

Annual Report 2022

THE YEAR OF EXPANSION, CONSOLIDATION AND EXPLORATION

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FOREWORD FROM THE PRESIDENT



Gopi Gopalakrishnan Founder & President - World Health Partners

COVID altered our lives in numerous ways, perhaps forever. It was also heartening to see how humanity rose up as a whole and brought the pandemic under control. WHP played a small part in these efforts. Besides our role in combating the pandemic, we continued to further our mandate for rendering quality primary and reproductive health care services especially to communities living in rural areas or in marginalized enclaves in urban settings with the extensive use of technology both for delivering care and for monitoring impact.

But the pandemic has thrown up new challenges.

In 2022, our focus moved towards addressing crosscutting issues--mental health and substance use disorders, particularly among the poor who already had a high disease burden. The National Institute of Mental Health and Neurosciences (NIMHANS), in its survey in 2022, found that nearly 150 million Indians are in need of mental health care services, while fewer than 30 million are seeking care. Over 10% of the population has diagnosable mental health or substance use disorders. The study recommended that mental health be given priority, and treatment for mental disorders be considered not a luxury but a necessity.

Data shows psychiatrists in our country are scarce, and many people are reluctant to seek help and suffer in silence. For filling this gap, WHP began focusing on integrating its model interventions on mental health, initiated earlier, into the primary health care system. An important anchor for this is Tele MANAS, a national mental health service launched in October 2022 by the Union Government, which helps us integrate advocacy, consultations and capacity building of health staff in our intervention states to achieve a holistic approach.

WHP realized that providing education facilities for children and livelihood opportunities for deprived communities can help break the cycle of poverty and help them provide better learning facilities with quality teachers and curriculum using its expertise in digital technology.

In this report we have attempted to capture the key events and contributions the organization made to the national mandate in a wide swathe of areas such as tuberculosis elimination, family planning, maternal, neonatal and child health care, mental well-being of people and school education.

I take this opportunity to thank the WHP team for their empathy and professionalism which enabled it to execute the projects successfully. I also feel humbled by the support received from our government and non-government partners and the unwavering faith they have shown in us.

MESSAGE FROM THE COUNTRY DIRECTOR



Prachi ShuklaCountry Director, India - World Health Partners

With reasonable stability brought in by receding COVID, the teams got back to work with double enthusiasm and dedication. Pandemic just highlighted and exacerbated inequities that already existed between different states, people, and access to basic health care services. Together with Federal and State governments, donors, and other partners, we continue to be committed to creating more equitable health systems that improve and save the lives of people in the communities we serve.

In this report, we celebrate the significant accomplishments that have been made in the past year. Together, we have expanded family planning services around the states by ensuring their access to couples who desire, regardless of where they live. Specific relevant documentation, program SOPs have been developed with an idea to enable other partners to freely use and implement what has already been learnt and corrected. Focus on capacity building to government officials is another area which is critical yet ignored largely, where WHP has started concentrating. WHPs contribution to control and eliminate infectious diseases such as Tuberculosis; to commercialize affordable medical devices,

services and health interventions; to advance entrepreneurship; to combat mental health issues and gender-based violence; and to constantly adapt our existing health program to continue meeting community needs is directly linked to partnerships with all stakeholders- government, other organizations and field workers on the ground.

COVID-19 brought on a convergence of crises across health, livelihoods, education and social justice. We at WHP are moving forward with grit and passion. While we remain the unwavering champions for entrepreneurship, technology and service delivery, we have diversified our portfolio. Our updated mandate reflects our commitment to education and livelihood along with health. It is time to create a better future, today and beyond. A resilient future where we all understand that we succeed only when our most vulnerable communities survive and thrive. A future that gives hope and joy to everyone.

Our staff is our greatest strength and asset and we are grateful to them for the tireless efforts, undying dedication and swift action to serve the needlest. The Annual Report provides an overview and we hope you will find it interesting and insightful.

YEAR OF EXPANSION, CONSOLIDATION AND EXPLORATION

The year 2022 was a milestone year for WHP as it witnessed the expansion and consolidation of its existing interventions and exploration of newer areas where WHP saw the potential for using its domain expertise meaningfully for the benefit of its target audience. All the projects succeeded in overachieving targets with the consistent hard work of a committed team working on the ground. Use of data and project learning helped in streamlining the project activities to achieve better results and outcomes. For instance, WHP included across its projects, innovative value-added mental health services initiated in 2021 for addressing mental health issues found among the COVID survivors and communities. The scope of geographical intervention of several projects was expanded to other districts. Transgender, female sex workers and persons with disabilities who are exposed to multiple vulnerabilities and lack services, were included as target beneficiaries.

Coming together and leveraging the best of each sector /stakeholder are effective ways to address pressing issues and challenges facing us today and to help create a better world. Hence, we proactively partnered with NGOs, government, and non-government institutions and signed MoUs with several organizations to emphasise collective commitment and accountability. Sustained advocacy with government health departments was focused upon to thrust the integration of mental health into the public health system. CHOs and MOs in the districts in Gujarat and Jharkhand were trained on mental health screening tools and processes, and facilitating counselling and clinical services depending on the MH condition.

During the COVID-19-induced lockdown, schools across the country were closed, which impacted children's education severely. To overcome this loss, online classes replaced physical learning method. However, adapting or accessing this new learning method was a challenge, especially, for rural poor children, since they lack access to digital resources and their knowledge. Since WHP already has several years of experience in successfully demonstrating tele-medicine services in remote locations, it saw an immense opportunity to create an online digital education platform for village children, on similar lines. After a pilot intervention in a few schools in Bihar, WHP is now on the path of scaling up this educational intervention across several districts of Bihar, Jharkhand, Uttar Pradesh and Delhi.

Government bodies constitute WHP's strategic partners, with whom we continued to work closely in all our projects, further building mutual trust and leveraging resources for strengthening public health services.

Sectoral interventions are widened and strengthened further



Teleconsultation and telemedicine



Family planning messages



Tuberculosis treatment and follow-up



Gender issues



Mental health screening and counseling



Public health services strengthening



Numbers count





260+ staff engaged for improving health and educational services



82 million+ lives saved/improved

INTERVENTIONS IN 2022



ELIMINATING TUBERCULOSIS USING A MULTI-PRONGED APPROACH

The Government of India aims to eliminate tuberculosis (TB) by the year 2025. It has urged people to participate and support in creating health services that is capable of catering to every person's health needs. WHP is supporting the government in achieving its mandate of freeing India from TB through multiple TB projects that align with the Sustainable Development Goal (SDG) of reducing the TB mortality rate to 90% of the 2015 baseline by 2030. These interventions are described below.

PLUGGING THE GAPS IN TUBERCULOSIS CARE CASCADE

Addressing gaps across the diagnostic and treatment care cascade has been a key focus area in WHP's contribution for eliminating TB, which include reduction in patient losses while accessing a TB diagnostic test, get accurate diagnosis, initiate appropriate TB treatment, adhere to daily medication, and remain TB-free posttreatment. In 2022, the care cascade intervention focused on increasing case-finding with early access to free/cost effective chest x-ray (CXR) diagnostic tests along with improved access to free anti-TB treatment and improved drug dispensation in the public and private sector. It also worked to ensure recurrence-free survival of patients through adherence monitoring and differentiated care management, and assessment of patients for mental health issues and substance use disorder along with appropriate treatment.

- 23,332 beneficiaries were registered with free CXR vouchers, and a total of 1,753 TB cases were identified by ensuring early access to free diagnostic tests and reduced delay in care-seeking pathway
- The project team provided technical assistance in regular monitoring of the TB drug supply chain and logistics management through routine analysis of Nikshay Aushadhi
- 99 Dlite and Medicated Event Reminder Monitor (MERM) were deployed in all implementation geographies for digital adherence (61 patients in Punjab and 102 patients in Himachal Pradesh were enrolled in total)
- 8,891 TB patients were assessed for mental health issues, out of which 1,828 (20.5%) were identified with mental health challenges
- 8,485 patients were screened for substance use, out of which 2,032 (23.9%) daily substance users identified were provided counselling and referral
- Capacity building of healthcare workers was done for strengthening health systems and coordinating the care cascade
- Gender integration in care cascade was initiated by recognizing gender-based barriers in TB care



Reminder Monitor (MERM) box, which are given to high risk TB patients including women patients to support them in monitoring treatment adherence/ medicine compliance

DIFFERENTIATED CARE FOR MANAGING TUBERCULOSIS

To improve the treatment outcomes of TB patients, WHP is implementing the "Differentiated Care of TB Patients", a technical guidance developed under National TB Elimination Program (NTEP). The intervention entails a comprehensive package of diagnostic and referral services that are available at various health facilities with the aim to reduce morbidity and preventable mortality among TB patients.

Under this intervention, institutions were mapped for identifying the gaps and establishing necessary linkages within and outside the public health system to ensure all required investigations were available at the time of screening. In the next step TB patients were screened and segregated based on risk level determined by 16 investigational parameters. All high-risk patients were given referral support and admission for ensuring them a more comprehensive care management. In the final step, patients were followed up by the centralized control centre executives (CCEs) periodically to ensure better treatment outcomes for patients.

- 480 patients were notified and 447 were enrolled across the four intervention districts of Lucknow, Kanpur, Barabanki and Unnao
- Follow-up with 387 patients was completed after 15 days, 30 days follow-up was completed with 243 patients, and 89 patients were followed up on 60 days as per the mandate



WHP Team participating during demonstration of vitals assessment (SPo2) at Barabanki District Hospital in Uttar Pradesh

GOVERNMENT SUPPORTED TUBERCULOSIS PROGRAM

The Patient Provider Support Agency (PPSA) Project funded by the state governments of Bihar, Punjab and Odisha has enabled WHP to work on setting up effective and sustainable structures to strengthen the existing systems and seamlessly extend quality TB care to patients seeking care in private sector. This intervention has helped in increasing TB case notifications, facilitating direct benefit transfer (DBT), improving drug susceptibility testing (DST), reporting successful treatment adherence and outcome; conducting HIV DM testing and facilitating linkages for DR-TB treatment and HIV services.

At the operational front, main activities included mapping and engaging private-sector providers, laboratories, chemists, sputum transportation services; facilitating linkages between service providers and patients under the NTEP schemes (such as Nikshay Poshan Yojana and incentives to providers); ensuring supply of government procured drugs; and facilitating incentives given by NTEP to the private-sector doctors and patients.

- 44,578 patient notifications were done in the year 2022
- 1,697 private providers were engaged collectively in the intervention states



A field officer is handing over medicine to a beneficiary during a follow-up visit done for counselling and treatment adherence

MENTAL HEALTH INTEGRATION INTO PUBLIC HEALTH SERVICES

The mental health project, which started in 2021 in response to COVID-19, continued in 2022. Key activities like screening COVID-19 survivors and their family members for mental issues such as anxiety, depression, and trauma continued, followed by psycho-social counselling of patients identified with mild mental health issues by WHP's expert counsellors on its toll-free number 80 10 11 12 13. Patients having moderate and severe mental health issues were given medication and clinical treatment through government and private health facilities. Along the similar lines, screening, counselling, and referral support were provided to the survivors of gender-based violence (GBV), which reportedly increased during the pandemic.

Since the project had to end in December 2022, advocacy meetings were held with the government health officers to ensure mental health could get integrated into the public health system thereby sustaining the efforts initiated under the project. With the team's effort, deprived families were linked with government social security schemes to help them access the benefits and economic entitlements.

- Intervention expanded from 17 to 26 districts across Delhi, Gujarat and Jharkhand
- 475,292 people were assessed for mental health issues
- Counselling was initiated for 8,085 and 5,131 patients were referred for treatment
- 5,939 patients completed counselling and 1,968 availed referral services
- 45 trained Counsellors provided tele-counselling services on helpline
- 2,377 GBV affected people were identified and provided support services
- 4,431 frontline line workers, community health officers and medical officers were trained on mental health screening and counselling services
- 675 people were provided direct financial support and social security linkages with schemes such as COVID-Ex-Gratia, Widow Pension Scheme, Pradhan Mantri Jan Dhan Yojana
- A national symposium was held for disseminating data and findings with the stakeholders
- Standard Operating Procedure, capturing the key project processes was developed, for use by other stakeholders



WHP Care Coordinator providing in-person mental health counselling to a beneficiary at his home

FAMILY PLANNING SERVICES DELIVERED WITH GOVERNMENT PARTNERSHIP

WHP is working with the Government of Bihar for reducing the Total Fertility Rate (TFR) in the State from 3 to 2.1 by 2025, by providing quality female sterilization and family planning outreach services at the Primary Health Centre/ Community Health Centre level in a Public-Private Partnership model. WHP is carrying out family planning services in Vaishali, Gaya, Katihar, Muzaffarpur, Motihari (East Champaran) and Siwan, and has signed MoUs with the respective District Health Societies (DHS). WHP aims to expand the services to other districts of the State in the near future.

In March 2022, WHP signed a contract with the Government of Jharkhand to provide sterilization procedures at designated public health facilities. The sterilisation services began in Ramgarh district and later expanded to four other districts-Saraikela, Koderma, East Singhbhum and West Singhbhum.

Key Achievement

• Cumulatively 7,430 sterilizations were done in 2022, out of which 6,448 were in Bihar and 982 in Jharkhand



Women clients waiting for lab investigation before undergoing sterilization



Clients waiting eagerly for registration at the Primary Health Centre for sterilization

MNCH GETS BOOST USING MONITORING AND GAP IDENTIFICATION

Improving Maternal, Newborn and Child Health (MNCH) is integral to the health goals under the National Health Mission (NHM). The Systems Approach for MNCH focusing on Vulnerable Geographies (SAMVEG) Project aims to fill critical gaps in health systems to improve outcomes and help India achieve 'self-reliance' in MNCH. SAMVEG aims to improve MNCH outcomes in key high priority areas by demonstrating innovative models across the continuum of care.

WHP is providing supportive supervision through the Ministry of Health and Family Welfare, Government of India approved supportive supervision tool since January 2022 through district assessment, facility assessment, Health and Wellness Centre (HWC) assessment and community assessment in 25 Aspirational Districts in five States namely Jharkhand (19 districts), Uttarakhand (2 districts), Haryana (1 district) Himachal Pradesh (1 district) and Punjab (2 districts). Findings and gaps identified during the assessment are communicated to the district officials and corrective actions are taken, thereby improving the infrastructure and demand for services.

- 442 assessments (51 district assessment, 184 facility assessment, 106 HWC assessment and 101 community assessment) were conducted in 2022
- So far, 17 Family Participatory Care (FPC) training have been organized in project districts, where the participants
 included Medical Officers and General Nursing Midwifery (GNM) from the Special New Born Care Units (SNCU)
 and New born Stabilization Units (NBSU)
- SAMVEG project is strengthening Postpartum Haemorrhage (PPH) complication management readiness with introduction of UBT (Uterine Baloon Tamponade). 17,989 pregnant women have so far benefited from the model in Jharkhand and Uttarakhand
- Strengthening management of Respiratory Distress in neonates by using Continuous Positive Airway Pressure (CPAP) device is ongoing in seven SNCUs across Jharkhand and Uttarakhand. 3,485 newborns have so far benefitted from the model



 $Community\ assessment\ is\ being\ done\ by\ the\ District\ Manager\ at\ village\ Matlong\ in\ Manika\ Block,\ Latehar,\ Jharkhand\ Manika\ Block,\ Latehar,\ Jharkhand\ Manika\ Block,\ Latehar,\ Latehar,\$

ENTREPRENEURS NETWORK FOR PRIMARY HEALTH CARE AT DOORSTEP

The Entrepreneurs' Network is a model intervention of WHP, curated to promote accessible quality primary health care for community people in their neighbourhood. It leverages local healthcare providers and resources and employs modern technology for consultation with qualified doctors enabling better reach of advanced health services in remote areas.

Alternatively known as 'Sky Centres', this initiative began in 2009 and was successfully implemented in India from 2011 to 2018 with external financial support. The Project, faced several operational challenges and sustainability issues, with cost-efficiency being the central point of concern. Based on its past learning and better availability of internet services, WHP is re-approaching this model, using the scale for sustaining the Project without external support and drawing strength from stronger signal strength.

- 1,669 service providers were engaged in WHP's intervention states
- 1,710 tele-consultations were conducted through this network to address illnesses such as acute upper respiratory infections, fever, gastritis, joint pain, gastroenteritis, colitis, hypertension, etc.



A mother seeks consultation for her baby from the city doctor with the help of a service provider connected to WHP's Entrepreneur Network

A NEW BEGINNING IS MADE IN EDUCATION

A sizeable number of children in India continue to be out of school especially in rural and remote areas due to factors like poor quality of education, and non-availability of experienced teachers, thus failing to evoke children's interest towards education and ensure their retention in schools. COVID-19 lockdown badly impacted children's education due to shutting of schools. Poor children were the worse impacted in the absence of knowledge and means for digital education that was fast emerging in the sphere of education.

WHP's AXIS - an online education program is an innovative model, designed to impart quality education to children in private non-formal schools in rural areas and bridge the learning gap they have been facing.

Key Highlights

- 6 schools in Nalanda district of Bihar covered under pilot intervention
- Curriculum is being worked out which aligns with CBSE guidelines

Field Activity



Team members talking to a school headmaster about WHP's initiative to give children quality learning opportunity by connecting them online with experienced teachers

SUCCESS STORY 1

Technology-based adherence system gives new hope to TB patient

Ensuring patient support throughout the TB treatment journey for better adherence and outcome is the main objective of WHP's care cascade program. Patients are given to use a technology-based adherence mechanism to ensure providers remain in touch with them. For TB patients like Nirmala Harilal Verma form Gandhinagar, this technological support has proved to be immensely beneficial in

continuing her TB treatment.

After a month-long spell of dry cough, intermittent fever, and chest pain, Nirmalaben had approached the nearby Primary Health Centre Adalaj in Gandhinagar for medical consultation. On the doctor's advice, she got her X-ray done, which showed she was TB positive. Her treatment began immediately. Through WHP Care Coordinator's efforts, she was put on DAT (Digital Adherence Technology) 99 DOTS and was also explained about it. The CC assured Nirmalaben that TB is curable if medicine is taken as prescribed. She was told to give a missed call from her mobile on a particular number on a daily basis, which interested her. She agreed and understanding how this technology would help her, she ensured to do so. This technology has been of great help for healthcare staff in monitoring patient's adherence. Regular consumption of medicine cured Nirmalaben's chest pain. She resumed all her regular activities and felt more relaxed and healthy.



Nirmalaben is dialling on the number given to her to register a missed call after the intake of daily medication

SUCCESS STORY 2

WHP's helpline supports overcoming COVID-19 and MH issues

Pushpa Jadon, an ASHA worker in Shiv Vihar, North East Delhi has always been active in the community and at the Primary Urban Health Centre of her area. However, when she contracted COVID, she found herself in a complex situation due to fear and stigma. Pushpa recalls that meeting Pooja, WHP Care Coordinator, turned out to be of great help during that tough phase of life when she had little hope of recovering. Narrating her story Pushpa says,

"When my COVID-19 test came positive, and doctor referred me to the Government COVID Centre, I panicked and lost all hope. I decided for home treatment, but needed immediate support from a doctor to do that. Suddenly I recalled meeting Pooja didi from WHP several times, who had given me a pamphlet with the toll-free number. I called the number 8010111213 for help."

Pushpa connected with a counsellor and a doctor on WHP's helpline and initiated her treatment and successfully recovered from COVID. However, even after her recovery, her colleagues started distancing themselves from her, which led to anxiety and stress. Through Pooja's support she decided to take professional counselling on WHP's helpline. The tele-counsellor screened her and recommended her to undergo four rounds of counselling, which she successfully did. Counselling helped Pushpa in recovering fully from MH problems.



Pushpa Jadon, ASHA from Delhi reached out to WHP's helpline number to seek help when she got infected with COVID

SUCCESS STORY 3

Making an informed family planning choice for a happy future

Sangeeta* Devi lives in Budhnagar Amdabad in Katihar District with her Husband Sanjay Raut and six children, five girls and a boy. Her decision for family planning, previously, was thwarted by her in-laws who pressurised her to plan one more baby boy. WHP's family planning programme and its staff, guided her and even counselled her in-laws about the need for family planning and made them agree for the operation.

Sangeeta and her husband met ASHA in the PHC next day. The operations were conducted every Wednesday and Friday, at the PHC, in which registration, pathology test, operation and medicine were given free. Sangeeta and her husband decided to go ahead with the operation. After her registration, a counsellor spoke with Sangeeta to answer her queries and explained her the procedure. She was given pre-operative medicines, and subsequently her operation was conducted. Sangeeta was kept that night under the supervision of WHP's technical team. The following morning, she was given medicine and discharged. The technical team followed-up with her at regular intervals to provide any assistance to her for speedy recovery. After the operation, Sangeeta was happy and relaxed. She was grateful to the WHP team and said that her negative thoughts about government health services vanished, with the service and support she received during the entire process.



Sangeeta at the Primary Health Centre to register herself for the family planning operation

*Name changed to protect identity of the beneficiary

SUCCESS STORY 4

Health and Wellness Centre gets a facelift

Consistent and close supervision of facilities in Health and Wellness Centres (HWCs), by WHP staff under SAMVEG project, is helping government in plugging the gaps, creating a brand image, and ensuring effective delivery of health services for community people. For optimal services, the centers must be accessible, appealing, and comforting to the community.

The HWC of Kharsota village in the Manjhion Block of the Garhwa District of Jharkhand is the only government health facility catering to 779 families comprising a total population of 4,704 (as per Census 2011). During the supportive supervision visit in mid-November, WHP's District Manager of Garhwa noticed that the building structure was in a bad state and the essential branding was missing. The CHO's name with the contact number was not displayed. There was no signage for the labor room, OPD, and NCD. Labor room protocol and IEC materials on health programs too were not displayed.

The District Manager shared these findings and gaps with the Block Project Manager, Medical Officer in Charge and the District health officials. By November end, funds were released after which repairing, beautification work and branding was undertaken and the HWC got a new look.



The HWC underwent significant improvement after WHP team pointed out the missing branding in the HWC to the authorities

NUMBER OF PEOPLE'S LIVES IMPACTED

In 2022, WHP impacted and improved the lives of a large number of people through its health interventions. The expanse of our reach is evident in the numbers across the given indicators.



Cumulative **Teleconsultations**



TB patients diagnosed and put on treatment



TB patients enrolled for Treatment Adherence using various technologies



TB patients with successful treatment outcome followed up



i-Smart free chest X-ray services with Al intervention accessed



MH patients provided counselling and referral services (TB and COVID-19)



People vulnerable to gender-based violence identified



1.669 WHP service provider network in India



Received family planning services

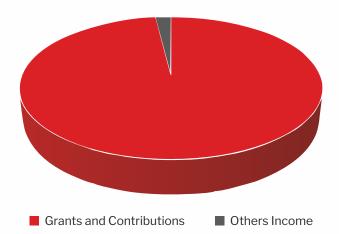
FINANCIALS (APRIL 2022-MARCH 2023)

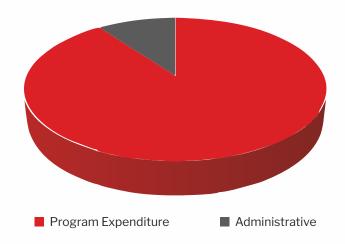
Revenue

Our total revenue in 2022 was USD 4,431,600. The below chart provides a break-up of the source of revenue.

Expenditure

Our total expenditure was USD 3,486,524 in 2022. The below chart shows that we have utilised maximum revenue on our programs.





PARTNERSHIPS

DONORS

- State Government of Bihar
- State Government of Odisha
- State Government of Punjab
- State Government of Jharkhand
- United States Agency for International Development (USAID)
- Jump Trading, LLC (Corporate Social Responsibility)

PARTNERS

- National and State Governments
- Private Health Care Providers
- Central Institute of Psychiatry (CIP), Ranchi
- Ranchi Institute of Neurophysics and Allied Sciences (RINPAS)
- Child in Need Institute (CINI)
- Centre for Equity Studies (CES), Delhi
- Health and Agricultural Society (HAS), Jharkhand
- Srijan Foundation, Jharkhand
- SANGATH
- Indian Institute of Public Health, Gandhinagar (IIPH)
- Hospital for Mental Health Ahmedabad (HMHA)
- Everwell Health Solutions
- Harvard Medical School
- Leapfrog to Value



ABOUT WORLD HEALTH PARTNERS

Walking on the path of commitment and service...

WORLD HEALTH PARTNERS (WHP) came into existence in 2008 with a novel objective of making primary health care services accessible and affordable to the most vulnerable and underserved communities of society.

WHP is a non-profit organization that focuses on preventive and curative health care by equipping the community with appropriate knowledge and understanding and ensuring primary health services are accessible to them. To promote this vision, it has developed a model program that leverages available public and private resources and support from public health institutions and private service providers. Our health programs help create a holistic healthcare ecosystem with human-centric solutions factoring in medical, social, educational, religious, and financial aspects. The ensuing robust structure helps develop a range of products and services needed to create volumes essential for reducing delivery costs.

WHP started its operations from three districts of western Uttar Pradesh and later expanded its work area to other states of India. The organization started its intervention with teleconsultation and telemedicine. Currently, it is delivering health services in more than 55 districts spread across 10 states of India. WHP desires to scale up its model interventions not as a disposition but considering the need to reach a large number of people who are in the waiting.

As a service delivery organization, we have a model wherein trained and networked providers deliver most services supported by technology solutions playing a supplementary role in referral and connecting with experienced doctors in cities. This approach has enabled access to quality primary health and reproductive healthcare across services such as family planning, maternal health, and treatment for tuberculosis and childhood illnesses. Our mental health screening and counselling services developed for TB and COVID-19affected survivors and communities are model interventions addressing mental health issues successfully.

The projects of WHP have gained support from donors, bilateral agencies, and implementers, who saw value in our work. The support base has consistently risen with time, reinstating our belief in the work we have been doing. WHP's model has been recognized with awards from the Skoll Foundation, the (World Economic Forum's) Schwab Foundation, Ashoka Foundation, and Asian Award for Social Entrepreneurship.

We are committed to responsible scalability with the sustainability of programs. This inspired us to explore model programs that promote entrepreneurship and optimum utilization of budget and available resources for recurring costs. WHP aims to use support from bilateral, multilateral, and private donors for capital costs for establishing the networks.

Mission

WHP's mission is to provide primary and reproductive health services at scale to the rural and underserved communities by enhancing the efficiency and efficacy of currently available resources. We harness the latest advances in communication, diagnostic and medical technology to establish sustainable service delivery networks that have an unwavering focus on holistic primary health.

Vision

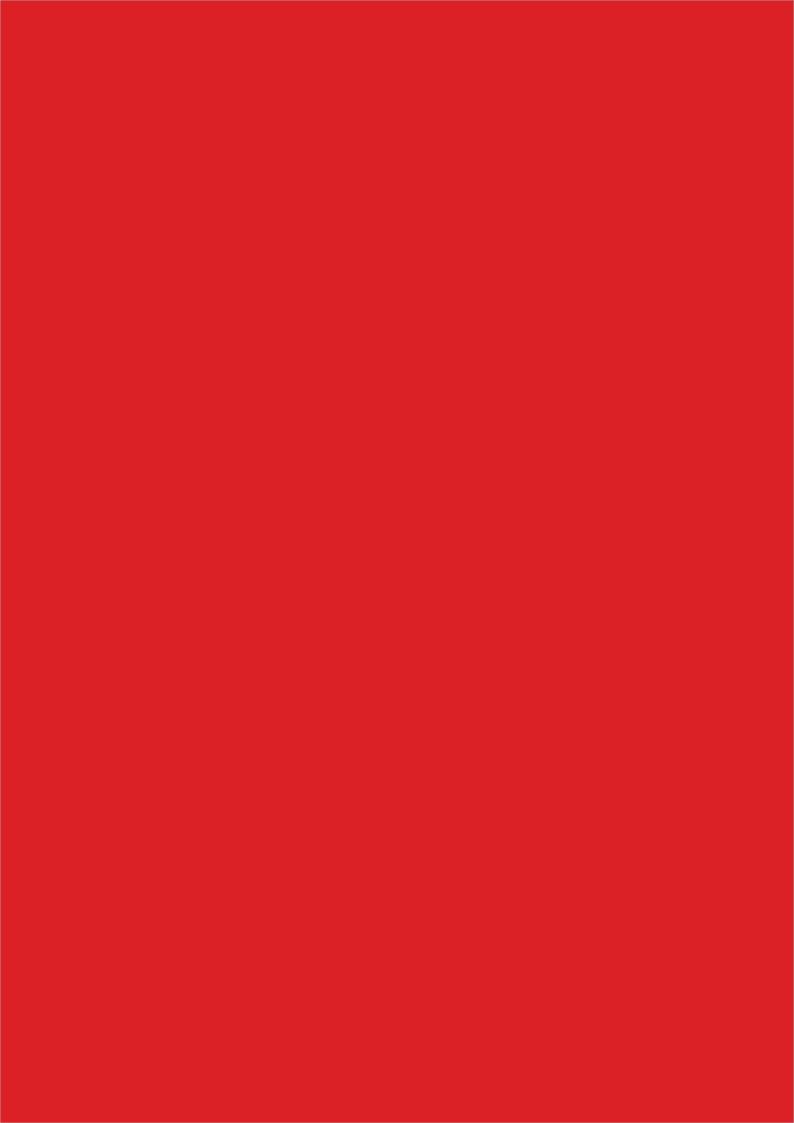
Our vision is to bring the benefits of modern health care including reproductive health care to those who are most in need. We also aim to make quality education accessible to children lacking facilities, for their growth and development, and facilitating livelihood opportunities for socio-economic development of deprived communities.

What we believe in / Organizational Ethics

WHP is bound by strong ethical considerations, which gives us strength and guidance to do what we aim for and which help us create new pathways in the sphere of public health, education and community empowerment.

- **Benchmark:** Our constant effort is to create new standards in the area of quality healthcare service delivery and digital learning
- Transparency: We have a robust and systematic mechanism for communication and information sharing
- **Efficiency:** We focus on optimum utilization of resources by building evidence-based strategies and ensuring cost-effective beneficial service delivery
- **Scale up with sustainability and equity:** We understand our responsibility towards people for whom we are working hence strive towards institutionalization and sustainability of our initiatives
- **Entrepreneurship development:** We work to develop innovative and efficient health service models utilizing local resources that are meaningful and easily accessible to the community



















Administrative Office: A-151, Sector 72, Noida, Uttar Pradesh - 201301

Registered Office: F-48, Kadambari Farms, Radhe Mohan Drive, Fatehpur Beri, New Delhi - 110 074, India

Write to us on: info@whpindia.org



www.worldhealthpartners.org





