. We are one step closer to achieving our goal of comprehensive mental health care.

Behavior Activation Training for Mental Health Counselors

organized a comprehensive 3-day Behavior Activation Training for mental health counselors and our medical and clinical staff. Facilitated by experts from the Center for Impact and the University of York, this training focused on equipping our team with evidence-based strategies to address withdrawal from everyday activities in depression



We were honored to have Dr. Asad Tamizuddin Nizami, HOD Institute of Psychiatry-Rawalpindi Medical University, Ms. Ambareen Thompson, CEO of SINA Health, and Muhammad Furqan, Head of Programs, present at the event. They distributed certificates to the successful participants, marking the conclusion of this valuable training experience.



Patient Flow in Clinic



Referral System at SINA

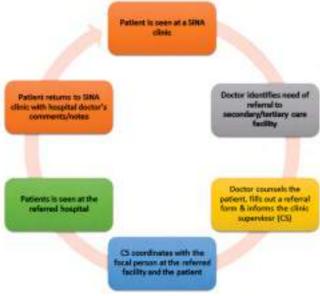
Streamlined Referrals Process

SINA has implemented an efficient referrals system that seamlessly connects primary care patients to a network of specialized healthcare providers. This streamlined process ensures that patients experience smooth transitions between different levels of care, receiving timely and personalized treatment plans tailored to their specific health needs.



Comprehensive Circle of Care

SINA's approach to patient care is holistic, integrating primary, secondary, and tertiary services to create a comprehensive circle of care. From the initial diagnosis at primary health centers, patients are guided through each stage of their treatment journey. This includes access to specialized care and essential follow-up services at SINA clinics, ensuring continuity of care and optimal health outcomes for every patient.



State-of-the-Art EMR System ____

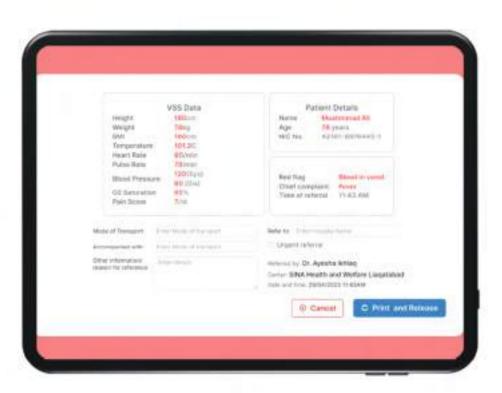
Enhanced Patient Care Management



The EMR system enables a robust Review, Referral, and Return Mechanism that ensures seamless patient care. This mechanism enhances the overall patient experience and satisfaction by guaranteeing continuity of care throughout their treatment journey.

Seamless Transition to Paperless Records

By implementing our state-of-the-art Electronic Medical Records (EMR) system across 38 clinics, SINA has successfully transitioned to a paperless record-keeping system. This shift enhances transparency in patient care and data analysis, significantly improving our care management capabilities while ensuring zero loss of patient records



Standardized Treatment Protocols

Our Algorithm-Based Treatment Protocol System ensures that patients receive consistent, high-quality care. This system standardizes treatment protocols across all clinics and healthcare providers, ensuring uniformity and reliability in patient care



How It Works:

· Paperless Transition:

All patient records are digitized and securely stored in the EMR system, eliminating the risk of record loss and enhancing data accessibility.

- Review Mechanism: Patient records are continuously reviewed for accuracy and completeness, ensuring up-to-date information is always available.
- Referral Process: Patients are seamlessly referred to specialized care providers within our network, facilitated by real-time access to their medical records.
- Return Mechanism: After specialized treatment, patients are efficiently transitioned back to their primary care providers, maintaining continuity of care.
- Algorithm-Based Protocols: Treatment protocols are algorithm-driven, ensuring every patient receives evidence-based, standardized care across all clinics and healthcare providers.

100% Solar Power Integration in Clinics

for Eco-Friendly Operations

Commitment to Sustainability

SINA is operated all its clinics on 100% solar power, reflecting our unwavering commitment to sustainability and eco-friendly practices. This initiative has significantly reduced our carbon footprint, contributing to a healthier environment.

Enhanced Operational Efficiency

The integration of solar power ensures a reliable and sustainable energy source, enhancing the operational efficiency of our clinics. This not only reduces our reliance on conventional energy sources but also results in substantial cost savings, allowing us to allocate more resources toward patient care

Environmental and Economic Benefits

By utilizing solar energy, we reduce greenhouse gas emissions and our overall environmental impact, promoting a greener future. Additionally, the shift to solar power leads to significant cost reductions in energy expenditures, enabling us to reinvest savings into improving healthcare services. Solar power provides a reliable and sustainable energy source, ensuring that our clinics can operate efficiently without disruptions.

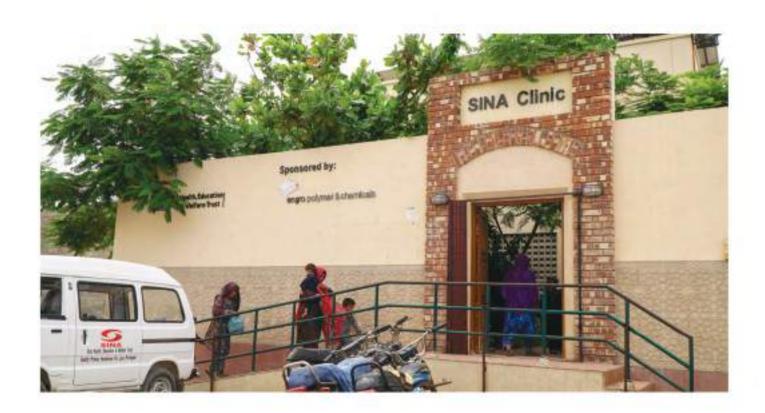


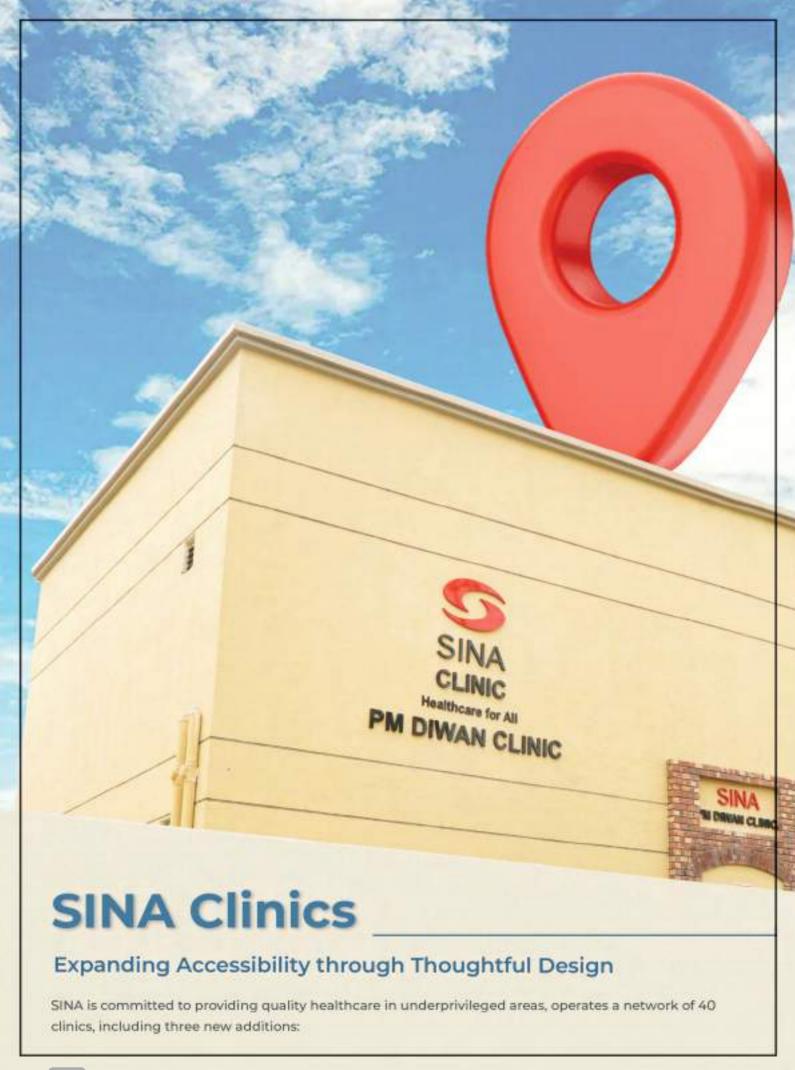
SINA's Green Initiatives

Driving Environmental Sustainability & Efficiency

At SINA, we take pride in our commitment to both exceptional healthcare and environmental stewardship. Our clinics, powered entirely by solar energy, reflect our deep dedication to sustainability and reducing our carbon footprint. This green initiative not only minimizes greenhouse gas emissions but also brings about significant cost savings, allowing us to channel more resources into improving patient care.

Equally important is our shift to a paperless system through the state-of-the-art Electronic Medical Records (EMR) system. By digitizing records across 38 clinics, we save approximately 10 million sheets of paper each year. This move not only enhances the efficiency and reliability of our patient care but also ensures that no records are ever lost. Our efforts in both solar energy integration and digital transformation underscore our commitment to a greener future and superior healthcare





PM Diwan Clinic - Saeedabad



Opened on 8th July 2024, PM Diwan Clinic Saeedabad serves a population of 30,000. This clinic caters to the healthcare needs of residents in Ghulshan e Ghazi, Saeedabad 12 No, Nawab Colony, and Qiam Khani Colony. This addition to SINA's network u nderscores our commitment to providing accessible healthcare to underprivileged communities.



Behbud SINA Clinic - Mehmoodabad



Opened on 3rd June 2024, Behbud SINA Clinic Mehmoodabad provides healthcare services to 45,000 people. Located in Azam Basti, Mehmoodabad, Kala Pul, Umar Farooq Colony, Parsi Gate Colony, and Chanesar Goth, this clinic reflects SINA's mission to expand our reach and deliver quality healthcare to more residents in need.

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Machar Clinic Extension

The Machar Clinic Extension enhances healthcare accessibility for 35,000 residents in Azad Mohalla, Meharban Chowk, Maree Chowk, Mandara Chowk, and Khush Hall. This expansion is a testament to SINA's dedication to improving healthcare outcomes in marginalized areas through thoughtful planning and community integration





Our clinics exemplify SINA's commitment to excellence in healthcare delivery through meticulous planning and design. Each clinic is meticulously crafted to prioritize patient comfort and convenience, reflecting SINA's dedication to providing a welcoming and supportive environment for all visitors.



The architecture of SINA clinics blends functionality with aesthetics, featuring spacious interiors that maximize natural light and ventilation. Modern furnishings and calming color palettes create a soothing ambiance, fostering a sense of tranquility essential for patient well-being



Beyond aesthetics, SINA clinics are strategically situated within community hubs, ensuring easy accessibility for residents. This thoughtful placement not only enhances healthcare access but also promotes community integration and support



The expansion of SINA's clinic network underscores its ongoing mission to improve healthcare outcomes in marginalized areas. This achievement would not have been possible without the generous support of our donors and partners who believe in our vision of accessible healthcare for all. We extend our heartfelt thanks to all donors for their invaluable contributions that have enabled us to expand our reach and impact

Capacity Building in Medical Education





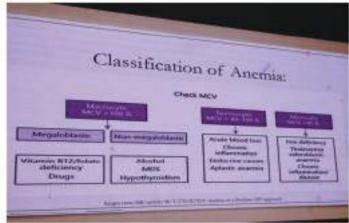
At SINA Health Education & Welfare Trust, we are committed to enhancing medical education through a robust framework of assessments and continuous professional development. Our initiatives are designed to support healthcare professionals in their journey towards excellence, ensuring they are well-prepared to meet the demands of modern medicine.

CME (Continuing Medical Education)

Our Continuing Medical Education (CME) programs at SINA Health Education & Welfare Trust offer healthcare professionals opportunities to stay current with medical advancements and best practices. Through a variety of courses and workshops, we ensure that professionals have access to the latest knowledge and skills, fostering ongoing learning and expertise







TOACS (CPSP MCPS Exam)

The TOACS (CPSP MCPS Exam) is conducted twice a year to assess candidates' theoretical and practical knowledge. To aid candidates in their preparation, SINA Health Education & Welfare Trust provides mock exams that closely mirror the conditions and content of the actual tests. These preparatory exams are crucial for helping candidates gauge their readiness and identify areas for improvement. Achieving a pass rate of 90 to 95%, our mock exams are a vital tool for candidates striving to excel in the official CPSP MCPS exams



OSCE (MRCGP Int Exams)

The Objective Structured Clinical Examination (OSCE) for MRCGP International Exams is a key annual assessment held to evaluate clinical skills through simulated scenarios. To better prepare candidates for the official OSCE, we offer comprehensive mock exams that replicate the format and rigor of the actual test. These mock exams provide invaluable practice opportunities, helping candidates to familiarize themselves with the exam structure and refine their clinical competencies. With a high pass rate of 90 to 95%, our program is instrumental in ensuring candidates are thoroughly prepared for the real examination.



CT (Clinical Trainings)

SINA Health Education & Welfare Trust's Clinical Trainings (CT) for paramedical staff are designed to enhance practical skills and improve patient care. Our training sessions cover the latest medical techniques and protocols, providing paramedical staff with hands-on experience to better handle clinical situations and contribute effectively to healthcare teams.





CPD (Continuing Professional Development)

Our Continuing Professional Development (CPD) programs support the growth and career advancement of healthcare professionals. These initiatives are tailored to address specific learning needs and enhance professional capabilities, ensuring that our team remains skilled and adaptable in a constantly evolving healthcare landscape.





GP Upgrade Program Endorsed by MRCGP [INT] South Asia

SINA proudly presents the "GP Upgrade: A Family Medicine Training Program," accredited by the MRCGP [INT] South Asia Board (SAB). Developed in collaboration with Dr. Marie Andrades and the MQA team, this rigorous six-month program is designed to equip primary healthcare physicians with the skills and knowledge necessary to excel in the MRCGP [INT] exam. Taught by renowned Family Medicine consultants and specialists from various medical fields, the course provides a structured and comprehensive approach to medical training.



The MRCGP [INT] South Asia, established by leading family doctors and educators from Bangladesh, India, Pakistan, Sri Lanka, and Nepal, has been supported by the Royal College of General Practitioners (RCGP), UK, since 2003-2004. Their curriculum is crafted to enhance the quality of General Practitioners, ensuring they deliver cost-effective, efficient, and reliable patient care.

Our "GP Upgrade" program, endorsed by the MRCGP [INT] South Asia Board, is a recognized course that aligns with the highest standards of medical education, contributing significantly to the advancement of family medicine in the region.

Integrating Primary Health Care into Public Health

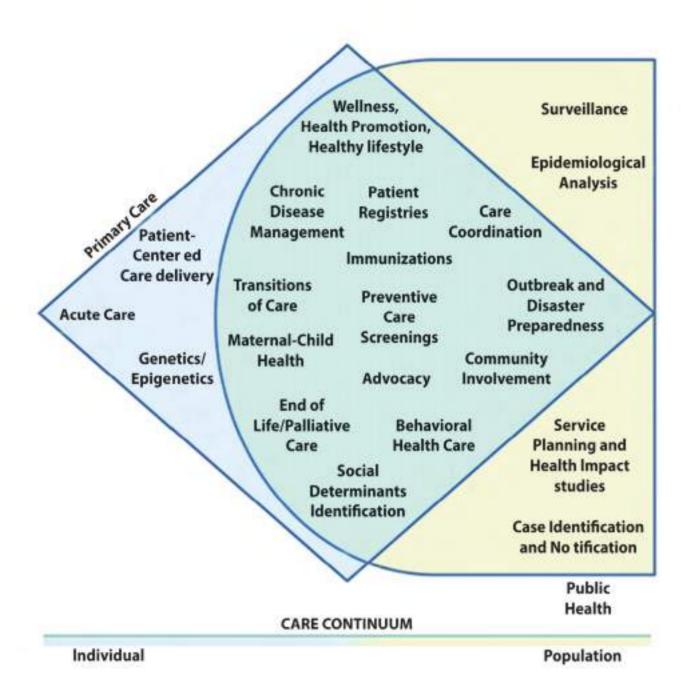
SINA has focused on building integrated, high-value healthcare systems that position the family physician as the frontline of primary healthcare (PHC). As the first point of contact for patients, family physicians play a crucial role in guiding individuals through the broader health system. This responsibility includes recognizing patients' individual risk factors and intervening with a holistic understanding of the social, environmental, and community determinants of health. Many developed countries are increasingly recognizing the need for integrating primary care within public health frameworks, and SINA is at the forefront of this approach.



SINA's doctors go beyond basic diagnostics. They understand the broader impact that physicians can have on the health of the communities they serve. By identifying critical social factors affecting patient health, they raise awareness through data collection and information-sharing. SINA doctors collaborate with public health officials to improve outcomes and actively educate patients and communities about the behaviors and social factors that influence health. They also practice advocacy to benefit community health, striving to reshape and improve the health landscape within the communities they serve.



With its protocol-based treatment systems, SINA integrates mental health services, immunizations, maternal and child care, malnutrition prevention, and chronic disease management. Additionally, SINA's robust track-and-trace program serves as a model for PHC integrated into public health. By leveraging technology and data analysis to inform decision-makers, SINA works to improve not only the health of individuals but also the well-being of the communities where it operates.



Events Highlights





Long Service Award

At SINA Health, Education, and Welfare Trust, we honor our dedicated long-serving employees with the Long Service Award. This recognition celebrates their years of commitment to our mission and their essential role in providing exceptional healthcare to our communities. Their unwavering dedication and hard work inspire us all to continue striving for excellence





Employee of the Month

Each month, we recognize one employee from the Head Office and one from the clinics who demonstrate exceptional performance and dedication. This award highlights individuals who go above and beyond, significantly contributing to our mission and enhancing our organization's overall success.













Birthday Celebrations

At SINA, we cherish each team member's birthday as a special occasion. Celebrating these milestones reflects our commitment to their happiness and well-being, reinforcing the sense of family and joy within our workplace









Eid Gala

SINA's post-Eid celebration was a day of joy, camaraderie, and friendly competition. Employees participated in exciting games and team-building activities, received well-deserved awards, and enjoyed a delightful lunch. The event showcased the unity and spirit that define SINA, emphasizing community and appreciation









Recruitment Drives

Our commitment to attracting top talent was evident through our active participation in career fairs at Iqra University, Karachi University, Sir Syed University, and Sindh Higher Education Commission. These drives allowed us to connect with aspiring professionals and showcase SINA's impactful work





Pakistan Independence Day

SINA organized a very special event to celebrate our country's Independence Day. All the employees came together as a unit to prepare for the occasion to make it a memorable event. The national anthem was sung by the entire team followed by patriotic songs and fun games that reflected the importance of freedom and unity





Robin Hood Army Food Donation Drive

SINA is grateful to Robin Hood Army for organizing a food drive in Moach Goth, a community where we have a primary healthcare clinic. We distributed rations to seventy-five deserving families, alleviating some of their burdens





Conflict Management Training

A conflict management training session, led by Dr. Abeer Salim Habib from Tabba Heart Institute, was conducted for head office and clinic staff. The interactive session focused on resolving workplace disagreements and addressing unique work challenges





Mental Health Training

In partnership with Kazim Trust, comprehensive mental health training was provided to prioritize employee well-being, fostering a supportive work environment and promoting empathy





Population Welfare Department Training (PWD)

SINA collaborated with the Population Welfare Department - Sindh to offer training on birth spacing at all clinics. Staff were trained to support patients in family planning and educate on the importance of adequate birth spacing for maternal and child health.





Yoga Class for Female Staff

A yoga class, led by certified restorative yoga practitioner Ms. Farhat, was arranged for female staff to support work-life balance and wellness.





Blood Donation Drive Indus Hospital

SINA recently held a blood donation drive at Indus Hospital to play its part in saving lives. The team whole heartedly participated in donating blood so the needy patients at Indus Hospital can benefit from their efforts. SINA greatly appreciates Indus team's protocol for thorough screening of blood donors to establish eligibility.





Pakistan Climate Conference

Our CEO, Ambareen Kazim Main Thompson, was a panellist at the 2nd Pakistan Climate Conference 2023, sharing invaluable insights on critical topics such as climate resilience and clean energy. Her participation drives our commitment to a sustainable future.





World Diabetes Day

On World Diabetes Day, SINA demonstrated its commitment to community health with awareness sessions, free tests, medication distribution, and consultations, aiming to educate and prevent diabetes





Health Screening of Summit Bank Employees

On October 4, 2023, SINA Diagnostic Laboratory conducted the annual health screening of Summit Bank employees in collaboration with Salaam Takaful. This initiative underscores our commitment to promoting employee health through proactive healthcare measures.





Health Screening Camp at Fisheries

On March 5, 2024, we held a health screening camp at fisheries in collaboration with Dr. Rahim Uddin. This initiative focused on providing comprehensive health screenings to local residents, promoting early detection and proactive healthcare





Health Screening of Bombay Sweets & Bakers Staff

On May 4, 2024, SINA Diagnostic Laboratory conducted the annual health screening of Bombay Sweets & Bakers staff in collaboration with Dial for Medicine (DFM). This partnership highlights our ongoing efforts to promote employee health through comprehensive healthcare services.





Free Medical Assistance Camp at Aurat March - Freere Hall

On March 8, 2024, SINA Diagnostic Laboratory organized a free medical assistance camp at Aurat March - Freere Hall. This event demonstrated our commitment to supporting community health initiatives and providing accessible healthcare services





Free Medical Assistance Camp at Soul Fest

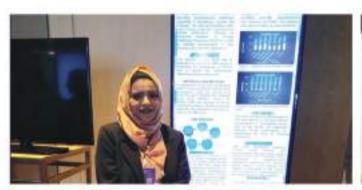
From February 16 to 18, 2024, SINA Diagnostic Laboratory organized a free medical assistance camp at Soul Fest Festival, Beach View Park, Clifton. This initiative provided essential healthcare services to festival attendees, ensuring accessibility and promoting community health.





WONCA International Conference

Dr. Wajiha Omair represented SINA at the WONCA International Conference in Sri Lanka, where she presented a paper on the clinical audit cycles conducted by our medical team. This highlighted SINA's dedication to advancing medical practices and sharing knowledge on an international stage





MCPS Family Medicine Mock TOACS

On December 8, 2023, SINA held a mock exam for the Family Medicine MCPS TOACS (Task-Oriented Assessment of Clinical Skills). This mock exam, conducted by our MQA department, provided candidates with an invaluable opportunity to refine their clinical skills and problem-solving abilities. Dr. Wajiha Omair, a member of CPSP's Faculty of Examiners for Family Medicine, played a key role in this initiative. Out of nine candidates, eight successfully passed the final CPSP exam.









MRCGP [INT] Mock OSCE

Our MQA department facilitated a mock OSCE (Objective Structured Clinical Examination) for MRCGP [INT], offering candidates a platform to practice and prepare for their assessments, ensuring readiness and competence.





CME: The Hidden Pandemic

We organized a Continuing Medical Education (CME) session titled "The Hidden Pandemic," focusing on critical aspects of emerging health challenges and enhancing professional knowledge





Meeting with Deputy Commissioner West

Deputy Commissioner West, Mr. Ahmed Ali Siqqiqui, met with our team to discuss data mechanisms for the Expanded Program on Immunization (EPI) and Polio Eradication Initiative (PEI). He commended our efforts and pledged full support for our immunization activities.



Meeting with Chemonics International

Our CEO, Ms. Ambareen Kazim Thompson, and Head of Programs, Muhammad Furqan, met with Dr. Muhammad Tariq, Country Director of Chemonics International, to explore potential collaboration. We seek support from socially responsible organizations to help achieve our sustainable development Goals.



Visit from Dr. Zafar Mirza

We had the honor of hosting Dr. Zafar Mirza, former special assistant to the Prime Minister on health. Our CEO, Ms. Ambareen Kazim Thompson, provided an overview of SINA's healthcare model and our impact in Karachi and Balochistan, Dr. Zafar commended our efforts to make primary healthcare accessible and affordable for disadvantaged patients

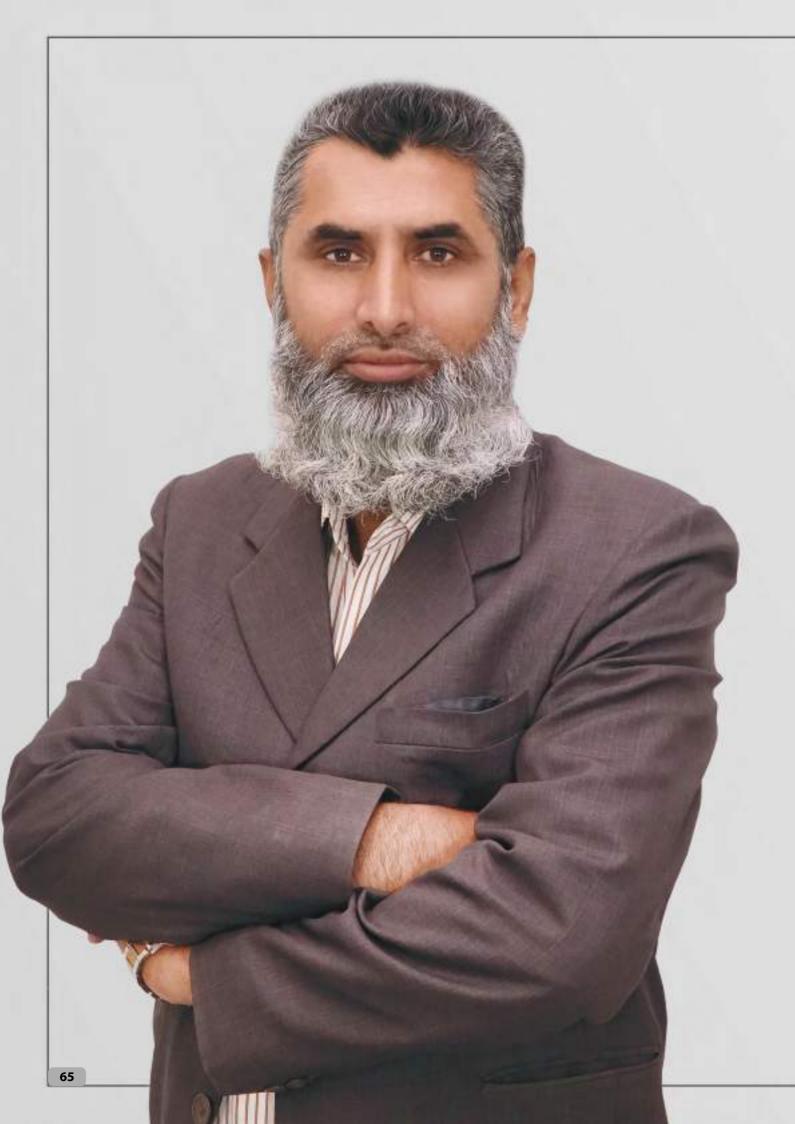




SINA Stars







Muhammad Asghar

A Journey of Dedication and Service _

My journey with SINA began in December 1999 when I joined as a Dispenser. From the very start, I had the privilege of working alongside our founder, Asif Imam, and witnessing the foundation of what would become a beacon of hope for so many.

In 2000, I was promoted to Clinic Supervisor, a role that allowed me to take on more responsibilities and grow with the organization. Further promotions in 2005 and 2006 reaffirmed my commitment and dedication to SINA's mission. One of the most challenging and rewarding experiences of my career came in the aftermath of the earthquake in Balakot and Muzaffarabad. As a Field Officer, I spent ten months on the ground, building 50 shelters for widows, managing a hospital, and operating a mobile unit to reach various locations. It was a time of immense hardship, but also incredible fulfillment, knowing we were making a real difference.

After our relief efforts, I was promoted to Field Officer, and in 2012, I transitioned to the HR department. This move allowed me to support and develop our growing team, using the experience and knowledge I had gained over the years. Today, I lead the Administration department, continuing to serve SINA with the same passion and dedication that I had when I first joined

Looking back, my journey with SINA has been filled with growth, challenges, and immense satisfaction. From my early days as a Dispenser to my current role, every step has been driven by a commitment to help those in need. I am proud to be part of an organization that makes a real difference and grateful for the opportunities and experiences that have shaped my career.



Ishtiaq Khan

A Legacy of Service

In February 1998, I took my first step into the SINA family as a Dispenser, full of hope and determination. My journey began with supervising startup clinics, where I eagerly contributed to their construction and opening. This early experience taught me the value of teamwork and perseverance

I wore many hats, handling administrative duties, data entry, and procurement tasks. These roles allowed me to understand the inner workings of SINA and build relationships with my colleagues. Each task, no matter how small, felt like a piece of a larger puzzle I was helping to complete

The earthquake of 2005 was a turning point. Amidst the devastation, I saw the power of community and the impact of our work. Collaborating with SINA's doctors in the relief program, I witnessed firsthand the difference we could make. Introducing the first portable X-Ray machine during this period was a proud moment, knowing it brought much-needed aid to those in need

As the years passed, my role evolved. Today, as the Senior Finance Officer, I handle insurance cases, manage cash flow, and oversee both zakat and non-zakat funds. Each responsibility comes with its own set of challenges, but also immense satisfaction. Managing SINA's fuel cards and overseeing payables requires a keen eye for detail, a skill I've honed over time



Salma Razik

A Source of Inspiration for Women

In 2001, eager to gain hands-on experience in the medical field, I started as an intern at SINA's Baldia Clinic, the only clinic at the time. I learned Clinical medical procedures such as taking vital signs, administering injections, and collecting samples, as well as acquiring knowledge about various medicines. During my one-year volunteer stint, I immersed myself in all aspects of clinical operations, from handling cash to honing administrative skills. This invaluable experience laid a strong foundation for my future in healthcare

In 2008, I was promoted to Clinic Supervisor at Baldia Clinic. I took on this role with dedication and commitment, serving until 2017. During this period, I started my married life and welcomed two children. SINA supported me throughout, providing a nurturing environment where I could balance my personal and professional responsibilities. I furthered my education by completing a four-month clinic technician course through SINA, a short course in English language through PACC, and various computer courses offered by private institutions.

My journey with SINA was one of continuous growth and learning. By 2017, after successfully serving as an auditor, manager, and supervisor at seven clinics, I was promoted to Assistant Manager of Clinic Operations. At that time, SINA had expanded to twenty-five clinics. During my tenure as Assistant Manager, SINA opened three more clinics. I also earned my HRM diploma, further enhancing my skills and knowledge.

In 2022, by the grace of Allah, I was promoted to Manager of Clinic Operations, a position I hold to this day. This role allows me to contribute significantly to SINA's mission of providing quality healthcare to underserved communities, managing 40 Clinical Sites.

SINA has been a remarkable source of knowledge and growth for me. The organization recognized my potential and provided me with opportunities to excel. The supportive environment at SINA, where everything is designed to encourage women, has been instrumental in my journey. I have always felt protected and valued, with management ensuring that I faced no obstacles in my professional development

Working at SINA has not only been about professional growth but also about resilience and dedication. As a woman, I took on the responsibilities often shouldered by men, striving to support my family and run my household effectively. Today, as I look back on my journey, I am filled with gratitude for the experiences and opportunities that SINA has given me. The wealth of information and support I received here have made me who I am today. SINA saw my potential, nurtured it, and helped me grow into a confident and capable leader. For that, I am forever thankful.



Aftab Trading Company

Pakistan Hosiery Manufacturers & Exporters Association

Providus Capital (Pvt.) Ltd.

Reliance Insurance Co.

Automobile Corporation of Pakistan (AUTOCOM)

Sherman Securities

Mianoor Engineering

Bharucha & Co.

Adamjee Enterprises

Arham Enterprises

Ashraf Ali Enterprises

Home Solutions

Dial Zero Pvt Ltd

Fav Plastico (Pvt) Ltd

Hamsons Industries

Sapphire Textile Mills Limited (SAPT)

Distribution Services

NFK Exports (Pvt) Ltd

PEXIMP Trading Company

Pharmevo Private Limited

Shujabad Agro Industries

Salaam Takaful Limited

Amna Industries

Digital Apparel (Pvt) Ltd

D. D. Shipbreakers

Pelican International Trade - Import

Midas Safety

Premium Textile

Shafi Apparels

Karachi Grains (Pvt) Ltd.

Pepsico

Spirit-D (The Center of IMPACT, UOY)

British Asian Trust - BAT

Foreign, Commonwealth and Development Office - FCDO

World Health Organization - WHO

Sehat Kahani

Pakistan Cables Limited

Population Services International (PSI)

Savera Enterprises

Synapse, Pakistan Neuroscience Institute

Pakistan Aluminium beverage

Liberty power tech

Anum Fabrics

M.S Reliance Insurance

Shujabad Agro Industries

DD shipbreakers

Helix pharma pvt Ltd

Sapphire group

K-Electric

AGP Limited

Barrett Hodgson Pakistan (Private) Ltd

Getz Pharma (Private) Limited

Efroze Chemicals Industries Pvt Ltd

Macter International Pvt Ltd

Multi Traders (Distributor)

Nabi Qasim Industries Pvt Ltd

Platinum Pharmaceutical Company

Zafa Pharmaceutical Company Ltd

ZR Impex (Distributor)

Bismillah International Traders

Nex Tek Health Care

Our Collaborations





Dial for Medicine (DFM)



The collaboration between SINA Diagnostic Laboratory and Dial for Medicine (DFM), initiated on September 5, 2023, ensures comprehensive employee health screening. This positive initiative benefits both organizations and their employees by enhancing access to quality diagnostic services.

Inspire Pakistan

SINA has formalized a Memorandum of Understanding (MOU) with Inspire Pakistan to facilitate the provision of quality healthcare services to both host and refugee communities at Machar Gujro Gadap. This collaboration is designed to foster harmony between the two groups and encourage them to utilize the SINA clinic within their vicinity, thereby promoting healthier individuals.



SINA extends its gratitude to Inspire Pakistan for donating essential medical equipment, which will support our ongoing healthcare efforts at Machar Gujro Gadap. We also appeal to other healthcare organizations to join us in transforming the healthcare landscape of vulnerable communities



Integrated Research Solutions Global - Private Limited

SINA has signed a Memorandum of Understanding (MOU) with Integrated Research Solutions Global - Private Limited to collaborate on research and publications. This partnership will enable both organizations to produce meaningful research in the healthcare field, quantifying critical medical issues and providing a roadmap for introducing relevant policies.



State Life Insurance Corporation of Pakistan

On August 17, 2023, SINA entered into a significant partnership with State Life Insurance Corporation of Pakistan aimed at delivering comprehensive employee health screening programs. This collaboration prioritizes the well-being of employees across various organizations, ensuring proactive healthcare measures.



Salaam Takaful Insurance

On August 22, 2023, SINA forged another impactful partnership with Salaam Takaful Insurance to revolutionize healthcare services. This collaboration focuses on delivering comprehensive employee health screening programs, emphasizing the holistic well-being of employees in diverse organizational settings





Corporate Health Services (CHS)

On February 23, 2024, SINA entered into an MOU with Corporate Health Services (CHS), a provider of health care services. This partnership is set to reshape the landscape of healthcare services in the region, enhancing access and affordability for community members.





Commander City M9 Motorway Highway

On March 1, 2024, SINA established a collection point at Sick Bay Hospital in collaboration with Commander City M9 Motorway Highway. This initiative aims to facilitate residents with affordable and quality healthcare services within their community



Sehat Kahani

On March 27, 2024, SINA Diagnostic Laboratory partnered with Sehat Kahani, a telemedicine services provider, to cut down the diagnostic costs for their patients. This collaboration aims to enhance access to affordable diagnostic services, ensuring quality healthcare delivery across the region



Santex Products (Pvt) Limited

We are proud to announce our partnership with Santex Products Karachi to enhance women's well-being in slums. The SANTEX Team provided free menstrual hygiene product samples and conducted awareness sessions at our clinics. This initiative aims to empower and uplift women on their health journeys, breaking barriers and fostering confidence in underserved communities.



Global Recognition & Collaboration





Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH

On November 16, 2023, SINA Health, Education, and Welfare Trust had the privilege of hosting a delegation from Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH at the New Machar Clinic UC-9. The delegation, including Mr. Jürgen Wintermeier (Consultant), Ms. Nora Valenzuela (Advisor), Mr. Hashim Khan (Senior Technical Advisor), and Ms. Sarah Ahmed (Advisor), expressed appreciation for SINA's commitment to primary healthcare. They conveyed interest in future collaborations to enhance healthcare services for vulnerable communities.



World Health Organization (WHO)

A crucial meeting took place with Dr. Palitha Mahipala, Head of Mission in Pakistan for the World Health Organization (WHO), in Islamabad. The discussion centered on potential partnerships aimed at advancing primary healthcare delivery to underserved populations, reinforcing the collaborative efforts to address regional healthcare challenges.



University of Manitoba and Bill & Melinda Gates Foundation

SINA was honored to host a distinguished delegation from the University of Manitoba and the Bill & Melinda Gates Foundation. The delegation included Dr. Faran Emmanuel (Professor and Director), James Blanchard (Associate Professor) from the University of Manitoba, Dr. Tahira Ezra Reza (Director, Centre for Global Public Health Pakistan), and Ms. Aisha Salman from the Bill & Melinda Gates Foundation Discovery Center. During their visit, discussions led by CEO Ms. Ambareen Thompson and Mr. Muhammad Furqan, Head of the Public Health Department, focused on enhancing primary and reproductive healthcare for marginalized communities, emphasizing shared goals and a collaborative approach to tackling healthcare challenges.







Our Donors

Soorty Foundation

Vital Pakistan Trust - VPT

ChildLife Foundation

Yaqin Steels Ltd.

Artistic Milliners

Engro Foundation

Liberty Mills Limited

Master Group

Mustaqim Dyeing & Printing Industries (Pvt.) Ltd

Lucky Textile Mills Ltd.

Gatron Foundation

Paragon Constructors

Sattar Electronics

IIL Centre Majeed colony

Idrees Steel Co.

Rakla Tyres Inc.

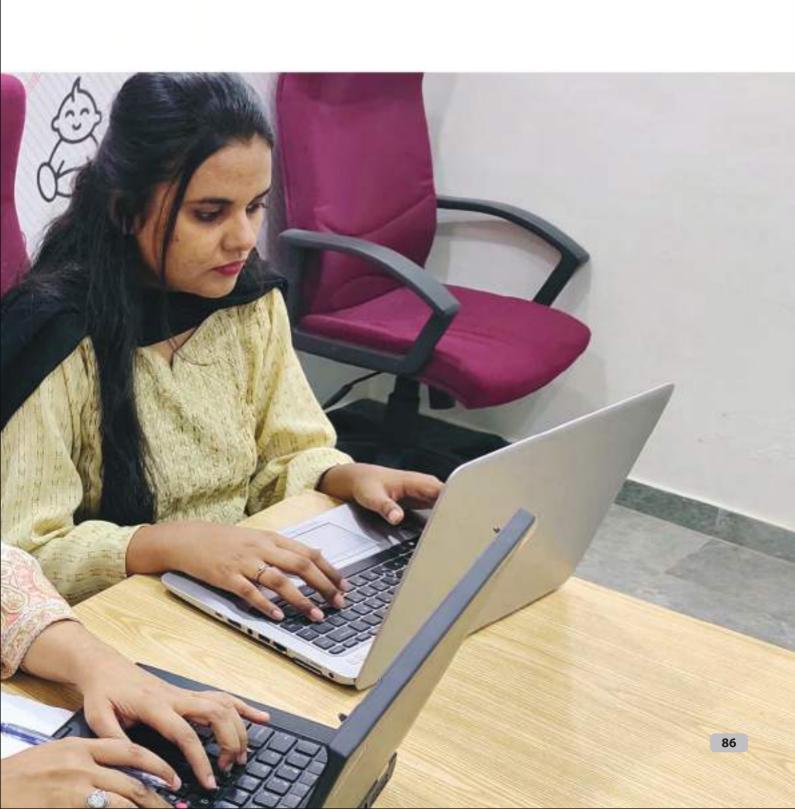
Behbud Association Karachi

Adamjee Enterprises

Old PALs Sindh Medical

Our Research & Publications





Health research is of paramount importance and plays a pivotal role in the improvement of existing health systems, framing evidence-based health care policy, and generating new initiatives and advancing knowledge about problems relating to public health and their solutions

- WHO 2012.

Research in healthcare is essential given the myriad problems the country faces, the most notable being inadequate spending in health care as a whole. Pakistan has faced economic crises for the last several decades and has not been able to tackle its population growth challenges effectively. On the other hand, it has a very young population which can be a huge asset only if it is healthy and economically productive. To this end, substantial investment in research is needed to improve existing systems and to design evidence-based policies so they are most effective given limited resources.

As a primary health care provider in urban slums, SINA has a state-of-the-art EMR which not only registers patients but provides a wealth of data showing demographics, disease trends, co-morbidity patterns, variances between ethnic groups, and much more. When I joined SINA in late 2021, I realized that almost a million patient records were at the risk of being lost as they were maintained in pre-EMR paper records which unfortunately were not stored in the best of conditions. The MIS team was tasked to not only induct the records into the system but to save as much data as possible.



A small team was created in-houseand was led enthusiastically by

Hina Sharif Pharm-D (Karachi University), MBA, MSPH (AKU)

under the guidance of our trustee and recipient of Tamgah E Imtiaz Dr. Nuzhat Farogui. Supported by the brilliant team at SIUT, 10 members of the SINA team

including Dr. Faruqui, the SINA team first attended a 3-day structured training at SIUT learning about ethics involved in research, forming ERB boards, challenges, and much more

SINA's ERB was formed in July

received international accreditation in U.S. Department of Health & Human Services (HHS) SINA's ERB board was formed in July 2022 and received international accreditation in U.S. Department of Health & Human Services (HHS) registration # IORG0011624. Over the course of the past 18 months, the research team went to work with a passion and has been published in PubMed indexed international journals. SINA also completed its first pharmacology trial of evaluating the efficacy and safety of empagliflozin in addition to insulin and oral antidiabetic medication (OAD) regimen in poorly controlled type 2 diabetes and obese patients.

This study was published in the Pakistan Journal of Pharmaceutical Sciences on February 1, 2024, with the ClinicalTrials.gov Identifier NCT06145360 and PMID: 38767103, and is available internationally. Another clinical trial is currently in the process of data collection under ClinicalTrials.gov Identifier NCT06140108.





Research On

Metabolic Parameters

Metabolic Syndrome and Obesity Among Marginalized School-Going Adolescents in Karachi, Pakistan: A Cross-Sectional Study

Published in

The Lancet Regional Health - Southeast Asia



Metabolic Syndrome (MetS), characterized by central obesity, low HDL-cholesterol, hypertriglyceridemia, hypertension, and hyperglycemia, requires early detection to prevent type 2 diabetes and cardiovascular disease. This study highlights the need for affordable screening and dietary interventions in Pakistan.



Mental Health Well-being

Among Childrens & Adolescents In Slums

Anxiety Levels Among School-Going Adolescents in Peri-Urban Areas of Karachi, Pakistan Published in PLOS ONE

Mental health issues are becoming increasingly common among adolescents, who often juggle academic responsibilities with family obligations and financial support in low-socioeconomic areas. These pressures can lead to anxiety, stress, and depression.

Read the full study:

https://journals.plos.org/plosone/article?id=10.1371/ journal.pone.0289967



Self-Esteem Levels in School-Going Adolescents Across the Slums of Karachi, Pakistan: A Cross-Sectional Analysis Published in Frontiers

Self-esteem is a vital feeling necessary for individuals to live fulfilling lives and integrate into society. Its development heavily depends on the environment in which children are nurtured. The study assessed self-esteem using Rosenberg's self-esteem scale among school-going adolescents in the slums of Karachi.

Read the full study:

https://www.frontiersin.org/articles/ 10.3389/frcha.2023.1175826/full



Oral Health Status Among people

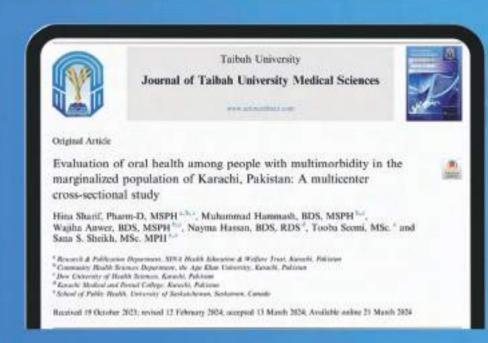
At Slums

Evaluation of Oral Health Among People with Multimorbidity in the Marginalized Population of Karachi, Pakistan: A Multicenter Cross-Sectional Study Published in Journal of Taibah University Medical Sciences

There is a clear link between oral health problems and a higher risk of multimorbidity, including diabetes, hypertension, and anemia. Periodontal disease is common among those with multiple chronic conditions, affecting quality of life and leading to high healthcare costs.

Read the full study:

https://www.sciencedirect.com/ science/article/pii/S16583612240 00192?via%3Dihub



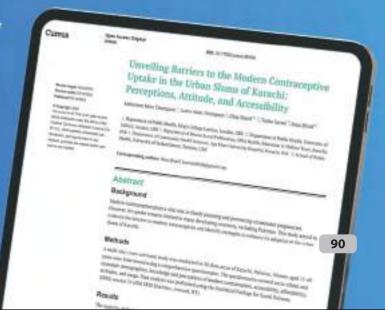
Population Health

Unveiling Barriers to the Modern Contraceptive Uptake in the Urban Slums of Karachi: Perceptions, Attitude, and Accessibility Published in Cureus

Despite high national need, modern contraceptive use in Pakistan remains low due to social stigma, side effect concerns, family size preferences, religious beliefs, and spousal refusal. Improving access and addressing misconceptions are crucial.

Read the full study:

https://www.pjps.pk/uploads/2024 /01/1706164221.pdf



Poor Glycemic Control

Evaluating the Efficacy and Safety of Empagliflozin Addition to Insulin and Oral Antidiabetic Medication (OAD) Regimen in Poorly Controlled Type 2 Diabetes and Obese Patients Published in Pakistan Journal of Pharmaceutical Sciences

Diabetes presents a significant health challenge globally, with Pakistan ranking high in prevalence according to the International Diabetes Federation (IDF) Atlas. Insulin resistance complicates diabetes care, necessitating diverse approaches for glycemic control, weight management, and lipid profile modifications

Read the full study:

https://www.pjps.pk/uploads/2024/01/1706164221.pdf

Evaluating the efficacy and safety at empaginfurio additions to involve and only artificials with medications (OAD) regimes in speech centrolled.

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Depression & Diabetes

Depression and Suicidal Ideation among Individuals with Type 2 Diabetes Mellitus: A Cross-Sectional Study from an Urban Slum Area of Karachi, Pakistan

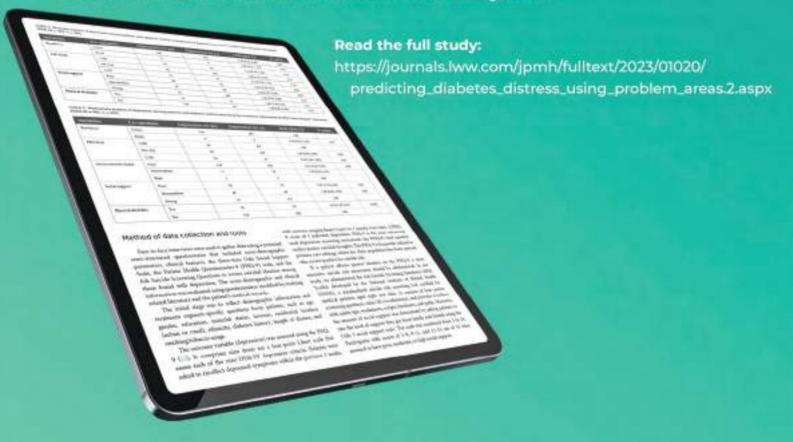


Depression and suicidal ideation are common among individuals with type 2 diabetes, especially in disadvantaged socioeconomic groups and those with prolonged illness. This study highlights the correlation between these mental health issues and diabetes in urban slums.

Read the full study:

https://www.frontiersin.org/journals/public-health/articles/ 10.3389/fpubh.2023.1135964/full Predicting Diabetes Distress using Problem Areas in Diabetes Scale and Diabetes Distress Scale-17: A Cross-sectional Study in Slums of Karachi Published in IAPS Journal of Practice in Mental Health

This study explores the prevalence of diabetes distress in Karachi's urban slums using the PAID scale and DDS-17 to assess emotional distress related to diabetes management.



Physical & Mental Health Well Being

Is a Sedentary Lifestyle a Leading Causal Factor of Obesity and Distress in Type 2 Diabetes? A Cross-Sectional Study in Low Socioeconomic Areas of Karachi, Pakistan

Published in BMJ Journal

The rising global prevalence of diabetes, especially with obesity, is concerning, with sedentary behavior worsening the crisis, particularly in low socioeconomic areas. This study examines the fink between socioeconomic factors and sedentary behavior among diabetics in Karachi's slums

Read the full study:

https://bmjpublichealth.bmj.com/content/1/1/e000149



Respiratory

Disease Burden

Respiratory Diseases' Burden in Children and Adolescents of Marginalized Population: A Retrospective Study in Slum Area of Karachi, Pakistan

Published in Frontiers

Globally, there has been a significant escalation in the prevalence of respiratory diseases, posing a substantial threat to the well-being of the general population, particularly in marginalized communities.

Read the full study:

https://www.frontiersin.org/journals/public-health/articles/ 10.3389/fpubh.2023.1135964/full

COVID-19 Vaccine Uptake Among Opulent vs Slums of Urban Setting in Karachi, Pakistan: A Cross-Sectional Study

Published in Indonesian Journal of Community Health Working

Globally, there has been a significant escalation in the prevalence of respiratory diseases, posing a substantial threat to the well-being of the general population.

Read the full study:

https://e-journal.unair.ac.id/IJCHN/article/view/49988



OPEN ACCESS

Shelids Mohd Salvern

Ministry of Health and Family Welfare, India

Absert Abdeltaged

Alo Shame Lichiersky, Egypt

Sped Tenssen Jawaid Salvo Habib Liniversity, Pakistan

CATCHOLISES

Hiru Shart

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THE CHITY SECTION

This article was submitted to Epidemiology of Chronic Diseases and Prevention, a section of the journal Fioreters in Epidemiology ISCHWID DE October 2022

ACCEPTED OS December 2023

MACHINTO 21 January 2023

Shard H. Jon SS, Shard S, Salesy T, Nascen, H and Reinman J (2023) Respiratory Diseases' Burden in children and adolescents of marginalized population: A retrospective study in slum area

Front Epidemial 2.1031/66 qos 10.1398/sebig/5055/1031899

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Respiratory Diseases' Burden in children and adolescents of marginalized population: A retrospective study in slum area of Karachi, Pakistan

Hina Sharif¹, Shah Sumaya Jan¹, Sana Sharif¹, Tooba Seemi¹, Hira Naeem' and Junaid Rehman'

Research & Publication Department, SNA Health & Education Wedner Trust, Raische Paristan Department of Anatomy, Government Morsell College, Schaper (http://doi.org/10.1001/10. Character of Social Property of Social Public Health Department SNA Health Education B Wellers Trust, Variety, Pakistan

Background: Worldwide, the burden of respiratory disease has dramatically increased, endangering public health. To our knowledge, there have been no reported cases of respiratory illness among children and adolescents living in the slums of Karachi, Pakistan, This study aimed to assess the burden of respiratory disease in marginalized sturn populations and the factors causing

Methods: This study was conducted in 35 slums of Karachi, Pakistan, to determine the prevalence of respiratory disease in children and adolescents. Data on pneumonia, pronchitis, bronchiolitis, tuberculosis, and asthma from August 2019 to July 2022 were analyzed and interences were drawn.

Results: Among the studied diseases, pneumonia was more prevalent among females (39,864, 44.9%), followed by males (19,006, 21.4%). Most of the children (59,988, 67,6%) were aged 1-5 years in addition, of those diagnosed with preumonia, 50,348 (56.8%) were from the same age group. Furthermore, bronchiolitis was found among 10,830 (12,2%) children aged 5-9 years. The majority (46,906, 52.9%) of the studied population belonged to the Parhan ennicity, followed by Sindhi (21,522, 24.2%), and most of them (84,330, 95,1%) were of a lower socioeconomic status.

Conclusions: This study found that pneumonia is the most common respiratory disease followed by bronchiolitis in children and adolescents in a marginalized sium population of Karachi, Pakistan Both pneumonia and bronchiolitis have seasonal variations in their occurrence.

bronchiotis, children and adolescents, epidemiology, inadequate ventilation, large family size, presumons, seasonal variations, sturn areas Introduction

Pakistan, with a total area of $796,100~\mathrm{km^2}$ ($307,376~\mathrm{mc^2}$), had a population of 224.78

Our Team_





BOARD OF TRUSTEES



Dr. Asif Ali Imam

Dr. Asif Ali Imam, a graduate of DOW Medical College, completed his residency and specialization in immunology in the USA. Settling in Los Angeles with his family in 1998, Dr. Imam laid the foundation for SINA. His visionary leadership and medical expertise have been instrumental in guiding SINA's healthcare initiatives.



Mr. Sohail Ahmed

Mr. Sohail Ahmed, an industrialist by profession, holds an MBA from the University of Houston, USA, and serves as a Director at MN Textiles Private Limited. He has been associated with SINA since its inception, bringing extensive experience in management and finance, vital for sustaining and expanding SINA's impactful programs



Dr. Naseeruddin Mahmood

Dr. Mahmood, associated with the Aga Khan University Hospital as a Consultant Pediatrician and Neonatologist, is actively involved in public health initiatives across Pakistan. A Trustee of the Childlife Foundation and the Karachi Relief Trust, Dr. Mahmood's medical acumen significantly enhances SINA's strategic healthcare interventions.



Mr. Abdul Khaliq Thakur

Mr. Abdul Khaliq Thakur, with a background in Marine Engineering and years of service in the Merchant Navy, retired as Chief Engineer Mariner in 2016. Dedicated to humanitarian causes, Mr. Thakur now volunteers his time and expertise to support SINA's mission, contributing invaluable operational insights and maritime discipline to organizational governance.



Mr. Fazil Bharucha

Mr. Bharucha, a partner at Bharucha & Co., holds degrees in Electrical Engineering and Law. He practices Intellectual Property Law and is an enrolled advocate of the Sindh High Court. As a Trustee of Aitemaad Pakistan Trust, Mr. Bharucha's legal expertise and commitment to ethical governance enrich SINA's legal and regulatory frameworks.

ADVISORS TO THE BOARD



Mr. Rafiq Rangoonwala

Mr. Rangoonwala, after earning his BA (Hons.) from the University of Karachi, pursued further education in the USA. He attended Wittermore School of Business, University of New Hampshire, to complete his Executive Development course and later earned his MBA in Marketing. Mr. Rangoonwala brings strategic business acumen to SINA's board, leveraging his international experience to drive organizational growth and sustainability.



Mr. Irfan Z. Bawany

Mr. Irfan Z. Bawany, Chief Executive Officer at Anam Fabrics (Pvt) Ltd., also serves on the boards of Farhan Sugar Mills Ltd. and Reliance Insurance Co. Ltd. as a non-executive director. A member of the Texas Society of Certified Public Accountants, Mr. Bawany received his undergraduate degree from the University of Houston. His financial stewardship strengthens SINA's fiscalstrategies and corporate governance



Dr. Nuzhat Faruqui

Dr. Nuzhat Faruqui is a recipient of the Tamgha e Imtiaz and is one of Pakistan's most eminent Urologists. Serving as an Assistant Professor at the Aga Khan Hospital, Nuzhat holds an FCPS in Urology, (CPSP 2005) and was awarded an International Fellowship in Female Urology, Urodynamics and Pelvic Floor in Reconstruction, 2008-2009. She attained her MBBS from Baqai Medical College in 1995 and then completed her Residency in Urology from AKU in 2005. She also holds an Honorary Rank of Surgeon Commander from The Pakistan Navy and leads a number of research projects. She is also actively involved with a Not for Profit "Ulfat" that runs multiple initiatives to serve vulnerable communities in need.

MANAGEMENT TEAM



Ambareen Kazim Thomson | Chief Executive Officer

Ambareen Kazim Main Thompson, a Pakistani national, is the Chief Executive Officer of SINA Health Education & Welfare Trust. She has extensive experience in family reproductive health and has previously managed one of Pakistan's largest nonprofit programs, overseeing 850 community-based clinics and a team of over 1,000 field staff.

As CEO, Ambareen leads primary healthcare services for over one million patients annually in underserved communities. She has successfully raised 400 million rupees in funding and developed sustainable revenue streams. Her initiatives include launching mental health programs and advocacy campaigns for hepatitis, sexual health, tuberculosis, and diabetes.

Ambareen holds a Master's degree in Global Security & South Asia from King's College London and an MBA in Marketing & Administration from the University of Karachi. She is a certified director from the Pakistan Institute of Corporate Governance (PICG) and has completed various programs from Harvard and Columbia Universities. Her awards include the King's Global Experience Award



Kamran Samad | Head of Finance

Kamran Samad is an accomplished accounting professional with 20 years of experience in accountancy and audit. Since joining SINA Health Education & Welfare Trust in July 2019, he has utilized his expertise to lead financial operations, ensuring compliance with International Financial Reporting Standards (IFRS) and local regulations.

His competencies include budgeting and forecasting, financial reporting and analysis, and managing internal and external audits. Proficient in system implementation and various ERP systems such as SAP BPC, MS Dynamics Navision, and Oracle, Kamran excels in financial oversight, project expenditure management, and donor reporting, while maintaining strong relationships with banking partners and ensuring accuracy in financial documentation



Dr. Wajiha Omair Choudhry | Head of Medical Affairs

Dr. Wajiha Omair is a motivated family physician with over five years of progressive experience. She currently serves as the Manager Medical Affairs at SINA Health Education & Welfare Trust, where she leads initiatives to promote family medicine training and evidence-based practice.

Her competencies include diagnostic skills, treatment planning and execution, strong interpersonal and relationship-building abilities, clinical decision-making, and patient counseling. Dr. Omair has successfully revised the EMR system, conducted regular performance audits, monitored disease data, and organized training programs. She collaborates with various organizations to provide comprehensive care and encourages clinical skill training through internship programs.



Dr. Faisal Tahseen Ilyas | Chief Operating Officer (Diagnostic Lab)

Dr. Faisal Tahseen is the Chief Operating Officer at SINA Diagnostic Laboratory. Holding an MBA in Health Management and Sciences from Baqai Institute and an MBBS from Hamdard College of Medicine and Dentistry, he has extensive experience in healthcare administration and clinical services. Dr. Tahseen previously managed one of Karachi's largest nonprofit healthcare programs, serving nearly a million patients annually in underserved communities.

His expertise spans social development, project and business development, policy formulation, and stakeholder engagement. At SINA, he oversees daily operations, strategic growth, and ensures compliance with various certifications. Dr. Tahseen has a proven track record in improving healthcare outcomes and managing large-scale clinical operations, supported by certifications in BLS, ACLS, ATLS, and Good Clinical Practice.



Salma Yousuf | Head of Clinic Operations

Salma Raziq is a distinguished professional with over 20 years of experience spanning management, clinical operations, and education. She earned her Master's degree in International Relations from Karachi University and has built a robust career through diverse roles.

Her experience includes five years of teaching at a private school, three years as a Clinical Technician at SINA, and 14 years in various management capacities at SINA Health, Education, and Welfare Trust. Salma has also held positions as an Auditor and Assistant Manager Clinical Operations. Since June 2022, she has been serving as a Manager at SINA, where she continues to drive organizational success and demonstrate her expertise in her field.



Anam Saleem | Head of Human Resource

Anum brings over 9 years of expertise in HR Strategy Planning & Implementation, Talent Acquisition, and Development, with a focus on leveraging technology for HR process optimization.

Previously, Anum served as Manager of Human Resources & Talent
Development at BlueEX from 2017 to 2024. There, she revitalized human capital
strategies, enhanced employee engagement, and fostered a culture of
continuous learning and development. Her experience also includes working
with a listed company on the PSX and serving as the Board HR Committee
Secretary.



Khawaja Yasir Iqbal | Head of Projects & Construction

Khawaja Yasir Iqbal is a result-driven Project Manager with TI years of experience managing projects valued over PKR 140 billion. He has a proven track record of delivering high-value, complex projects on time, within budget, and exceeding quality standards by implementing efficient project management practices.

His efforts have resulted in a 95% increase in positive project outcomes and stakeholder satisfaction. Yasir has managed five mega-scale government projects and 18 hospital construction projects funded by the Bill and Melinda Gates Foundation. Currently, he serves as the Head of the Project Management Department at SINA Health, Education & Welfare Trust, where he has led a team of 32 professionals to successfully complete 18 projects with 100 % success rate. He holds a PMP certification and a Master's in Project Management, having been awarded a prestigious educational honor that underscores his strong foundation in project leadership and execution



Sadaf Khurshid | Head of Marketing

Sadaf Khurshid is a skilled marketing leader with over a decade of experience in managing innovative campaigns and enhancing brand presence. As Manager Marketing at SINA Health Education and Welfare Trust, she leads strategic initiatives, manages rebranding efforts, and secures sponsorships.

Previously, she excelled as Marketing Manager at MARS Healthcare Network and Digital Marketing Lead at LAMTANS Group of Companies, boosting social media engagement and launching key digital platforms. Sadaf is known for her expertise in brand communication, digital strategy, and content development. She holds a BBA from KASBIT University and a Diploma in Digital Marketing from the Institute of Business Administration



Sunail Saleem | Head of Supply Chain

Sunail Saleem is a seasoned Supply Chain professional with over a decade of experience in procurement, specializing in the sourcing of medical and surgical supplies, laboratory equipment, biomedical devices, printing and stationery materials, and consumables.

He has developed his expertise at esteemed institutions such as Aga Khan University Hospital and Marie Stopes Society. Prior to joining Sina, Sunail led the procurement department at Hashmanis Group of Hospitals, where he made significant contributions to the organization's procurement strategies. He holds a Master of Science degree in Supply Chain Management, which enhances his capability to navigate the complexities of the procurement process with precision and efficiency.



Muhammad Furqan | Head of Public Health

Muhammad Furqan is an experienced Operations and Project Management professional with 10 years of expertise in Manufacturing, Vocational, and Health sectors. Currently serving as Program Manager at SINA Health, Education & Welfare Trust, he manages public health programs, develops proposals, and oversees donor relations.

His background includes project planning, budget management, and team capacity building, supported by an MBA in Supply Chain and a Bachelor's in Electronics. His previous roles at The Hunar Foundation, GIZ, The Aman Foundation, and REW Pakistan demonstrate his ability to deliver high-impact projects and build strong donor partnerships.



Muhammad Asghar | Head of Administration

Muhammad Asghar is a highly experienced professional with a diverse background in education, healthcare, data analysis, and administration. He began his career with three years of teaching at a private school, followed by 15 years as a part-time Data Analyst at Park View Clinic.

At SINA Health, Education, and Welfare Trust, Muhammad has held several key roles over the years, including Dispenser, Clinic Supervisor, Program Coordinator/Field Officer, and roles within the Human Resources Department, amassing 12 years of experience in HR. Currently, he serves as the Deputy Manager Administration at SINA, a position he has held since January 2024. Muhammad's extensive expertise and dedication make him a vital asset to the organization.



Rashid Hussain | Head of IT

Mr. Rashid Hussain is Senior IT Manager with over a decade of expertise, including substantial international exposure. He specializes in aligning IT strategies with business goals, ensuring the efficiency and security of IT infrastructure.

Rashid excels in designing, implementing, and maintaining complex systems, and has successfully led high-performing teams. His proficiency spans various programming languages and technologies, driving the development of web-based ERP systems to streamline multi-departmental operations. With skills in software development, database management, network security, and IT infrastructure, Rashid is committed to leveraging technology for business success and operational efficiency.



Hina Sharif | Assistant Manager Research & Publications

Hina Sharif is an accomplished pharmacist with a Bachelor's degree in Pharmacy from Karachi University and a Master's in Management Sciences from Iqra University. Currently, she is completing her second Master's in Public Health from Aga Khan University. Hina began her career as a Quality Control Officer at ATCO Laboratories and later transitioned to a hospital setting as a pharmacist. She advanced to the role of Lead Licensed Pharmacist, where she has excelled in managing pharmacy operations, particularly in NGO hospitals.

As a Lead Investigator, Hina has contributed significantly to research, authoring 15 scholarly articles in respected international journals. Her dedication to pharmacy and public health makes her a respected professional in her field.



Awais Alam | Assistant manager MIS & Data Analytics

Awais Alam is a professional with over 11 years of experience in Management Information Systems (MIS) and data analytics, along with a background in software development. Starting his career as a .NET application developer, he is proficient in C, C++, Python, and R, and skilled in database management systems such as Oracle and MySQL.

Currently acting as the lead for the MIS and Data Analytics department, Awais integrates data systems and conducts analyses to support key business decisions. He implements systems to improve workflows, develops internal databases, and spearheads data-driven initiatives, focusing on enhancing healthcare outcomes and operational efficiency.

Our Financials





SHARIAH REPORT



ALHAMD SHARIAH ADVISORY SERVICES

(PVT) LIMITED

يسم الله الرحمن الرحيم محمده وتصلى على رسوله الكريم

August 01, 2023

SHARIAH APPROVAL FOR PAYING ZAKAT TO SINA HEALTH, EDUCATION & WELFARE TRUST

INTRODUCTION:

With the vision of providing quality primary healthcare accessible to those who need it the most, SINA is a not-for-profit organization dedicated towards providing affordable access to quality primary healthcare in urban slums of Karachi since 1998. We are 450+ people working together focused on one cause - to provide quality primary healthcare to the less privileged.

Through our 30 clinic locations operating 08 hours a day, 06 days a week, round the year, we provide quality primary healthcare in the heart of urban slums of all districts of Karachi. This includes a mobile clinic catering to 3 locations to provide healthcare in the outskirts of Karachi and 2 referral clinics which guarantee a bridge between community clinics and hospitals.

METHOD OF UTILIZATION OF ZAKAT:

The financial needs of SINA are being covered by General Donations & Zakat that individuals & corporate contribute. After verification of Zakat eligibility, the specifically assigned official of SINA requests permission to collect Zakat on behalf of Zakat eligible patients and to spend it directly on their medical and healthcare expenses as per the conditions of Zakat form. According to these limits SINA uses Zakat funds very carefully.

SHARIAH RULING:

We confirm that SINA Health, Education & Welfare has appointed Alhamd Shariah Advisory Services (Pvt.) Limited as Shariah Advisor to guide the management in collection and utilization of Zakat and to ensure that the whole process is Sharia-compliant, both in letter and in spirit.

Based on our review, we hereby confirm that SINA collects and spends Zakat fund in accordance with the instructions of Shariah. It is also confirmed that whosever will give Zakat to SINA Health, Education & Welfare; their Zakat will be paid as per Shariah point of view, May Allah grant the management of SINA Health, Education & Welfare best reward for their services, and may give in their mission more blessings and sincerity. Aameen

For and on behalf of Alhamd Shariah Advisory Services (Pvt.) Ltd

Mufti Uzair Bilwani

Executive Director

Research Scholar

Note: This certificate is valid till 30% June 2024

+92 322 2671867 | www.alhamdshariahadvisory.com | info@alhamdshariahadvisory.com



Tel: +92 21 3568 3030 Fax: +92 21 3568 4239 www.bdo.com.pk 2nd Floor, Block-C Lakson Square, Building No. 1 Sarwar Shaheed Road Karachi-74200 Pakistan

AUDITORS' REPORT TO THE BOARD OF TRUSTEES

Opinion

We have audited the accompanying financial statements of SINA Health, Education & Welfare Trust ("the Trust") which comprise the statement of financial position as at June 30, 2023 and the statement of income and expenditure, the statement of cash flows and the statement of changes in accumulated funds for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of SINA Health, Education & Welfare Trust as at June 30, 2023, and of its financial performance, statement of cash flows for the year then ended in accordance with approved accounting and reporting standards as applicable in Pakistan.

Basis for Opinion

We conducted our audit in accordance with International Standards on Auditing (ISAs) as applicable in Pakistan. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Trust in accordance with International Ethics Standards Board for Accountants' Code of Ethics for Professional Accountants as adopted by the Institute of Chartered Accountants of Pakistan (the Code), and we have fulfilled our ethical responsibilities in accordance with the Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide basis for our opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

The management is responsible for the preparation and fair presentation of the financial statements in accordance with the approved accounting and reporting standards as applicable in Pakistan, and for such internal control as the management determine necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, Board of Directors are responsible for assessing the Trust's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Trust or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Trust's financial reporting process.

Auditor's Responsibility for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs as applicable in Pakistan will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.



As part of an audit in accordance with ISAs as applicable in Pakistan, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to
 fraud or error, design and perform audit procedures responsive to those risks, and obtain audit
 evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not
 detecting a material misstatement resulting from fraud is higher than for one resulting from error,
 as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override
 of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit
 procedures that are appropriate in the circumstances, but not for the purpose of expressing an
 opinion on the effectiveness of the Trust's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Trust's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Trust to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the
 disclosures, and whether the financial statements represent the underlying transactions and
 events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

KARACHI

DATED: 2 6 APR 2024

UDIN: AR202310166SUvJqQg2M

BDO EBRAHIM & Co.

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CHARTERED ACCOUNTANTS

Engagement Partner: Tariq Feroz Khan

SINA HEALTH, EDUCATION & WELFARE TRUST STATEMENT OF FINANCIAL POSITION AS AT JUNE 30, 2023

ASSETS NON CURRENT ASSETS Property and equipment 5 Intangible 6 Capital work in progress 7 CURRENT ASSETS Medical supplies 8 Loan, advances and other receivable 9 Short term deposits and prepayments 10 Short term investments 11 Cash and bank balances 12 TOTAL ASSETS LIABILITIES NON CURRENT LIABILITIES Deferred grant 13 CURRENT LIABILITIES Trade and other payables 14	317,685,285 9,480,336 8,427,459 335,593,080 28,695,056 45,578,098 8,646,480 120,000,000 582,718,405 785,638,039 1,121,231,119	304,330,336 10,256,644 21,723,101 336,310,081 18,265,667 737,686 6,221,825 320,424,533 182,772,694 528,422,405 864,732,486
Property and equipment 5 Intangible 6 Capital work in progress 7 CURRENT ASSETS Medical supplies 8 Loan, advances and other receivable 9 Short term deposits and prepayments 10 Short term investments 11 Cash and bank balances 12 TOTAL ASSETS LIABILITIES NON CURRENT LIABILITIES Deferred grant 13 CURRENT LIABILITIES	9,480,336 8,427,459 335,593,080 28,695,056 45,578,098 8,646,480 120,000,000 582,718,405 785,638,039	10,256,644 21,723,101 336,310,081 18,265,667 737,686 6,221,825 320,424,533 182,772,694 528,422,405
Intangible 6 Capital work in progress 7 CURRENT ASSETS Medical supplies 8 Loan, advances and other receivable 9 Short term deposits and prepayments 10 Short term investments 11 Cash and bank balances 12 TOTAL ASSETS LIABILITIES NON CURRENT LIABILITIES Deferred grant 13 CURRENT LIABILITIES	9,480,336 8,427,459 335,593,080 28,695,056 45,578,098 8,646,480 120,000,000 582,718,405 785,638,039	10,256,644 21,723,101 336,310,081 18,265,667 737,686 6,221,825 320,424,533 182,772,694 528,422,405
CURRENT ASSETS Medical supplies 8 Loan, advances and other receivable 9 Short term deposits and prepayments 10 Short term investments 11 Cash and bank balances 12 TOTAL ASSETS LIABILITIES NON CURRENT LIABILITIES Deferred grant 13 CURRENT LIABILITIES	8,427,459 335,593,080 28,695,056 45,578,098 8,646,480 120,000,000 582,718,405 785,638,039	21,723,101 336,310,081 18,265,667 737,686 6,221,825 320,424,533 182,772,694 528,422,405
CURRENT ASSETS Medical supplies 8 Loan, advances and other receivable 9 Short term deposits and prepayments 10 Short term investments 11 Cash and bank balances 12 TOTAL ASSETS LIABILITIES NON CURRENT LIABILITIES Deferred grant 13 CURRENT LIABILITIES	335,593,080 28,695,056 45,578,098 8,646,480 120,000,000 582,718,405 785,638,039	336,310,081 18,265,667 737,686 6,221,825 320,424,533 182,772,694 528,422,405
Medical supplies 8 Loan, advances and other receivable 9 Short term deposits and prepayments 10 Short term investments 11 Cash and bank balances 12 TOTAL ASSETS LIABILITIES NON CURRENT LIABILITIES Deferred grant 13 CURRENT LIABILITIES	28,695,056 45,578,098 8,646,480 120,000,000 582,718,405 785,638,039	18,265,667 737,686 6,221,825 320,424,533 182,772,694 528,422,405
Medical supplies 8 Loan, advances and other receivable 9 Short term deposits and prepayments 10 Short term investments 11 Cash and bank balances 12 TOTAL ASSETS LIABILITIES NON CURRENT LIABILITIES Deferred grant 13 CURRENT LIABILITIES	45,578,098 8,646,480 120,000,000 582,718,405 785,638,039	737,686 6,221,825 320,424,533 182,772,694 528,422,405
Loan, advances and other receivable 9 Short term deposits and prepayments 10 Short term investments 11 Cash and bank balances 12 TOTAL ASSETS LIABILITIES NON CURRENT LIABILITIES Deferred grant 13 CURRENT LIABILITIES	8,646,480 120,000,000 582,718,405 785,638,039	6,221,825 320,424,533 182,772,694 528,422,405
Short term deposits and prepayments 10 Short term investments 11 Cash and bank balances 12 TOTAL ASSETS LIABILITIES NON CURRENT LIABILITIES Deferred grant 13 CURRENT LIABILITIES	120,000,000 582,718,405 785,638,039	320,424,533 182,772,694 528,422,405
Short term investments 11 Cash and bank balances 12 TOTAL ASSETS LIABILITIES NON CURRENT LIABILITIES Deferred grant 13 CURRENT LIABILITIES	582,718,405 785,638,039	182,772,694 528,422,405
TOTAL ASSETS LIABILITIES NON CURRENT LIABILITIES Deferred grant 13 CURRENT LIABILITIES	785,638,039	528,422,405
LIABILITIES NON CURRENT LIABILITIES Deferred grant 13 CURRENT LIABILITIES	The state of the s	
LIABILITIES NON CURRENT LIABILITIES Deferred grant 13 CURRENT LIABILITIES	1,121,231,119	864,732,486
LIABILITIES NON CURRENT LIABILITIES Deferred grant 13 CURRENT LIABILITIES		
NON CURRENT LIABILITIES Deferred grant 13 CURRENT LIABILITIES		
CURRENT LIABILITIES		
	477,039,917	447,368,637
Trade and other payables 14		
	27,182,345	40,294,094
TOTAL LIABILITIES	504,222,262	487,662,731
NET ASSETS	617,008,857	377,069,755
CONTINGENCIES AND COMMITMENTS 15		
NET ASSETS REPRESENTED BY:		
Restricted Funds		
Zakat funds	129,075,844	68,233,283
Non-zakat funds	212,021,498	153,456,456
Endowment fund	275,911,515	155,380,016
16	617,008,857	377,069,755

The annexed notes from 1 to 29 form an integral part of these financial statements.

RECUTIVE OFFICER

SINA HEALTH, EDUCATION & WELFARE TRUST STATEMENT OF INCOME AND EXPENDITURE FOR THE YEAR ENDED JUNE 30, 2023

Note	Rupees	Rupees
RESTRICTED FUNDS		
INCOME		
Deferred income realized 17	545,279,404	398,539,545
Clinical receipts 18	42,352,635	20,609,260
Grant income 19	45,586,106	42,984,071
	633,218,145	462,132,876
EXPENDITURE		
Operating expenses 20	(590,036,173)	(439,297,564)
Administrative expenses 21	(40,725,711)	(30,286,384)
Other expenses 22	(23,950,821)	(11,144,946)
	(654,712,705)	(480,728,894)
Gross deficit	(21,494,560)	(18,596,018)
Other income 23	21,604,795	18,678,603
Surplus for the year	110,235	82,585
Attributable to:		
Zakat funds	88,188	66,069
Non-zakat funds	22,047	16,517
recents of hoteles connections	110,235	82,585

TRUSTEE

The annexed notes from 1 to 29 form an integral part of these financial statements.

CHIEF EXECUTIVE OFFICER

SINA HEALTH, EDUCATION & WELFARE TRUST STATEMENT OF CASH FLOWS FOR THE YEAR ENDED JUNE 30, 2023

	2023	2022
	Rupees	Rupees
CASH FLOWS FROM OPERATING ACTIVITIES		
Surplus for the year	110,235	82,585
Adjustment for non-cash items		
Depreciation for the year	37,998,603	38,434,852
Amortization for the year	1,323,318	1,292,955
Profit and dividend on investments	(21,604,795)	(1,170,343)
Remeasurement of fair value in mutual fund investment		(4,143,287)
Gain on disposal of fixed assets		(2,317,462)
Grant income realised against assets	(39,321,921)	(39,727,807)
Grant income realised against expenses	(6,264,185)	(3,256,264)
Deficit before working capital changes	(27,758,745)	(10,804,771)
Increase in current assets		
Medical supplies	(10,429,389)	(9,787,293)
Loan and advances	(44,840,412)	(40,749)
Short term deposits and prepayments	(2,424,655)	(2,931,284)
Sandard Committee (Committee Committee Committ	(57,694,456)	(12,759,326)
Decrease in current liabilities		
Trade and other payables	(13,111,749)	(15,539,297)
Net cash used in operating activities	(98,564,950)	(39,103,394)
CASH FLOWS FROM INVESTING ACTIVITIES	S	
Additions to property and equipment	(25,022,460)	(22,045,507)
Additions to intangible assets	(547,010)	1000
Capital work in progress	(13,035,450)	(34,441,294)
Proceeds from disposal of property and equipment		3,310,000
Profit received on investments	21,604,795	17,531,484
Net cash used in investing activities	(17,000,125)	(35,645,317)
CASH FLOWS FROM FINANCING ACTIVITIES	(1)-11-1-12-12-12-12-12-12-12-12-12-12-12-1	
Capital grants received	33,142,287	83,684,014
Grant Vital Pakistan Trust (VPT) project - net	17,092,639	(44,751,620)
Endowment fund received	194,956,032	53,199,586
Zakat / non-zakat fund - nct	144,319,828	92,697,525
Net cash flow from financing activities	389,510,786	184,829,504
Net increase in cash and cash equivalents	273,945,711	110,080,794
Cash and cash equivalents at beginning of the year	428,772,694	318,691,900
Cash and cash equivalents at end of the year	702,718,405	428,772,694
1		
As A		- 10

2023

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The annexed potes from 1 to 29 form an integral part of these financial statements.

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SINA HEALTH, EDUCATION & WELFARE TRUST STATEMENT OF CHANGES IN ACCUMULATED FUND AS AT JUNE 30, 2023

				Restricted Funds	Funds			
		2023	3			2022	2	
	Zakat	Non-zakat funds	Endowment Fund	Total	Zakat	Non-zakat funds	Endowment	Total
				Rupees	5			
Balance at beginning of the year	64,692,656	156,997,083	155,380,016	377,069,755	27,105,277	101,804,352	101,010,088	229,919,716
Zalue / non-raises funds received during the year for operations	256,667,550	84,958,889		341,626,439	256,667,551	79,525,797		336,193,348
Deferred moone realized during the year	(192,372,550)	(352,906,854)		(545,279,404)	(358,685,590)	(39,853,955)		(398,539,545)
Transfer from Deferred grant		322,950,333		322,950,333	139,539,350	15,504,372		155,043,722
Transferred from stamment of specializer	88,188	22,047		110,233	66,069	16,517		82,586
Movement during the year (Note 16.1)	×.		120,531,499	120,531,499	×	æ	54,369,928	54,369,928
Believe at end of the year	129,075,844	212,021,498	275,911,515	617,008,857	64,692,656	156,997,083	155,380,016	377,069,755

The abstract noise from 1 to 29 form an integral part of these financial statements.

SINA HEALTH, EDUCATION & WELFARE TRUST NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 2023

1. GENERAL INFORMATION

Sina Health, Education & Welfare Trust (the Trust) is a not for profit organisation, established under the Trust Act, 1882 on August 2, 2007 and is primarily engaged in providing primary health care facilities, medical treatments, laboratory investigations and financial assistance to the less privileged communities suffering from different ailments. The Trust operates 37 health facilities in Karachi. The principal office of the Trust is situated at Plot No.1, D-21, Sector 30, Korangi industrial area, Karachi.

2. BASIS OF PREPARATION

2.1 Statement of compliance

These financial statements have been prepared in accordance with approved accounting standards as applicable in Pakistan. Approved accounting standards comprise of Accounting and Financial Reporting Standards for Small-Sized Entities (SMEs) and accounting standards for not for profit organisations issued by the Institute of Chartered Accountants of Pakistan.

2.2 Basis of measurement

These financial statements have been prepared under the historical cost convention.

2.3 Functional and presentation

These financial statements have been presented in Pak Rupees, which is the functional and presentation currency of the Trust.

3. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

3.1 Property and equipment

These are stated at cost less accumulated depreciation and impairment losses, if any, except for freehold land which is carried at historical cost.

Depreciation is charged to statement of income and expenditure applying straight line method so as to charge depreciable amount of an asset over its useful life, at rates mentioned in note 5 to these financial statements. Depreciable amount represents cost less estimated residual value. Depreciation on additions is charged from the month in which the asset is put to use and on disposal, upto the month of disposal.

Gains and losses on disposal of property and equipment are included in the income and expenditure account.

Maintenance and normal repairs are charged to statement of income and expenditure in the year in which they are incurred. Major renewals and improvements, if any, are capitalised and depreciated in a manner that represents the consumption pattern and useful lives.

3.2 Capital work in progress

Capital work in progress is stated at cost less any identified impairment loss and represents expenditure incurred on property and equipment during the construction of clinics and other installation. Transfers are made to relevant class of property, plant and equipment category as and when assets are available for use in the manner as intended by the management.

3.3 Impairment

The carrying value of assets are reviewed at each statement of financial statements date to determine whether there is any indication of impairment. If such an indication exists, the recoverable amount of such asset is estimated. An impairment loss is recognised whenever the carrying amount of an asset exceeds its recoverable amount. Impairment losses are recognised in the income and expenditure account.

3.4 Intangible assets

Intangibles are stated at cost less accumulated amortisation and impairment losses, if any Amortisation is charged over the estimated useful life of the asset on a systematic basis by applying the straight line method.

Useful lives of intangibles are reviewed at each financial year end if expectations differ significantly from previous estimates. Where the carrying amount of an intangible is greater than its estimated recoverable amount, it is written down immediately to its recoverable amount.

Amortisation is charged to the statement of income and expenditure by applying the straight line method at the rates specified in relevant note.

Costs associated with maintenance of intangible assets are charged to income and expenditure account in the year in which they are incurred.

3.5 Medical supplies

Medical supplies are stated at the lower of cost and estimated net realisable value. Cost is determined on first-in first-out basis.

The management reviews the carrying amounts of medical supplies on a regular basis and provision is made for items if there is any change in physical form.

3.6 Cash and bank balances

Cash in hand and at bank are carried at nominal amount.

3.7 Cash and cash equivalents

Cash and cash equivalents are carried in the statement of financial position at cost. For the purpose of the cash flow statement, cash and cash equivalents comprise of cash in hand, deposits held with banks in current and saving accounts and other short term highly liquid investments with maturities of three months or less.

3.8 Deferred grant

Grant funds related to assets are accounted for as deferred capital grants, when the funds are received. An amount equal to the annual charge for depreciation on assets purchased is released from this account and reflected as 'Grant income realised against assets' in the income and expenditure account. Further, when a non-capital expenditure related to the asset takes place, the amount is released from this account and reflected as 'Grant income realised against expenses' in the income and expenditure account.

3.9 Revenue recognition

(a) Donation and grants

Donations are recognized as income as and when received. Donations received in kind are recognized at the fair value prevailing at the time of receipt of such donation.

Grants and donations received for revenue expenditure are taken to statement of income and expenditure.

Donations restricted in its use by the donors are utilised for the purpose specified and are classified as donations under restricted fund account. Any income made from such restricted donations is also credited directly in the restricted fund account.

Revenue from ancillary activities (e.g. clinic fee, laboratory, glucometer, ultrasound income) is recognised on receipt basis.

(b) Return on bank deposits

Profit on bank balances is recognised on a time proportion basis on the principal amount outstanding and at the applicable rate.

3.10 Expenses

All expenses are recognised in the income and expenditure account on accrual basis. Expenses incurred out of donation are reflected in the income and expenditure account, with an equal amount being recognised as "Value of services rendered".

3.11 Offsetting

Financial assets and liabilities are offset and the net amount is reported in the balance sheet, if the company has a legally enforceable right to set-off the recognised amounts and the company intends to settle either on a net basis or realise the asset and settle the liability simultaneously.

3.12 Taxation

The Trust is registered with the income tax authorities as a non-profit organisation under section 2(36)(c) of the Income Tax Ordinance, 2001 read with Rule 212 and 220 of the Income Tax Rules, 2002. The Trust does not account for taxation, as non-profit organisations are allowed a tax credit equal to one hundred percent (100%) of the tax payable including minimum tax and final tax payable, under section 100C of the Income Tax Ordinance, 2001.

3.13 Trade and other payables

Accrued and other liabilities are recognised at cost which is the fair value of the consideration to be paid in future for goods and services. The recoverable amount is equal to fair value.

3.14 Provisions

Provisions are recognized when the Association has legal or constructive obligation as a result of past events if it is probable that outflow of resources embodying economic benefits will be required to settle the obligation and a reliable estimate of the obligation can be made.

3.15 Contingencies

A contingent liability is disclosed when the Company has a possible obligation as a result of past events, existence of which will be confirmed only by the occurrence or non-occurrence of one or more uncertain future events not wholly within the control of the Company; or the Company has a present legal or constructive obligation that arises from past events, but it is not probable that an outflow of resources embodying economic benefits will be required to settle the obligation, or the amount of the obligation cannot be measured with sufficient reliability.

3.16 Financial instruments

3.16.1 Financial assets

The Company classifies its financial assets in the following categories: at fair value through profit or loss, fair value through other comprehensive income and amortized cost. The classification depends on the purpose for which the financial assets were acquired. Management determines the classification of its financial assets at initial recognition. All the financial assets of the Company as at statement of financial position date are carried at

A financial asset is measured at amortized cost if it meets both the following conditions and is not designated as at fair value through profit or loss:

- it is held with in a business model whose objective is to hold assets to collect contractual cash flows; and
- (ii its contractual terms give rise on specified dates to cash flows that are solely payments of principal and interest on the principal amount outstanding.

A financial asset is initially measured at fair value plus transaction costs that are directly attributable to its acquisition.

Impairment

The Company recognizes loss allowance for Expected Credit Losses (ECLs) on financial assets measured at amortized cost and contract assets. The Company measures loss allowance at an amount equal to lifetime ECLs under simplified approach and 12 months life time under general approach.

Lifetime ECLs are those that result from all possible default events over the expected life of a financial instrument. The maximum period considered when estimating ECLs is the maximum contractual period over which the Company is exposed to credit risk.

At each reporting date, the Company assesses whether the financial assets carried at amortized cost are credit-impaired. A financial asset is credit-impaired when one or more events that have detrimental impact on the estimated future cash flows of the financial assets have occurred.

Loss allowances for financial assets measured at amortized cost are deducted from the gross carrying amount of the assets. The gross carrying amount of a financial asset is written off when the Company has no reasonable expectations of recovering a financial asset in its entirety or a portion thereof.

3.16.2 Offsetting of financial assets and financial liabilities

Financial assets and financial liabilities are setoff and the net amount is reported in the statement of financial position if the Company has legally enforceable right to setoff the recognized amount and intends either to settle on a net basis or to realize the asset and settle the liability simultaneously.

3.17 Restricted funds

(a) Zakat fund

The zakat funds of the Trust are required to be utilised only for the patients who are entitled to receive zakat under the Islamic shariah. Donations specified as zakat by the donor are recognised under the general zakat fund account upon receipt. Subsequently, general zakat fund account is adjusted at pre-determined rates for the value of services provided to the needy / deserving patients.

(b) Non- zakat funds

Non-zakat funds are utilised for operations of the Trust and all the patients (other than patients eligible for zakat) are treated through funds received as non-zakat funds. Funds contributed by the donors for operations are recognised under the non-zakat fund upon receipt. Subsequently, non-zakat fund account is adjusted at pre-determined rates for the value of services provided to the needy / deserving patients.

4. SIGNIFICANT ACCOUNTING ESTIMATES AND JUDGEMENTS

The preparation of financial statements in conformity with approved accounting standards requires the use of certain critical accounting estimates. It also requires management to exercise its judgment in the process of applying the Trust accounting policies. Estimates and judgments are continually evaluated and are based on historic experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances. In the process of applying the Trust's accounting policies, management has made significant estimates and judgments that are disclosed in respective notes to the financial statements.

5 PROPERTY AND EQUIPMENT

^{5.1} In addition to the buildings owned by the Trust, there are five buildings reconstructed / renovated on plots which were given free of cost by donors for utilisation as clinics for specified periods. The titles of these plots were not transferred to the Trust as of June 30, 2023.

		Note	2023 Rupees	2022 Rupees
6	INTANGIBLE		esto l testasi	NORTH TO COME.
	Opening balance		10,256,644	11,549,599
	Additions		547,010	-
	Amortization during the year	100000000000000000000000000000000000000	(1,323,318)	(1,292,955)
		6.1	9,480,336	10,256,644
6.1	The electronic medical record system is amortized ov basis.	er the pe	eriod of 10 years of	on straight line
7	CAPITAL WORK IN PROGRESS			
	Capital work in progress	7.1	8,427,459	21,723,101
7.1	Movement of carrying amount			
	Opening balance		21,723,101	70,965,821
	Additions during the year		13,035,450	34,441,294
			34,758,551	105,407,115
	Transferred to property and equipment during the ye	ar	(26,331,092)	(83,684,014)
	Closing balance		8,427,459	21,723,101
8	MEDICAL SUPPLIES			
	Medical Supplies		28,695,056	18,265,667
9	LOAN, ADVANCES AND OTHER RECEIVABL	E		
	Loan to staff	9.1	581,094	435,593
	Advance against expenses		623,569	302,093
	Advance tax		44,373,435	
			45,578,098	737,686
9.1	Loan to staff represent one third interest free loan to	he emplo	oyees for the perio	od of three
	months as per trust's policy.			
10	SHORT TERM DEPOSITS AND PREPAYMEN	rs		
	Deposits		6,057,165	4,349,418
	Prepaid rent		2,589,315	1,872,407
	5.		8,646,480	6,221,825

		Note	2023 Rupees	2022 Rupees
11	SHORT TERM INVESTMENTS			
	Amortised cost			
	Term deposit receipt	11.1	120,000,000	246,000,000
	Fair value through profit or loss			
	Mutual fund units	11.2	2	74,424,533
			120,000,000	320,424,533

11.1 These represent term deposits with commercial bank having maturity of 3 months and rate of profit is 19.5% (2022: 14.25%)

11.2 Mutual fund units

	2023	2022			2023	2022
	Number of	units			Rupees	Rupees
	20	1,289,546	NAFA Islamic Income Fund		, -	12,993,981
			NAFA Riba-free Saving Fund			
	*	4,744,872			*	48,714,176
	₹ê	125,314	NAFA Al-Ameen Islamic Asset Allocation Fund - Class 'C'			12,716,376
	**		SUBSECUTED TO SE	_		74,424,533
12	CASH AND BAN	K BALANCI	ES			
	Cash in hand				120,317	135,231
	Cash at banks in:					
	Current accounts			Г	275,452,263	62,190,848
	Savings accounts	ê		12.1	307,145,825	120,446,615
					582,598,088	182,637,463
					582,718,405	182,772,694
12.1	The street Co			_		

12.1 The rates of profit on saving account ranging from 14.25% to 19.5% (2022: 12.25% to 14.25%) per annum.

			2023	2022
		Note	Rupees	Rupees
13	DEFERRED GRANT			
	Balance as at the beginning of the year		447,368,637	436,229,514
	Grant received during the year		33,142,287	83,684,014
	Transferred from Non-zakat fund		25,022,460	22,045,507
			505,533,384	541,959,035
	Less:		25 1133	
	Grant income realised against expenses	13.1	(6,264,185)	(3,256,264)
	Grant income realised against assets	13.2	(39,321,921)	(39,727,807)
			(45,586,106)	(42,984,071)
	Grants received during the year for VPT Project	13.3	341,134,828	188,283,929
	Grant income realised against Asset VPT Project	520000	(1,091,856)	(84,846,534)
	Grant income realised against Expense VPT Project	- 1	(322,950,333)	(155,043,722)
			17,092,639	(51,606,327)
	Balance as at the end of the year		477,039,917	447,368,637
	7.7			

- 13.1 These represent expenses that were made out of the deferred capital grants but does not meet the capitalisation criteria of the Trust and were charged to income and expenditure account.
- 13.2 This represents amount realised to grant income equivalent to depreciation and amortization charged on the relevant assets.
- 13.3 Nutrition & Immunization projects funded by Vital Pakistan Trust (VPT) for pregnant & Lactating women and strengthen of immunization rate for children under the age of 5 years.

14 TRADE AND OTHER PAYABLES

	27,182,345	40,294,094
EOBI payable	6,146,863	5,652,954
Accrued expenses	3,327,176	21,336,116
Creditors	17,708,306	13,305,024

15 CONTINGENCIES AND COMMITMENTS

There were no contingencies and commitments as at the reporting date. (2022: Nil)

16 RESTRICTED FUNDS

Zakat funds			
Zakat fund for clinics		112,295,984	59,362,956
Zakat ration fund for Baldia		16,779,860	8,870,327
	16.1	129,075,844	68,233,283

	Note	2023 Rupees	2022 Rupees
Non-zakat funds Endowment fund		212,021,498	153,456,456
Eaklowiticin fund	16.2	275,911,515	155,380,016
	4	617,008,857	377,069,755

- 16.1 Zakat funds are required to be utilized only for patients who are entitled to receive zakat under the Islamic shariah, whereas, all others patients are treated through funds received as non-zakat funds.
- 16.2 Movement in the endowment fund is as follows:

Balance as at July 1		155,380,016	101,010,088
Funds received from donor		92,561,500	49,056,298
Realised gain on remeasurement of funds		4,108,434	3,009,947
Realised gain on remeasurement of funds -		239,142	599,625
NAFA & Almeen			
Dividend for the year		0.70	533,716
Profit on Term Deposit Receipts (DIB)	100	23,622,423	1,170,342
Balance as at June 30	16.3	275,911,515	155,380,016

16.3 The amount has been received from a donor with stipulation that the principal amount to be kept intact while the income earned by investment of the same can be utilised by the Trust unless permitted by the Investment Committee.

17 DEFERRED INCOME REALIZED

	Zakat funds General zakat	192,372,550	215,605,613
	Non-zakat funds Non-zakat funds Funds utilized - VPT Nutrition Funds utilized - VPT Immunization	28,864,665 213,789,285 110,252,904 352,906,854 545,279,404	27,890,210 125,877,344 29,166,378 182,933,932 398,539,545
18	CLINICAL RECEIPTS		
	Clinic fees Laboratory income	41,624,921 727,714 42,352,635	20,603,910 5,350 20,609,260

GRANT INCOME			Note	2023 Rupces	2022 Rupees
Grant income realised against assets 13.2 39,321,921 39,727,807 45,586,106 42,984,071 20 OPERATING EXPENSES Salaries, allowances and other benefits 265,616,796 195,807,978 Medicines supplies 161,646,692 113,917,379 Vehicle and transportation 40,032,543 23,795,859 Rent, rates and taxes 6,899,441 4,297,845 Utilities 14,758,783 8,095,887 Repair and maintenance 37,655,537 41,624,715 Communications 8,590,014 7,467,919 Advertisement 1,765,196 1,786,785 Printing and stationery 9,719,050 5,164,781 Depreciation 34,229,963 34,645,759 Amortization 1,323,318 1,292,955 Training cost 7,798,840 1,399,702 590,036,173 439,297,564 21 ADMINISTRATIVE EXPENSES Salaries, allowances and other benefits 22,615,103 15,399,504 Vehicle and transportation 1,386,330 889,618 Rent, rates and taxes 3,917,335 3,576,5356 Utilities 3,309,062 1,773,564 Repair and maintenance 2,553,821 2,616,984 Communications 2,044,520 1,844,085 Printing and stationery 619,900 397,179 Donation Expense 510,000 397,179 Donation Expense 510,000 37,789,094 40,725,711 30,286,384 22 OTHER EXPENSES Additors' remuneration 324,600 280,000 Legal and professional charges 7,366,574 3,600,822 Insurance expense 10,318,067 6,596,486 Bank charges 19,024 17,974 Miscellaneous expenses 5,592,556 649,664 47,755 47,774 47	19	GRANT INCOME		*	
Salaries, allowances and other benefits 265,616,796 195,807,978 Medicines supplies 161,646,692 113,917,379 Vehicle and transportation 40,032,543 23,795,859 Rent, rates and taxes 6,899,441 4,297,845 Utilities 14,758,783 8,095,887 Repair and maintenance 37,655,537 41,624,715 Communications 8,590,014 7,467,919 Advertisement 1,765,196 1,786,785 Printing and stationery 9,719,050 5,164,781 Depreciation 34,229,963 34,645,759 Amortization 1,323,318 1,229,755		Grant income realised against expenses	13.1	6,264,185	3,256,264
Salaries, allowances and other benefits 265,616,796 195,807,978 Medicines supplies 161,646,692 113,917,379 Vehicle and transportation 40,032,543 23,795,859 Rent, rates and taxes 6,899,441 4,297,845 Utilities 14,758,783 8,095,887 Repair and maintenance 37,655,537 41,624,715 Communications 8,590,014 7,467,919 Advertisement 1,765,196 1,786,785 Printing and stationery 9,719,050 5,164,781 Depreciation 34,229,963 34,645,759 Amortization 1,323,318 1,292,955 Training cost 7,798,840 1,399,702 590,036,173 439,297,564 21 ADMINISTRATIVE EXPENSES Salaries, allowances and other benefits 22,615,103 15,399,504 Vehicle and transportation 1,386,330 889,618 Rent, rates and taxes 3,917,335 3,576,356 Utilities 3,309,062 1,773,564 Repair and maintenance 2,553,821 2,616,984 Communications 2,044,520 1,844,085 Printing and stationery 619,900 397,179 Donation Expense 510,000 3,768,640 3,789,094 40,725,711 30,286,384 22 OTHER EXPENSES 22 OTHER EXPENSES Auditors' remuneration 324,600 280,000 Legal and professional charges 10,318,067 6,596,486 Bank charges 19,024 17,974 Miscellaneous expenses 5,922,556 649,664		Grant income realised against assets	13.2	- Printed Company of the Company of	THE RESERVE OF THE PERSON NAMED IN
Medicines supplies 161,646,692 113,917,379 Vehicle and transportation 40,032,543 23,795,859 Rent, rates and taxes 6,899,441 4,297,845 Utilities 14,758,783 8,095,887 Repair and maintenance 37,655,537 41,624,715 Communications 8,590,014 7,467,919 Advertisement 1,765,196 1,786,785 Printing and stationery 9,719,050 5,164,781 Depreciation 34,229,963 34,645,759 Amortization 1,323,318 1,292,955 Training cost 7,798,840 1,399,702 590,036,173 439,297,564	20	OPERATING EXPENSES	-	15,500,100	42,704,071
Medicines supplies 161,646,692 113,917,379 Vehicle and transportation 40,032,543 23,795,859 Rent, rates and taxes 6,899,441 4,297,845 Utilities 14,758,783 8,095,887 Repair and maintenance 37,655,537 41,624,715 Communications 8,590,014 7,467,919 Advertisement 1,765,196 1,786,785 Printing and stationery 9,719,050 5,164,781 Depreciation 34,229,963 34,645,759 Amortization 1,323,318 1,292,955 Training cost 7,798,840 1,399,702 590,036,173 439,297,564 21 ADMINISTRATIVE EXPENSES Salaries, allowances and other benefits 22,615,103 15,399,504 Vehicle and transportation 1,386,330 889,618 Rent, rates and taxes 3,917,335 3,576,356 Utilities 3,399,062 1,773,564 Repair and maintenance 2,553,821 2,616,984 Communications 2,044,520 1,844,085		Salaries, allowances and other benefits		265,616,796	195,807,978
Vehicle and transportation 40,032,543 23,795,859 Rent, rates and taxes 6,899,441 4,297,845 Utilities 14,758,783 8,095,887 Repair and maintenance 37,655,537 41,624,715 Communications 8,590,014 7,467,919 Advertisement 1,765,196 1,786,785 Printing and stationery 9,719,050 5,164,781 Depreciation 34,229,963 34,645,759 Amortization 1,332,318 1,292,955 Training cost 7,798,840 1,399,702 2590,036,173 439,297,564 21 ADMINISTRATIVE EXPENSES Salaries, allowances and other benefits 22,618,103 15,399,504 Vehicle and transportation 1,386,330 889,618 Rent, rates and taxes 3,917,335 3,576,356 Utilities 3,391,7335 3,576,356 Repair and maintenance 2,553,821 2,616,984 Communications 2,044,520 1,844,085 Printing and stationery 510,000 397,179				161,646,692	113,917,379
Rent, rates and taxes 14,758,783 8,095,887 Repair and maintenance 37,655,537 41,624,715 Communications 8,590,014 7,467,919 Advertisement 1,765,196 1,786,785 Printing and stationery 9,719,050 5,164,781 Depreciation 34,229,963 34,645,759 Amortization 1,323,318 1,292,955 Training cost 7,798,840 1,399,702 590,036,173 439,297,564		[2.1.14] [10.14] [10.14] [10.14] [10.14] [10.14] [10.14] [10.14] [10.14] [10.14] [10.14]		40,032,543	23,795,859
Utilities 14,758,783 8,095,887 Repair and maintenance 37,655,537 41,624,715 Communications 8,590,014 7,467,919 Advertisement 1,765,196 1,786,785 Printing and stationery 9,719,050 5,164,781 Depreciation 34,229,963 34,645,759 Amortization 1,323,318 1,292,955 Training cost 7,798,840 1,399,702 590,036,173 439,297,564 21 ADMINISTRATIVE EXPENSES Salaries, allowances and other benefits 22,615,103 15,399,504 Vehicle and transportation 1,386,330 889,618 Rent, rates and taxes 3,917,335 3,576,356 Utilities 3,309,062 1,773,564 Repair and maintenance 2,553,821 2,616,984 Communications 2,044,520 1,844,085 Printing and stationery 619,900 397,179 Donation Expense 510,000 20,000 40,725,711 30,286,384 22 OTHER EXPENSES Auditors' remuneration 324,600 280,000 Legal and professional charges 7,366,574 3,600,822 Insurance expense 10,318,067 6,596,486 Bank charges 19,024 17,974 Miscellaneous expenses 5,922,556 649,664		: LEGS TO BY AND SOUTH AND SOUTH SOUTH SOUTH SOUTH SOUTH		6,899,441	4,297,845
Repair and maintenance		The Control of the Co		14,758,783	8,095,887
Communications				37,655,537	41,624,715
Printing and stationery 9,719,050 5,164,781 Depreciation 34,229,963 34,645,759 Amortization 1,323,318 1,292,955 Training cost 7,798,840 1,399,702 590,036,173 439,297,564 21 ADMINISTRATIVE EXPENSES Salaries, allowances and other benefits 22,615,103 15,399,504 Vehicle and transportation 1,386,330 889,618 Rent, rates and taxes 3,917,335 3,576,356 Utilities 3,309,062 1,773,564 Repair and maintenance 2,553,821 2,616,984 Communications 2,044,520 1,844,085 Printing and stationery 619,900 397,179 Donation Expense 510,000 3,768,640 3,789,094 Depreciation 324,600 280,000 40,725,711 30,286,384 22 OTHER EXPENSES 7,366,574 3,600,822 1,844,085 Insurance expense 10,318,067 6,596,486 6,596,486 Bank charges 19,024 17,974		[B. 자유, () # () () () () () () () () () () () () ()		8,590,014	7,467,919
Depreciation				1,765,196	1,786,785
Depreciation		Printing and stationery		9,719,050	5,164,781
Amortization Training cost 1,292,955 7,798,840 1,399,702 590,036,173 439,297,564		마스(100mm) 전 (100mm) 시간 (100mm) 전 (100mm)		34,229,963	34,645,759
Training cost 7,798,840 1,399,702 590,036,173 439,297,564				1,323,318	1,292,955
Selaries, allowances and other benefits Selaries, allowances Selaries,		[1] 프라마이터의 [1] (1) (1) (1) (1) (1)			
Salaries, allowances and other benefits 22,615,103 15,399,504 Vehicle and transportation 1,386,330 889,618 Rent, rates and taxes 3,917,335 3,576,356 Utilities 3,309,062 1,773,564 Repair and maintenance 2,553,821 2,616,984 Communications 2,044,520 1,844,085 Printing and stationery 619,900 397,179 Donation Expense 510,000 Depreciation 3,768,640 3,789,094 40,725,711 30,286,384 22 OTHER EXPENSES Auditors' remuneration 324,600 280,000 Legal and professional charges 7,366,574 3,600,822 Insurance expense 10,318,067 6,596,486 Bank charges 19,024 17,974 Miscellaneous expenses 5,922,556 649,664		2.44		590,036,173	439,297,564
Vehicle and transportation 1,386,330 889,618 Rent, rates and taxes 3,917,335 3,576,356 Utilities 3,309,062 1,773,564 Repair and maintenance 2,553,821 2,616,984 Communications 2,044,520 1,844,085 Printing and stationery 619,900 397,179 Donation Expense 510,000 3,768,640 3,789,094 Depreciation 3,768,640 3,789,094 22 OTHER EXPENSES 40,725,711 30,286,384 22 Other expenses 7,366,574 3,600,822 Insurance expense 10,318,067 6,596,486 Bank charges 19,024 17,974 Miscellaneous expenses 5,922,556 649,664	21	ADMINISTRATIVE EXPENSES			
Vehicle and transportation 1,386,330 889,618 Rent, rates and taxes 3,917,335 3,576,356 Utilities 3,309,062 1,773,564 Repair and maintenance 2,553,821 2,616,984 Communications 2,044,520 1,844,085 Printing and stationery 619,900 397,179 Donation Expense 510,000 3,789,094 Depreciation 3,768,640 3,789,094 40,725,711 30,286,384 22 OTHER EXPENSES 7,366,574 3,600,822 Insurance expense 10,318,067 6,596,486 Bank charges 19,024 17,974 Miscellaneous expenses 5,922,556 649,664		Salaries, allowances and other benefits		22,615,103	15,399,504
Rent, rates and taxes 3,917,335 3,576,356 Utilities 3,309,062 1,773,564 Repair and maintenance 2,553,821 2,616,984 Communications 2,044,520 1,844,085 Printing and stationery 619,900 397,179 Donation Expense 510,000 Depreciation 3,768,640 3,789,094 40,725,711 30,286,384 22 OTHER EXPENSES Auditors' remuneration 324,600 280,000 Legal and professional charges 7,366,574 3,600,822 Insurance expense 10,318,067 6,596,486 Bank charges 19,024 17,974 Miscellaneous expenses 5,922,556 649,664		시간 얼마가 있는 사람들이 가게 하는 것 같아요. 나는 아이는 살아서는 사람들이 가게 하는 것이 하는 것이 하는 것이다.		1,386,330	889,618
Repair and maintenance 2,553,821 2,616,984		[17] [가게 되어 하나 없이 되어 하게 되었다. 남자 (주요) 하나 되어 되었다. 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그		3,917,335	3,576,356
Communications 2,044,520 1,844,085 Printing and stationery 619,900 397,179 Donation Expense 510,000 3,768,640 3,789,094 40,725,711 30,286,384		Utilities		3,309,062	1,773,564
Communications 2,044,520 1,844,085 Printing and stationery 619,900 397,179 510,000 3,768,640 3,789,094 40,725,711 30,286,384 22 OTHER EXPENSES 24 25 26 26 27 27 28 28 28 28 28 28		Repair and maintenance		2,553,821	2,616,984
Donation Expense 510,000 3,768,640 3,789,094 40,725,711 30,286,384 22 OTHER EXPENSES 24,600 280,000 Legal and professional charges 10,318,067 6,596,486 Bank charges 19,024 17,974 Miscellaneous expense 5,922,556 649,664		[) 유명하다() [[[이 기계 (의 기계 (2,044,520	1,844,085
Donation Expense 510,000 3,768,640 3,789,094		Printing and stationery		619,900	397,179
Depreciation 3,768,640 3,789,094		1		510,000	
22 OTHER EXPENSES Auditors' remuneration 324,600 280,000 Legal and professional charges 7,366,574 3,600,822 Insurance expense 10,318,067 6,596,486 Bank charges 19,024 17,974 Miscellaneous expenses 5,922,556 649,664			(6	The second secon	
Auditors' remuneration 324,600 280,000 Legal and professional charges 7,366,574 3,600,822 Insurance expense 10,318,067 6,596,486 Bank charges 19,024 17,974 Miscellaneous expenses 5,922,556 649,664				40,725,711	30,286,384
Legal and professional charges 7,366,574 3,600,822 Insurance expense 10,318,067 6,596,486 Bank charges 19,024 17,974 Miscellaneous expenses 5,922,556 649,664	22	OTHER EXPENSES			
Insurance expense 10,318,067 6,596,486 Bank charges 19,024 17,974 Miscellaneous expenses 5,922,556 649,664		Auditors' remuneration			
Insurance expense 10,318,067 6,596,486 Bank charges 19,024 17,974 Miscellaneous expenses 5,922,556 649,664		Legal and professional charges			T. T
Bank charges 19,024 17,974 Miscellaneous expenses 5,922,556 649,664					
Miscellaneous expenses 5,922,556 649,664				19,024	
23,950,821 11,144,946					NEW TOWN
				23,950,821	11,144,946

		2023 Rupees	2022 Rupees
23	OTHER INCOME		
	Profit on savings accounts	18,775,427	16,361,141
	Gain on short term investment		2,317,462
	Others	2,829,368	-
		21,604,795	18,678,603

24 TRANSACTIONS WITH RELATED PARTIES

Related parties includes associated parties / undertakings, other related undertakings / persons and key management personnel. The Trust in normal course of business carries out transactions with various related parties.

Entities under common Trustees		
Non-zakat funds received from Child Life Foundation	17,137,914	55,141,764
Non-zakat funds received from Bharucha & Company	3,672,000	3,905,000
Non-zakat funds received from Anam Fabrics (Pvt) Ltd.	9,950,000	6,300,000
Key management personnel		
Non-zakat funds received	565,000	650,000

25 FINANCIAL INSTRUMENTS RELATED DISCLOSURES

NUMBER OF EMPLOYEES

26

	7,000,000	ue through t or loss	Amortis	ed cost	Tot	d
	2023	2022	2023	2022	2023	2022
Financial assets						
Loan and advances	+5	(* 6	581,094	737,686	581,094	737,686
Short term deposits and propayments	20		6,057,165	6,221,825	6,057,165	6,221,825
Short term investments	**	74,424,533	120,000,000	246,000,000	120,000,000	320,424,533
Cash and bank balances	2		582,718,405	182,772,694	582,718,405	182,772,694
		74,424,533	709,356,664	435,732,205	709,356,664	510,156,738
Financial liabilities						
Trade and other payables			27,182,345	40,294,094	27,182,345	40,294,094
			27,182,345	40,294,094	27,182,345	40,294,094

2023 2022 Number of employees

Number of employees as at June 30	599	534
Average number of employees	644	571

27 CORRESPONDING FIGURES

Corresponding figures have been re-arranged and / or re-classified, for the purpose of better presentation, the effect of which is not material.

28 DATE FOR AUTHORIZATION FOR ISSUE

B OFFICER

The Board of Directors of the Company authorized these financial statements for issue on 2 6 APR 2024 .

29 GENERAL

Figures have been rounded off to the nearest Rupee unless otherwise stated.

Ways to **Donate**

Bank Tranfer

Zakat Donations

A/C TITLE: SINA HEALTH, EDUCATION & WELFARE TRUST

BANK NAME: HABIB METROPOLITAN BANK

IBAN: PK78MPBL9964287140258425

A/C NO: 6-99-64-29313-714-258425

General Donations

A/C TITLE: SINA HEALTH, EDUCATION & WELFARE TRUST

BANK NAME: AL BARAKA BANK

IBAN: PK62AIIN00001206166110016

A/C NO: 0120166110016

Write a Cheque to SINA

A/C TITLE: SINA HEALTH, EDUCATION & WELFARE TRUST

MAILING ADDRESS: PLOT #1,D-21, SEC 30 ,KORANGI, KARACHI

Door Step Collection

Call us for safe & secure donation collection, right from your doorstep

PTCL: 021-37131660

MOBILE: 0300-0770820

