

SPECIAL EDITION

# URBAN HEALTH PULSE

WEDNESDAY, AUGUST, 2025



VOLUME 01- MYSURU EDITION

## STRENGTHENING URBAN HEALTH THROUGH COMMUNITY ACTION: ONE YEAR OF UHSNCs IN MYSURU



**T**he first annual learning and sharing meeting for the Urban Health, Sanitation, and Nutrition Committee (UHSNC) was held at Budha Vihara in Mysuru on August 13, 2025, marking a one-year milestone of collective effort in urban health as part of a National Health Systems Resource Centre -Innovation Learning Centre

(NHSRC-ILC) project in collaboration with Urban Primary Health Centres (UPHCs), Government of Karnataka (GoK) and KHPT, Bengaluru.

Over the past year, communities, health workers, and local leaders have worked together with UHSNCs to address sanitation, improve disease prevention,

and strengthen community participation in health and governance. This special edition highlights the achievements of the UHSNCs while looking ahead.

Also highlights how community participation remains the foundation for improving urban health and creating a healthier environment for all.





# KEY HIGHLIGHTS

The meet welcomed distinguished guests, including Dr Shivashankar, Medical Officer of Vishweshwara Nagara Primary Health Center (PHC), Dr Mamatha, B.C., Medical Officer of Chamundipuram PHC, Dr Ramya S.R., Medical Officer, Kumbarakoppalu PHC, Ms Malavika Gubbivani, a social activist in Mysuru and Ms Poornima B. S, Deputy Director-Programs from KHPT Bengaluru.

A first-of-its-kind initiative has been piloted since August 2024 in Mysuru, aiming to address the increasing complexities of urban health issues that are becoming more challenging than those in rural areas.

The UHSNCs serve as the first-level, multi-sectoral platform for addressing and resolving local urban health and sanitation issues. It represents nearly 10,000 people and brings together 15–25 key stakeholders.

The committee members include the PHC Medical Officer, Primary Health Care Officer (PHCO- Member Secretary), Health Inspector, frontline workers such as Anganwadi Workers, school representatives, urban local body officials (such as Bruhat Bengaluru Mahanagara Palike (BBMP), Mysuru City Corporation (MCC)), Mahila Arogya Samiti (MAS) leaders, and civil society representatives. This inclusive structure ensures the voices of women, marginalised groups, and service providers are heard, creating a vital bridge between urban local bodies and health departments.

The UHSNCs' initiatives have yielded visible results on the ground, not just in reports. An exhibition showcased numerous activities, demonstrating the real impact on roads, children, and families.

The success of the UHSNC is largely attributed to the strong support and guidance provided by the primary health centers' medical officers and continuous collaboration with KHPT.

Significant progress has been made in raising awareness and preventing both communicable diseases, such as dengue and malaria, and non-communicable diseases, such as hypertension (BP) and diabetes, which are increasingly prevalent due to changes in lifestyle and diet. Regular BP and sugar testing camps are being held, demonstrating a commitment to early detection and management. In addition, the Health Department is looking for volunteer support for the digital entry of health data to track every patient and plan their medication supplies. One educated volunteer in every 10 households is needed to strengthen digital health efforts.

Waste management has improved through awareness, community participation, and cleanliness drives that have reclaimed public spaces, such as turning dumping grounds into usable areas.

Regular monthly meetings were held with local committees and leaders to plan and monitor progress, and help strengthen community actions.

KHPT provided support and facilitation to UPHCs in registering under the Ayushman Bharat Scheme, which allowed families to access free treatment for illnesses, as well as capacity-building activities to strengthen the health staff and UHSNC members.

A total of fifty-five UHSNC members participated in a learning and sharing meeting from three UPHCs, including Kumbarkoppalu, Chamundipuram, and Vishweshwara Nagara in Mysuru.





## GUESTS SPOTLIGHT

### Prevention is Better than Cure

**Dr Shivashankar, B.N,**  
**Medical Officer**  
**Vishveshwaranagara**  
**PHC, Mysuru**

Dr Shivashankar BN, Medical Officer of Vishveshwaranagar PHC, Mysuru City, highlighted the growing shift in health challenges from rural to urban settings. He explained that health problems in urban areas are becoming increasingly complex and complicated, require greater effort and resources, and highlighted that urban health itself has emerged as a major challenge.

He stressed the principle of "prevention is better than cure" and noted that if diseases are prevented at their initial stages, nearly 90% can be effectively managed. He further explained that communicable diseases such as dengue and malaria are closely linked to urban sanitation, whereas non-communicable diseases such as hypertension and diabetes are largely associated with changes in food and diet. Reflecting on the past, he mentioned that such conditions were not as widespread in the 1970s and 80s, attributing their rise to lifestyle and dietary changes.

He also highlighted the importance of hygiene and sanitation in controlling vector-borne diseases, such as dengue and chikungunya, which pose both social and economic burdens, and added that community education on preventing mosquito breeding and maintaining cleanliness can significantly curb these illnesses.



He emphasised the vital role of community participation and digitization in strengthening healthcare. He appealed for the support of educated individuals, stating that even one educated person in every ten households could play an important role in supporting health department programs.

He explained that digital systems, which allow patient data to be uploaded, enabling the tracking of conditions such as blood pressure and diabetes and predicting medication needs, facilitate better planning at both the central and state levels. He specifically called on the UHSNCs and MAS to actively support this digitization effort alongside promoting hygiene and nutrition.

Dr Shivashankar firmly stated that doctors alone cannot eliminate health challenges. He urged public representatives, community members, UHSNC, MAS, and organizations such as the KHPT to collaborate with the health department. He stressed that collective effort is essential to elevate health standards in the Mysuru district and contribute to the overall development of society.

### Educate and Empower Woman



**Dr Mamatha B.C.,**  
**Medical Officer,**  
**Chamundipuram**  
**PHC, Mysuru**

*"If we educate and empower a woman, we do not just change her life – we transform an entire town or village."*

A woman becomes an example for others, demonstrating that self-care, family care, and community care are all interconnected. Participation is important because of this. Taking leadership, attending meetings on time, and mentoring one another are all ways in which women bring about real change at the grassroots.

Providing women with the right support, awareness, and access to essential documents, such as Aadhaar or Below Poverty Line (BPL) cards, would ensure that no elderly person, no child, and no patient would be left behind from government programs.

A healthy, stronger, and more united village/city can be achieved when educated and empowered women are present.



**Ms Poornima B S,**  
**Deputy Director-**  
**Programs,**  
**KHPT, Bengaluru**

*Ms Poornima B S, Deputy Director- Programs from KHPT Bengaluru appreciated all the UHSNC members for their valuable contribution to the community and society.*

She highlighted the role of UPHCs staff in collaborating with committees, strengthening initiatives, and fostering community participation to address health, sanitation, and nutrition challenges effectively.

In conclusion, Ms Poornima noted, "With the shift from rural to urban health challenges, the importance of urban community groups has become greater than ever. UHSNCs are instrumental in ensuring the health of urban communities. I am happy to share that their efforts are not just on paper, but are visible at the ground level."





# GUESTS SPOTLIGHT

## Citizen Participation in Strengthening Local Governance and Public Health Initiatives



**Ms Malavika Gubbivani,**  
*Social activist and community champion, Mysuru*

Ms Malavika Gubbivani, social activist and community champion with deep experience in civic governance and grassroots mobilization in Mysuru, shared insights during this meet, highlighting the critical role of citizen participation in strengthening local governance and public health initiatives.

She drew attention to the pervasive issue of corruption, comparing it to a “gangrene” that undermines effective governance, and called for greater transparency and accountability from elected representatives and officials. She highlighted the under-implementation of ward committees, a legal provision introduced in 1992 to empower citizens in local decision-making and ensure proper resource allocation. She stressed that fully implementing these committees would bring much-needed transparency and significantly reduce corruption.

Ms Gubbivani also underscored the importance of citizen engagement in policymaking and encouraged community members to voice their needs and problems directly to the government, leveraging their grassroots knowledge to propose practical solutions. She further commended the proactive involvement of community members, particularly women, in local health initiatives, noting that even small collective efforts can have a meaningful impact.

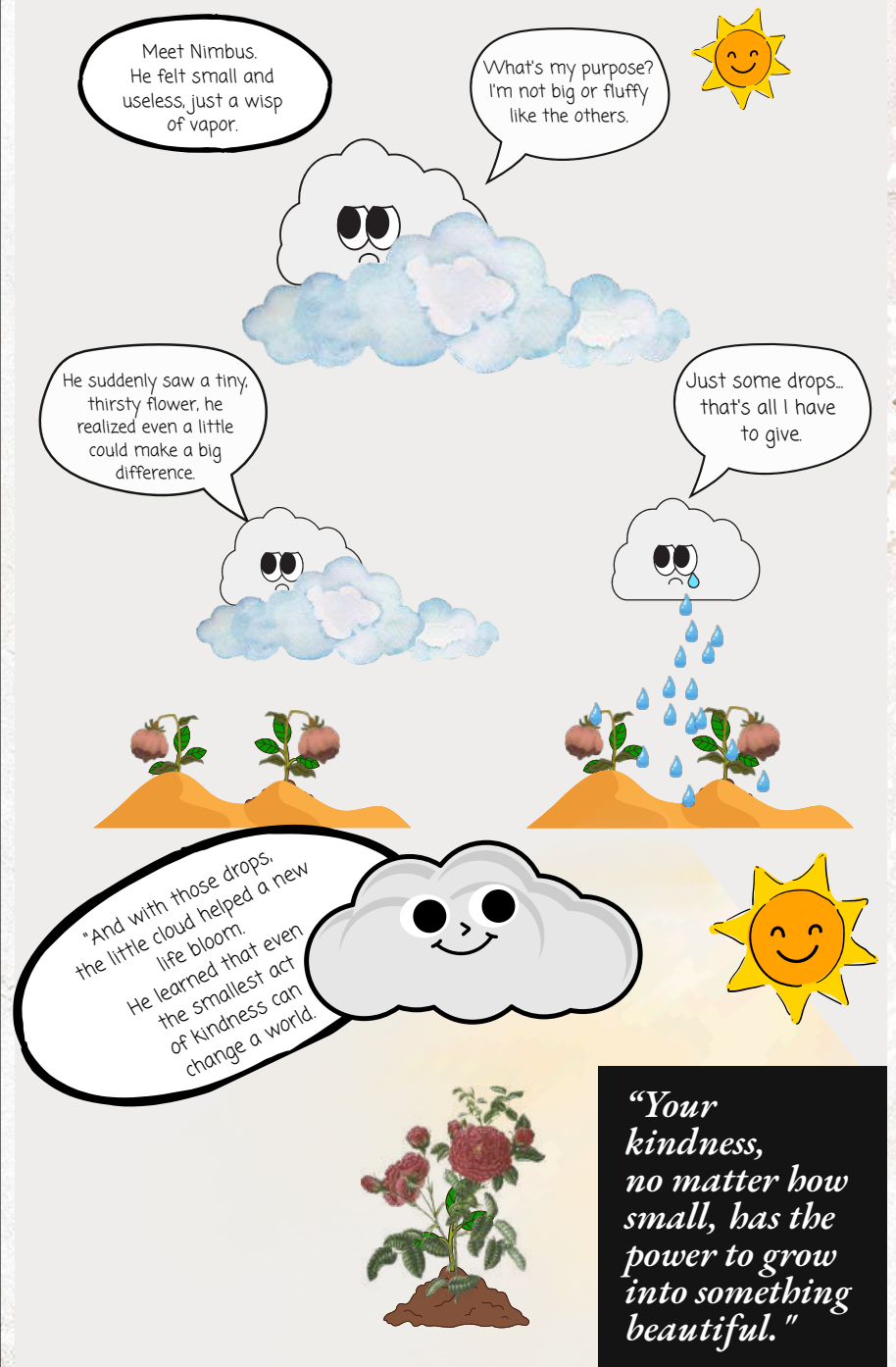
Ms Gubbivani concluded by stressing that citizen participation not only strengthens governance but also bridges the gap between healthcare workers and the public, ultimately improving community well-being.



*"The work being done by UHSNC members is truly commendable. Their active involvement has made our health initiatives more effective. I encourage them to continue this good work so that together we can build a healthier community."*

**Dr Ramya S.R.,**  
*Medical Officer,*  
*Kumbarakoppalu*  
*PHC, Mysuru*

### *A story of a little cloud*



*"Your kindness, no matter how small, has the power to grow into something beautiful."*





## STORIES FROM THE FIELD



**Ms Bhagya, PHCO,  
Kumbarakoppalu PHC**

Ms Bhagya, reflects on how local members have changed health initiatives to reach the community. She describes the UHSNC members as "like family," giving her a sense of belonging in her work.

*"The success of health programs in Kumbarakoppalu stems from local partnership, bringing both professional satisfaction and personal joy, showing that community-rooted collective action drives lasting change"*

"Their families treat me like a daughter," she says, explaining how this connection inspires her commitment. What was once difficult—approaching officials and convincing residents—has become easier through UHSNC members' involvement.

She said that previously residents had resisted the health team's requests, even for simple tasks like removing stagnant water. When UHSNC members spoke, people listened. Their influence gave credibility to health workers' efforts, helping programs

like sanitation campaigns and dengue prevention run smoothly. UHSNC members provide support by mobilising residents and arranging logistics—chairs, tables, test strips, and doctors for camps.

"We just had to show up. Everything else was taken care of by them," she recalled. During special programs like filaria detection, UHSNC members accompanied health staff into households at night for blood sample collection.

Their support ensured the program's success.

For Bhagya, the partnership created trust between the health system and people. "We are very happy to work with UHSNCs. Because they stand by us, the community accepts our work, and our efforts reach those who need them most."

## KHPT's Community Facilitators Bridged Gaps Between Health Systems and Community

Ms Cheluvamma, spoke about KHPT's role in strengthening health and sanitation in their wards. She said her challenge began with the non-communicable disease (NCD) program, where her team struggled to collect and submit patient data online with limited field workers. KHPT's community facilitator helped by gathering NCD data door-to-door and providing it to the health team, making data submission manageable.

The collaboration expanded with KHPT's formation of UHSNCs. By bringing together 10-15 members from each ward, including women's groups and local leaders, the committee improved community engagement and health message dissemination.

She also highlighted that committee addressed persistent problems such as plastic waste management through awareness campaigns, residents changed their habits, and now properly dispose of waste through collection vehicles. They also transformed a dumping ground into a community space through clean-up drives and installed cameras to prevent littering.

She appreciated KHPT's Community Facilitators that bridged gaps between health systems and community. They guided people to healthcare facilities, ensured follow-ups, and built trust in government health services. Their efforts in facilitating Ayushman Card registrations enabled free treatment for serious conditions at private hospitals, resulting achieved 75% Ayushman enrollment among Chamundipuram residents. She recalls with pride the cases of patients who received heart surgery at big private hospitals after Ayushman registration.



**Ms Cheluvamma, PHCO,  
Chamindupuram PHC**

*"By working hand-in-hand with KHPT, residents of Chamundipuram have not only improved in sanitation and health awareness, also ensured access to life-saving healthcare."*





# VOICES OF THE COMMITTEE MEMBERS



"I feel truly delighted by what we have achieved together in the past year. We 30 members meet every month to plan community initiatives that benefit the public, such as promoting hygiene and sanitation, educating children, and spreading awareness of environmental pollution by planting trees in schools and colleges. Our progress has been possible only through collective effort, and I believe continued collaboration will help us grow stronger and achieve even more."

— **Mr B.G. Somaiah**



"This journey showed me how powerful community involvement can be. We identify improper waste disposal as the ward's main challenge, especially from tenants, causing garbage on streets and health risks. This is an injustice we bring upon ourselves. Everyone must take responsibility for proper waste segregation. Older people must share knowledge with the community, without barriers of caste. Residents should act together instead of waiting for officials. We do not wait anymore; we respond. Our health and environment are in our hands."

— **Mr Mahadeva**



"I have been part of the UHSNC in Ward 49, supporting organising health checkups and awareness programs across different localities and which have greatly benefited the public by educating people about health. I encourage both current and new members to join hands, share their observations, and plan future programs. When more people participate, our collective efforts gain recognition and bring greater value to the community."

— **Mr Arun Kumar**



"I am deeply grateful for the support UHSNCs has given to women in our community. UHSNCs have educated us and

helped address health issues such as elephantiasis, high blood pressure, and diabetes. I especially appreciate the dedication of UPHC doctors, who even conducted late-night blood tests to support women with urgent health needs. Their commitment shows how UHSNCs truly work for women's empowerment and well-being."

— **Ms Rekha**



"I am very happy to be part of UHSNC initiative, we now have better health services for diabetes and



blood pressure tests, and our area has improved waste management and sanitation. Whenever we face health issues, such as fever or dengue, health workers and local representatives respond quickly and help us. It gives me great joy and fulfilment to know that my participation has brought positive change to our community."

— **Ms Manjula**



"Athletes and leaders make difference in community like wise, we took on one serious issue, which was drug and alcohol abuse among youth, which the UHSNC president addressed in a letter and followed up on. This effort led to improvements. Additionally, I appreciate the ASHA workers and Anganwadi staff, who provide home visits for pregnant women and organize regular meetings. Their support and commitment to health and well-being are truly commendable."

— **Mr Guruvayya**



"With KHPT's guidance, we connected local leaders and achieved success, receiving community support. We conducted dengue awareness campaigns, promoted women's health, and worked with Anganwadi and ASHA workers for door-to-door awareness. Our monthly health screening camps demonstrate our commitment to community health. I'm grateful to serve our community."

— **Mr J Ravi**



"I feel proud of how far our UHSNC platform has grown and hope it will expand across urban and state levels, especially in addressing health and environmental issues. As inspired by Buddha's quote, 'Be your own light', I believe individual responsibility drives well-being, whether in cleanliness, health, education, or social work. Through hygiene and health camps, we have observed positive changes. A healthy life comes from balance—diet, recreation, and exercise, while protecting our environment for the future."

— **Mr Lokesh**



"When we began working with KHPT it was new to us, but it became transformative for me and our community.

In addition, working with anganwadi and primary health centers, we improved local conditions, such as turning a dumping ground into a parking area with plantings during a cleanliness drive, bringing pride to people."

— **Mr Bhaskar**





# PHOTO GALLERY- ANNUAL MEET






# PHOTO GALLERY- FIELD ACTIONS





# LEARNINGS FROM THE PAST YEAR



**C**ollaboration between community members, health workers, and local leaders is fundamental for effective sanitation, disease prevention and community participation in health governance.

**E**xposure gained from regular visits by a senior officer from NHSRC-ILC, NHM-GOK and KHPT greatly motivated committee members, inspiring them to actively engage in discussions and initiatives. These interactions provided valuable insights and a renewed sense of purpose, fostering a collaborative atmosphere that enhanced their commitment to the committee's objectives.

**S**upportive supervision provided by KHPT's community facilitators significantly enhanced the connections between various stakeholders, fostering collaboration and open communication. This proactive approach not only identified challenges within the community but also facilitated effective and practical solutions to address these issues through regular engagement and hands-on oversight.

**E**mpowering individuals to take responsibility for their own health and environment leads to sustainable improvements in community well-being and public health outcomes.

**D**edicated individuals and coordinated community efforts can effectively address complex social and health issues, such as youth substance abuse, through leadership, advocacy, and sustained follow-up.

## KEY COLLABORATORS



### Health Department Staff

Provided strategic direction, leadership, and technical support for health programs, emphasising both preventive and curative solutions.

### Mahila Arogya Samiti (MAS) Members and Local Leaders

Played a critical role in mobilizing communities, promoting hygiene, monitoring progress, and championing initiatives that empower women and adolescents



### KHPT

Facilitated Ayushman Bharat registrations, coordinated volunteers for digital health data entry, supported outreach, and built bridges between health systems and local communities. In addition, community facilitators from KHPT served as essential links between the health system and residents; they enabled healthcare access, supported data collection, and guided individuals through government registration processes.

### Residents and Civic Champions

Actively participated in decision-making, helped identify local issues, and took responsibility for implementing solutions such as sanitation, health camps and environmental improvement drives.

### Urban Local Body Officials

Supported the facilitation of sanitation and waste management campaigns, organised resources and logistical aspects, participated in regular meetings, jointly planned, monitored, and provided necessary permissions during the execution of interventions.





# WAY FORWARD

**T**he first year of annual learning and sharing meet of UHSNCs has demonstrated the power of collective action in addressing urban health challenges. This meeting facilitated insightful discussions among stakeholders and highlighted collaborative strategies to foster healthier communities. At the conclusion of the meeting, committee members enthusiastically participated in a visioning exercise, articulating their aspirations for the year 2026.

As a way forward UHSNCs are committed to pursuing the following strategic objectives:

**Working to improve the health of adolescents and women:** The UHSNCs will focus on targeted health programs in empowering adolescents and women, recognising their health needs, which include initiatives to provide comprehensive reproductive health education, mental health support, and access to essential healthcare services tailored to their specific needs.

**Strengthening ward-level participation and accountability:** Efforts will be made to bolster community engagement by fostering active participation at the ward level. This entails creating mechanisms that enable community members to voice their health concerns and actively participate in decision-making processes by ensuring greater accountability from health service providers.

**Digital health efforts should be expanded for better tracking and planning:** UHSNCs aim to enhance digital health capabilities, facilitating better health data collection, tracking, and planning, through integrating technologies.

**Scale successful practices such as sanitation drives, health camps, and Ayushman registration in more wards:** UHSNCs will work to replicate and expand successful initiatives, including sanitation drives, health camps, and Ayushman registration, in additional wards, which aims to standardise best practices and widen the impact of proven health interventions across urban communities.

**Creating partnerships to address urban health challenges:** UHSNCs believe that they are important to work with local organizations and health care institutions to address social determinants of health and to drive positive change in urban health outcomes.

**Building bridges between citizens, health workers, and governance systems:** UHSNCs will dedicate themselves to fostering collaboration among citizens, health professionals, and local governance. This will involve regular forums and workshops to enhance dialogue, ensuring that community health needs are prioritized and addressed effectively.



**Expanding community-led health initiatives:** UHSNCs will empower local communities and promote healthy lifestyles tailored to the specific needs of the urban community.

**Cultivating health champions and community leaders:** UHSNCs will continue their efforts to identify and nurture health champions within the UHSNC framework. By empowering individuals who can advocate for health issues and mobilize others within their communities, they aim to create a network of dedicated leaders committed to driving positive health outcomes.

## Urban Climate-Health Pilot Strategy

KHPT is also conceptualizing conducting comprehensive assessments that integrate climate risks with facility resilience and health service delivery gaps at select UPHC facilities. Building on evidence-based literature and frameworks, KHPT plans to develop climate-health modules for frontline workers and UPHC staff, focusing on recognizing and responding to climate-linked health risks such as heat impacts on vulnerable populations and specific disease outcomes linked to climate change and extreme weather events. Through partnerships with UHSNCs, MAS, and Ward Committees, KHPT will plan to pilot community-led climate adaptation planning that strengthens both health system responsiveness and community resilience to climate hazards. This integrated approach has the potential to create replicable models for climate-adaptive urban health systems that combine technical capacity building with decentralized community action structures.

Together, we can create healthier, stronger, and more resilient urban communities and beyond.





## ACKNOWLEDGEMENTS

We sincerely appreciate the numerous stakeholders who have played a role in this ambitious initiative and have supported the pilot project in various ways. Their shared dedication has been instrumental in shaping UHSNC initiatives in Mysuru.

We extend our heartfelt gratitude to the officers and staff of the Department of Health and Family Welfare, Government of Karnataka, for their technical guidance and unwavering support during the execution of these initiatives.

We would like to acknowledge the contributions of UHSNC and MAS members, community facilitators, UPHC staff, and civic leaders, whose dedication has made urban health improvements possible over the past year. A special thank you goes to KHPT Comprehensive Primary Health Care (CPHC) thematic team, as well as the respective field teams, partner organisations, volunteers, and urban local bodies.

We also express our gratitude to the NHSRC-ILC fund for their financial support and approval.

We extend our sincere thanks to Mr Mohan HL, CEO of KHPT, for his continuous support and encouragement.

Finally, we appreciate the efforts of KHPT field staff, the administrative unit, and the finance team.

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KHPT staff

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**This newsreport has been prepared and designed by:**

Dr Jyoti Koujageri, Manager-Communications

**Review and Editorial team:**

Dr Swaroop N, Dr Sanghamitra Savadatti, Poornima BS, Chiteisri Devi, Dr Mallika Tharakan, Krishna Prasad, Vidyacharan Malve, and Praveen Kumar.

### **KHPT**

IT Park, 5th Floor  
# 1-4, Rajajinagar Industrial Area,  
Behind KSSIDC Admin office, Rajajinagar,  
Bengaluru- 560 044.

Ph: 91-80-40400200  
Fax: 91-80-40400300  
Email: khptblr@khpt.org  
Website: www.khpt.org

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