



From remote villages to urban settlements, each life touched is a story of health, hope, and human resilience

Rooted in Communities | Driven by Evidence | Aligned with Systems

# Our Walk Along the Margins

For over two decades, KHPT has walked alongside India's most vulnerable communities—listening, learning, and building trust.

In places where health remains out of reach, held back by stigma, silence, or systemic gaps, we have worked to change that reality. We don't deliver solutions from above. We believe the answers already exist—in local knowledge, culture of the place, and in collective intent.

While health is our focus, we see it in its full context—shaped by poverty, gender, social norms, urbanisation, and climate. That's why, we bring together technical expertise and community wisdom, blending data, dialogue, and systems thinking.

Because health and wellbeing is a right. And every community deserves not just access, but the power to shape their own well-being.



### **Our Journey**

#### Where We Began

In the early 2000s, over 2.5 lakh people lived with HIV in Karnataka - making it one of India's biggest HIV epicentres. The virus brought more than illness. It brought silence, shame, and a stark exposure of inequality in our society.

KHPT was founded in the thick of this crisis - a small group of social scientists who believed HIV was not just medical, but deeply social: rooted in poverty, exclusion, and violence. With marginalised and excluded communities at the centre, we helped reduce HIV prevalence by over 70% in the hardest-hit districts, making Karnataka a global learning site.

## Listening, Expanding, Evolving

The communities we worked with led us forward. The leading cause of death among people with HIV was Tuberculosis - which became another area of focus. Here, we moved beyond a biomedical lens and adopted a socioecological lens, recognising TB as a social condition shaped by poverty, nutrition, and care. Further, women living with HIV worried less about their symptoms and more about their daughters dropping out of school. We saw the arc of disease begin in childhood. This led us to widen our lens. into adolescent health - into the quiet crises of child marriage, school dropout, limited agency and poor wellbeing. Following the continuum of care across the life cycle, our path led naturally to maternal and child health, and early childhood development.

## Investing in the Future

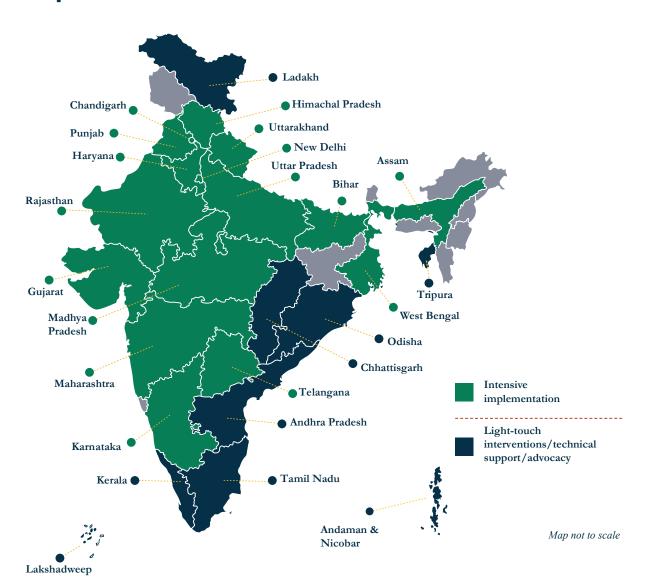
Over time, we realised that our interventions were designed in compartments, however, people's lives weren't. And so, we evolved to address health not in fragments - but as a whole.

We widened our lens to address some of India's top public health challenges - non-communicable diseases, and respiratory illness. These were deeply intertwined with our existing work and compounded by climate-induced migration.

Additionally, we build ecosystems - where likeminded experts, and organisations come together to share knowledge, and mobilise collective resources to advance two of India's most urgent yet underfunded priorities: women's health and health for the urban vulnerable.



## **Impact Across India**



#### **Our Focus**

We are a team of public health and medical professionals, development practitioners, researchers, and social scientists, supported by a wide network of grassroots field teams. With over 250 publications, evidence-based care is at the core of our work. Our work centres around three core pillars:

#### **Innovation and Implementation**

Developing community-centric, evidence-based and scalable approaches



Child Health and Nutrition



Adolescent Health and Empowerment



NCDs (Diabetes, Hypertension and Mental Health)



Respiratory
Resilience for the
Poor

#### **Ecosystem Development**

Building national and global networks to generate insights, shape narratives, inform policies and mobilize funding



Women's Health



Health for the Urban Vulnerable

#### **Becoming Future Ready**

Embedding Technology and AI across our themes to maximise our reach and impact



Community Tech and AI Integration

## **Enabling Change in India's Last Mile**



42,000,000+

vulnerable individuals reached through person-centred care and community structure engagement for TB treatment



450,000

Adolescent girls empowered through a life-cycle based approach



300,260

Eligible couples, pregnant women and lactating mothers reached to improve MNCH outcomes



4,382,499

Adults screened for diabetes and hypertension



530,800

Most at risk populations and people living with HIV covered under HIV/AIDS projects

### **Our Select Recognitions**

**Building Champions** for Tomorrow

Ashraya Hastha Trust, 2025 Best NGO award

International Conference on 'Innovations by NGO's in Diabetes Care, 2021 Diabetes Awareness, Prevention and Wellness Award

ASSOCHAM, 2019

Quality in Healthcare Leadership Award Zee Business Delhi, 2019 Deeply impacting communities through innovations in programs IMPACT Award, 2017 Avahan Award for Best State Lead Partner for Mobilising Communities Bill & Melinda Gates Foundation, 2014

#### **Our Partners**























































HCL**Foundatio** 

National Institutes of Health (NIH) – Institute for Health Behavioural Research, Malaysia



Health Policy and Systems Research Initiative-Asia

#### **KHPT**

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