











INSTITUTIONAL UPDATE: COMPREHENSIVE PRIMARY HEALTH CARE

JANUARY-MARCH 2024

KHPT's approach to Comprehensive Primary Health Care

Comprehensive Primary Health Care (CPHC) is a holistic approach to health and well-being, which encompasses all services and is delivered in partnership by an interdisciplinary team through a range of services and programs that are accessible, equitable, culturally appropriate, and effective. KHPT's goal is to design, implement, and sustain need-based urban and rural CPHC models to achieve Universal Health Coverage in select cities and rural areas in India.

Government Engagement

KHPT supports Ayushman Bharat card registration campaign in Mysuru and Bengaluru



Collecting documents for the registration (left), and online registration of ABHA and AB-ArK card (right)

KHPT supported the district Ayushman Bharat Cell and the Health & Family Welfare Department, Government of Karnataka, to organize a campaign for the provision of Ayushman Bharath Health Account



card acts as a digital repository for health records, and cards provided to beneficiaries of the Ayushman Bharat Scheme allow for cashless treatments at network hospitals, and the AB-ArK scheme aims to extend 'Universal Health Coverage' to all residents in Karnataka.

KHPT staff and officials from Urban Primary Health Centre (UPHC) provided awareness of the benefits of ABHA and AB-Ark cards. in Kumbarakoppalu, and Vishweshara Nagara of Mysuru district, and Singasandra and Roopena Agrahara of Bengaluru district between January and March. Altogether about 2,907 persons were registered for cards under the Ayushman Bharat scheme.

(ABHA) and Ayushman Bharat Arogya

Commissioner of Karnataka Panchayat Raj reviews Grama Arogya programme

Mr Mohan HL, CEO, KHPT; Dr Shobha Anand Reddy, Director of Programmes and Strategy; Mr Raghavendra T, Project Lead, and state Grama Arogya staff, attended a meeting on February 9 at the Karnataka Panchayat Raj Commissionerate (KPRC) office, Bengaluru. The meeting, chaired by Ms Priyanka Mary Francis, IAS, Commissioner of Karnataka Panchayat Raj, focused on discussions to improve the efficiency and sustainability of the Grama Arogya programme, ensuring its effective implementation and monitoring at the grassroots level.

There were discussions on allocating the State Institute of Rural Development (SIRD) budget for Gram Panchayat Task Force (GPTF) refresher training, selecting elected officials as Health Members in Gram Panchayats to oversee health initiatives,

recognising and encouraging contributions from top-performing Gram Panchayats to Grama Arogya, incorporating new micro-planning and reporting formats into the Panchatantra portal for efficient reporting and monitoring, and consistent programme evaluation by the Panchayat Raj Commissionerate.

Karnataka (AB-ArK) cards. The ABHA

As the next step, Ms Priyanka Mary Francis, engaged Chief Executive Officers (CEOs) from all 31 districts in Karnataka,

along with Executive officers (EOs) from the talukas, and KHPT's Grama Arogya team, in a review meeting held on March 1. During the meeting, all districts were assessed and categorized based on their performance in the Grama Arogya programme implementation. KHPT presented the district-wise programme data, pinpointed areas of success and those requiring improvement, to enable targeted interventions and support where needed.



The CEO of Vijayanagara and team attending the presentation (left), and the CEO of Mysuru and team engaged in a discussion (right)











NHSRC - ILC team visits KHPT and urban sites to interact with MAS members

A team from the Innovation and Learning Centre (ILC) of the National Health Systems Resource Centre (NHSRC) visited the NHM office and KHPT's CPHC program work sites on January 18 in Bengaluru to discuss the progress of the project and review the findings from the facility assessment, capacity building assessment, and qualitative study on Mahila Arogya Samitis (MAS).



NHSRC and KHPT team interacts with women on experiences as MAS members

NHSRC also suggested developing a publication that includes process documentation, validation, and feasibility assessment of the facility audit tools developed, as well as a convergence framework and guidelines for ward committees.

The teams visited Virat Nagar and Gulbarga Colony to discuss the formal reformation process of MAS, meetings on MAS, and the members' experience in solving the problems discussed in MAS meetings.

KHPT celebrates International Women's Day in Bengaluru and

Mysuru

KHPT celebrated International Women's Day from March 8 to 15 in Bengaluru and Mysuru, highlighting the significance of the celebration, enhancing health, and advocating

Community Engagement

for primary healthcare among communities. Participants included vulnerable groups such as BBMP Workers, eligible couples, individuals with disabilities, and the elderly. About 200 women gained insights into the CPHC services available at the UPHC, through a programme featuring engaging games and activities.



Participants playing passing the ball activity

KHPT team met with Mr Nalin Atul, IAS,

21 to discuss the initiation of a pilot for

District Commissioner of Koppal on March

EzeCheck, a haemoglobin testing device, in

also met with Mr Rahul Ratnam Pandeya, Chief Executive Officer of Zilla Panchayat,

Dr Lingaraj, District Health Officer

(DHO), and Dr Susheelkumar, District

Surgeon, to discuss the device's usage and

the district for adolescents and women. They

------Communications and Advocacy

Grama Arogya model presented at GRAM-25 Continuing Medical Education event in Chitradurga



Mr Suresh Mahadevappa, presents at the **GRAM-25 CME** event

Mr Suresh Mahadevappa, Zonal Lead of KHPT, facilitated a session at the GRAM-25 Continuing Medical Education (CME) event on February 23, hosted by Basaveshwara Medical College and Hospital in Chitradurga. The session titled "Regional Approaches and Measures for the Elimination of Tuberculosis by 2025" drew on experiences from the Grama Arogya programme and focused on its convergence approach.

Representatives from medical colleges, staff from the National Tuberculosis Elimination Programme (NTEP) in Chitradurga, and selected Medical Officers participated; representatives from high-priority districts joined virtually.

KHPT meets the District Commissioner of Koppal to initiate a pilot for anaemia test device



KHPT team is in discussion with Mr Nalin Atul, IAS, District Commissioner (left), and Dr Swaroop N testing the device (right)

conducted sample testing for the officials. The district authorities expressed a positive opinion about the practical application of

the EzeCheck device and the team was permitted to conduct a study to understand its utility in comparison to the Hemocue and

Cell Counter methods.

------Partner Engagement------

Senior NCD consultant, MOHFW, visits Grama Arogya campsites in Bengaluru Rural

Mr Adarsh Varghese, Public Health Senior NCD consultant, Ministry of Health and Family Welfare, Government of India visited the Grama Arogya health screening





Mr Adarsh Varghese with team in front of the Anganwadi Centre (left) and conducts screening for GP president (right)

camp in Karahalli and Avatinda Grama
Panchayats in Bengaluru Rural on March
6 to gain insights into the functioning of
Grama Arogya in rural areas. During the
visit, he interacted with the KHPT team,
Panchayat Development Officer, GP
members, Anganwadi workers, Health and
Wellness Centre staff, and the community to
discuss the Grama Arogya programme and
to understand how the services are reaching
the community. Mr Varghese said the
interactions with stakeholders helped foster
a deeper understanding of the program's
implementation, and identify areas for
further collaboration and improvement.

Catholic Relief Services and partner organizations visit KHPT and Grama Arogya campsites in Mysuru

Representatives from Panchayat Raj Institution (PRI), National Tuberculosis Elimination Programme (NTEP), Society for Welfare and Advancement of Rural Generations (SWARG) and Catholic Relief Services (CRS), Uttar Pradesh, made an official visit to KHPT between January 16 to 18 to understand the Grama Arogya programme. Mr Raghavendra T, Project Lead, KHPT delivered a presentation on the Grama Arogya contribution to achieving the goal of TB Mukt Panchayat, implemented across 31 districts of Karnataka. During their visit, a health screening camp was also organised in Mysuru, Karnataka where

also organised in Mysuru, Karnataka where



the Grama Arogya health management

kit was demonstrated by the Community

Health Officer, and screening was done

for the communities. Mr Raghavendra T

and Mr Shashikumar, Zonal Lead, KHPT, were present to discuss various aspects

of the Grama Arogya initiative. They had

Panchayat, block, and district levels, as well

interactions with officials at the Gram

as with the GP President, members and

Representatives from UP and KHPT in Mysuru (left) and Mr Raghavendra T explaining the process of the camp (right)

John Hopkins University team visits Grama Arogya programme sites in Davanagere



JHU and KHPT team at health screening camp

Prof Svea Closser and Dr Shalini from Johns Hopkins University (JHU); Dr Swaroop N, Thematic Lead, CPHC; Mr Suresh Mahadevappa, Zonal Lead, and the Arogya Sangama field team visited the Mudahadadi GP and Kunebelikere GP in Davanagere on February 9 to understand community ownership, grassroots convergence, and social accountability in rural health initiatives from GPs. The team participated in various activities to comprehend the GPTF's functioning and strategies for its enhancement, drawing from Davanagere's experiences, including interacting with the Grama Arogya team, observing a health

camp for MGNREGA workers, attending a GPTF meeting, engaging in discussions and consulting with Medical Officers and health workers.

The team also met with the CEO of Davanagere to gain a deeper understanding of the GPTF functioning and its execution. The visit offered valuable insights and learnings that could potentially inform and enhance the Arogya Sangama project's implementation across different regions, along with best practices, that could be integrated into the Arogya Sangama pilot projects in Raichur and Chamarajanagara.

Learning and Sharing

KHPT facilitate sessions for GPs on Grama Arogya learning and experience sharing on YouTube Live

KHPT facilitated a live YouTube session at Karnataka Panchayat Raj Commission, RDPR Department, Bengaluru on Jan 20 and Feb 17, focusing on sharing learnings and experiences from the field regarding the Grama Arogya programme. The sessions featured insights from officials and elected representatives from districts, talukas, and GPs, highlighting successful strategies for programme implementation. Mr Suresh Itnal, CEO of Zilla Panchayat, Davangere, along with EOs, Panchayat Development Officers (PDOs), and other functionaries, discussed their efforts in overcoming challenges, coordinating activities, and conducting GPTF meetings, which have led to positive outcomes.





Facilitators at the live YouTube session (left) and Participants sharing their experience (right)

The purpose of the sessions was to raise awareness and promote cross-learning among GPs, inspiring them to successfully implement the Grama Arogya programme. Ms Elizabeth Joy, Programme Support Lead, KHPT, reiterated the importance of

organizing camps and the pivotal role of GPs in driving the programme forward. A Question-and-Answer session provided an opportunity for GPs to have their questions and concerns addressed. The sessions were attended by approximately 40,000 people from all over Karnataka.

KHPT facilitates a session on Grama Arogya to Centre for Policy Research officials in Bengaluru

KHPT facilitated a session on Grama Arogya for the officials and students from Centre for Policy Research (CPR), New Delhi at the KPRC office in Bengaluru. The orientation

KHPT honoured at fifth-

anniversary celebration of

KHPT was invited to the fifth-

anniversary celebration of Shamanur

Trust in Davangere

Shamanur Shivashankarappa Care

session was held on Feb 9 as part of the curriculum activity of RDPR for the study of the competencies of Gram Panchayat staff in Karnataka. The orientation session focused on insights into the Grama Arogya program such as the programme objectives, focus areas, implementation methodologies, key achievements, challenges and lessons

learned. Visits were organised to witness health camps in action, which allowed them to engage directly with the field teams, and GPs to understand the programme's implementation firsthand and gain insights into the operational aspects of the Grama Arogya programme.

Award and Recognition

memento in honour of the organization's contributions to the field of public health. Mr Suresh Mahadevappa, the Zonal Lead, attended the event as a representative from KHPT. KHPT was one of the 50 entities and individuals recognized, which included officers from educational institutions and district-level government officials.



Mr Suresh Mahadevappa, receiving the memento

Shivashankarappa Care Trust in Davanagere on March 7 to receive a

Case Story

Increasing weight using the KMC technique for premature babies with low birth weight

Jamuna, a 33-year-old woman living in Bengaluru, runs a provision store with her husband, Ravi. In November 2023, they had their third child, following the tragic death of their daughter during childbirth two years prior. During a home visit, KHPT's community health worker discovered that the newborn was both preterm and underweight. The healthcare professional then introduced Jamuna to Kangaroo Mother Care (KMC), highlighting its advantages for promoting the baby's development.

Motivated by the potential benefits, Jamuna and Ravi decided to implement KMC. This dedicated approach led to a remarkable increase in the baby's weight, going from 1200 grams at birth to a healthy 3200 grams in two and a half months. Coupled with consistent advice on breastfeeding practices and regular medical checkups, their unwavering commitment to KMC has significantly improved the infant's well-being.

Programme Impact











1.26.234

37.7 million

| Districts in Karnataka | Gram Panch | ayats GPTF me | embers trained | Population covered |
|--|---|---|--|---|
| NCD TESTING | ANAEMIA SCREENING | TB SCREENING | UNDER NUTRITION | MENTAL HEALTH COUNSELLING |
| 80,992 NCD camps organized 43,02,499 people Screened for NCD 4,59,047 people referred for further care | 6,57,892 15-49 years screened for anaemia (Hb) 68,686 15-49 years referred for low Hb <11 g/dL | 58,61,489 people screened for TB 52,587 people referred for TB testing | 2,21,596 children aged 0-6 years screened 1,412 children aged 0-6 years referred for further care 1,78,512 children aged 7-18 years screened 2,588 children aged 7-18 years referred for further care | 1,03,848 people screened with mental health checklist 4,854 people counselled 504 people referred for further mental health support |
| 6000 Health management kits distributed 156 IEC materials developed | | | | |

*The above figures are a summation of 31 districts in Karnataka for the September 2021 - March 2024 period. The project was initiated in 14 districts in 2021 and scaled up to the remaining 17 districts in September 2022. The undernutrition data is from December 31, 2022 onwards.







