



**ANNUAL
REPORT
2021**

THE YEAR OF
CHANGE

| THE
PANDEMIC
YEAR

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FOREWORD FROM THE PRESIDENT

Surviving the pandemic, individually and collectively, was challenging enough. To re-engineer well-established healthcare delivery programmes within a short span of time to help millions survive the calamity was a once in a lifetime event that will stay in the memory of our organization for many years to come.

As the viral waves ebb and the infections seem to be coming under control, it also gives us some satisfaction that we as an organization could contribute to such a mammoth national effort. It also taught us valuable lessons in coordination, prudent use of resources, and forging mutually beneficial relationships to collectively deal with the disaster.

This report provides an overview of the events of the crucial last year when new mechanisms were identified in existing projects to continue to make them work while new initiatives were undertaken to address the special needs that a raging pandemic brought forth.

While I stand with our team to take stock of the events of the year and their long-term impact on the organizational structure, I also place my heartfelt gratitude to the national and state governments as well as donors and partner organizations whose support, trust, and vision were crucial in achieving significant enhancements in the impact of programmes under trying circumstances.

A handwritten signature in black ink, appearing to be 'Gopi Gopalakrishnan'.

Gopi Gopalakrishnan

Founder & President - World Health Partners



MESSAGE FROM THE COUNTRY DIRECTOR

The Annual Report 2021 is an opportunity to document the success and learnings of the efforts that the organisation and its partners have made during this past difficult year. We needed to race against time to re-strategize our operational processes to ensure that people who were in desperate need of care were prioritised in the delivery of services.

The year 2020 was the most trying period in terms of planning and management due to the inherent uncertainties caused by the pandemic. Our ability to achieve goals and to energetically move strategic projects forward was solely due to the tremendous work and the unbelievable commitment of more than 400 employees. Many of them even contracted the virus due to their work exposure. While WHP made every effort to safeguard the wellbeing of its employees and their families, I would like to place on record our gratitude for making our accomplishments possible.

It was gratifying to learn during the pandemic that the organisation had set the right strategic priorities many years ago and so could rise to face the challenges. We continued the efforts to strengthen our health programmes by harnessing the relationships we had established in the past to work together with state and federal governments; 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 programmes to continue meeting community needs during social distancing measures and lockdowns.

Above all, we maintained:

- Focus on digitisation and the investments made in tele-medicine and tele-counselling platforms
- Improvisation of our programming models to align with reduced resources during the pandemic, and continued systematic training and orientation programmes for our staff and community members through a variety of channels that made use of our digital competencies

We acted with determination and hope to have laid the best-possible foundation for a successful future. The Annual Report provides an overview and we hope you will find it interesting and insightful.

Prachi Shukla

Country Director, India - World Health Partners

WORK LANDSCAPE DURING THE PANDEMIC YEAR

Extraordinary situations demand innovative responses. We used this principle to adapt, steer, and manage our programmes during the vacillating COVID-19 situation in 2021 and used our resources and expertise to support the fight against COVID-19 while continuing the core health interventions.

Global Impact: At the global level, we have partnered with multiple agencies to accelerate COVID-19 awareness, vaccination, hygiene, and behaviour change and advocate for equitable access to critical COVID-19 tools and interventions.

Local Impact: Locally, we partnered with the national and state governments, and health ministry and departments to establish emergency operations; to advise on medical consultations, testing, treating, and managing the outbreak; to train health workers; to stand up digital and data systems that support real-time disease surveillance; to plan for COVID-19 vaccine introduction; and much more.

Sustained Intervention: Despite the worst challenges from COVID-19, we worked towards our aspiration of creating a supportive and inclusive environment, fostering synergy between demand and supply for quality health services, and creating awareness among the larger community about the interlinkages between health and quality of life. These reinforced our commitment to devise feasible strategies for sustaining our primary health care interventions for the marginalized. Irrespective of the challenges, we took forward our core work and started community-based interventions to strengthen the fight against the detrimental impact of COVID-19 on people's overall health.

Core Thematic Domains



Teleconsultation and telemedicine



Tuberculosis treatment and follow-up



Mental health screening and counseling



Family planning messages



Gender issues



Hand hygiene awareness

Presence and Reach



10+ States where WHP works



300+ staff working towards improving health care scenario every year



50 million+ lives saved/improved



PROJECT INTERVENTIONS IN 2021



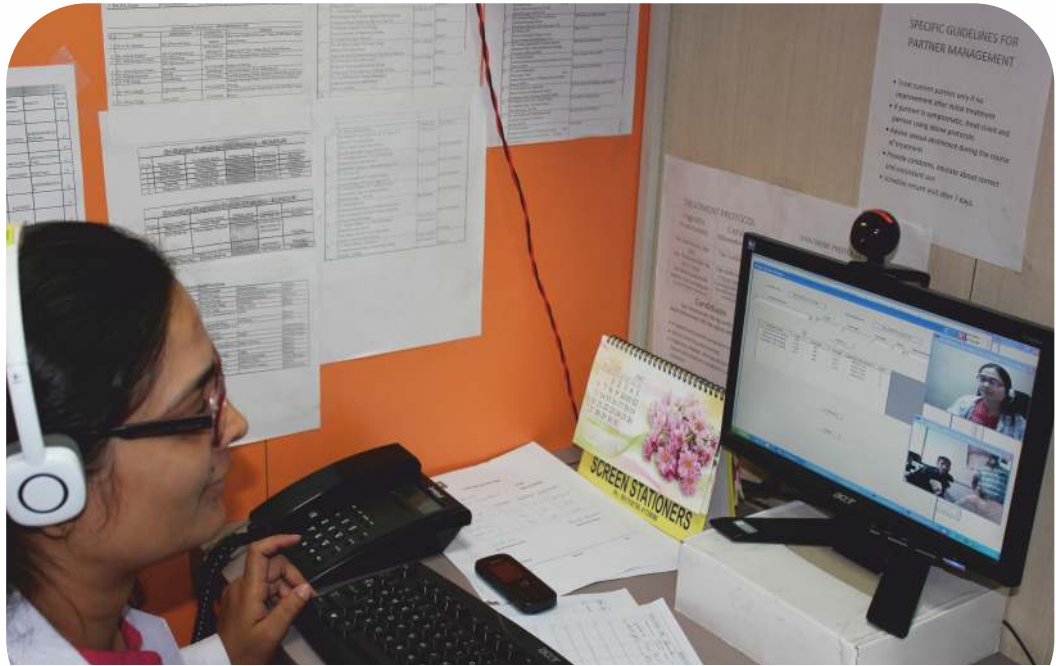
A Community Health Officer referring a presumptive TB Case for free X- Ray under the project - Closing the Gaps in TB Care Cascade

REDUCING GAPS IN TUBERCULOSIS SERVICES

Guided by Access, Quality, and Equity of Tuberculosis (TB) care, we build on demonstration models by employing five cross-cutting solutions to overcome and address care cascade gaps to support the vision of Government of India's 'TB-Free India'. The core work focused on increased case-finding, improved access to free anti-TB treatment in the public and private sector, adherence management and recurrence-free survival of patients for improved treatment outcomes, and

strengthened health systems and capacities of healthcare workers to coordinate the care cascade.

We work with the central and state governments and other partners to establish and demonstrate scalable models. During the lockdown, WHP helped health facilities to provide counselling and treatment support to more than 68,972 TB patients and their families to ensure optimum care and treatment.



Digital platform that helped easy facilitation of Doctor and patient face-to-face interaction, teleconsultation and telemedicine during COVID-19

ADDRESSING PANDEMIC LED MENTAL HEALTH AND GENDER-BASED ISSUES

The prolonged pandemic severely impacted people's mental health resulting in increased trauma, distress, and anxiety to an extent that it has been termed as a 'Parallel Pandemic'. Credible studies and data have confirmed an evident surge in the incidence of gender-based violence during this period. . WHP leveraged its expertise with tele-medicine and tele-counselling platform and introduced a toll-free number-8010111213 to provide early screening and management of mental health issues and vulnerabilities of gender-based violence identified among COVID-19 affected individuals, their families, and the general population. Care, treatment, and referral support services were focused to provide

end-to-end support to the affected.

In a period of six months from June till December 2021, 16,456 individuals were identified with some MH issues and 11,249 people vulnerable to gender-based violence.

Sensitizing the community on practicing COVID-19 appropriate behaviour and getting vaccinated, advocacy with government health officials, and engagement with frontline workers were a few activities intertwined in the project. These not only supported the intervention but gave momentum to the government's agenda for universal vaccination and awareness on COVID-19.



Consistent engagement with private service providers for TB patients notification

GOVERNMENT SUPPORTED TUBERCULOSIS PROGRAMME

The Patient-Provider Support Agency (PPSA) project funded by the State Government of Bihar, Punjab, and Odisha focuses on setting up effective and sustainable structures to strengthen existing systems and seamlessly extend quality TB care to patients seeking care in the private sector. The key objectives of the project include increasing case notifications, facilitate direct benefit transfer (DBT), improve drug susceptibility testing (DST), report successful treatment adherence and outcome, conduct HIV diabetes mellitus (DM) testing, and facilitate linkages for drug-resistant TB (DR-TB) treatment and HIV services.

Other operational steps include mapping and engaging private-sector providers, laboratories, chemists, sputum transportation services. Facilitating linkages between service providers and patients under National Tuberculosis Elimination Programme (NTEP) schemes (such as Nikshay Poshan Yojana and incentives to providers), and ensuring the supply of Government procured drugs and facilitating incentives given by NTEP to the private sector doctors and patients.

Despite COVID-19 and lockdown, all three PPSAs started on an encouraging note and in 12 months have achieved 36,039 (79%) notifications against the target of 45,643.



Effort to address the health related needs of vulnerable seasonal migrants

CREATING AN URBAN HEALTH ECOSYSTEM FOR URBAN POOR AND VULNERABLE

Population influx to urban centres and availability of quality and accessible health services have remained discordant in India. The Samagra Project strives to bridge this gap by creating an urban health ecosystem that is responsive, affordable, and equitable, and which provides quality preventive, promotive, and curative primary health care to the urban poor, especially women, girls, and other vulnerable population.

The objective of the project is to promote increased use of modern contraceptives, increase case detection for TB and multidrug-resistant TB (MDR-TB), and

improve maternal and child health (MCH) care coverage by including antenatal care (ANC), intra-natal, and postnatal care (PNC) along with improving immunization rates. The project overachieved its estimated target through its strategic interventions involving household mapping, engagement with private service providers, capacity building of human resources, counselling for family planning and MCH services, sensitization and screening for TB, and sensitization and screening for COVID-19 through free tele-counselling and tele-consultation services.



A client accessing the long-distance consultation services from the doctor at one of the 'Sky Centres'

ENTREPRENEURS' NETWORK FOR PRIMARY HEALTHCARE TO RURAL COMMUNITIES

Primary health care is the backbone of any health system. It is at this level where increased investment and improvement in accessibility, availability, and quality are needed the most — not only to prevent and manage diseases but also to protect against future outbreaks.

To optimize local resources and available infrastructure, WHP's 'Entrepreneurs Network' is its earliest technology-driven initiative for making primary healthcare accessible to rural communities in the poorest parts of India. The operational model has leveraged local inhabitants as entrepreneurs, well versed with their areas

to identify clients and their needs and expertise of city doctors for providing real-time consultations.

Also known as 'Sky Centres', this initiative began in 2009 and was successfully implemented from 2011 to 2018 with external support. The project faced sustainability issues once the donor support was over. Based on its past learning and better availability of internet services, WHP is re-approaching this model, using the scale for sustaining without external assistance. A small fee is charged to keep the value of the network intact and ensure entrepreneurs are accountable.



A middle-aged man receives oxygen at a centre in a slum area.

COVID-19 EMERGENCY RESPONSE: OXYGEN MANAGEMENT AMONG THE VULNERABLE

Lack of oxygen when COVID-19 peaked in 2021 severely threatened thousands of lives. WHP's 300 oxygen HUB and SPOKE Centres across eight districts in Bihar and five slum pockets each in Delhi and Ahmedabad served as a first line of management for breathlessness and low oxygen saturation due to COVID-19 and respiratory illnesses.

These centres, supported under Jump Trading Corporate Social Responsibility, are equipped with Oxygen Concentrators, Pulse-Oximeters, and COVID-19 self-antigen test kits. During the pandemic, these centres helped the local population in COVID testing and management of respiratory problems through oxygen administration, apart from availing tele-consultation and tele-

medicine services from qualified doctors.

Communication campaigns through customized vans using audio promotion and leaflet distribution increased the number of people visiting these centres, especially the senior citizens who are vulnerable to breathlessness and need prompt treatment.



A mother helping her child receive oxygen at a centre near her home in Karawal Nagar, Delhi



Promotion of hand hygiene in the community through IEC Van in Ahmedabad

FIGHTING COVID-19 THROUGH AWARENESS ON HYGIENE BEHAVIOUR CHANGE

Hand and surface hygiene are simple ways for effectively containing the spread of COVID-19. However, poor access to hand-washing facilities and lack of proper information and understanding of hand hygiene practices exposed millions of people to the dangers of the virus during the pandemic.

The Hygiene Behaviour Change Coalition project addressed these challenges in the unhygienic and overcrowded slums of North-East Delhi and 15 Municipal Wards of Ahmedabad by reaching out to the vulnerable population with messages on cleanliness.

During its intervention in 2021, a total of 336,891 beneficiaries in Delhi and 420,095 people in Ahmedabad were reached through inter-personal communication, social media, and mass media to spread the

word on hygiene practices. Live demonstrations on hand hygiene and handwashing steps were done to minimize contracting COVID-19.

Rapport building with important government functionaries from the district down to the Primary Urban Health Centre and capacity building of frontline workers, 178 in North-East Delhi, and 185 in Ahmedabad, helped in the smooth implementation of the project.



Hand-washing steps being demonstrated during a household visit

STORY FROM THE FIELD

Sustained counselling helps to overcome anxiety and depression of a TB patient

Amit Kumar's life changed when he was diagnosed with Tuberculosis. "I wasn't supposed to get Tuberculosis" - with loss of hope and appetite Amit was severely depressed to continue his job.

Mental illness is highly prevalent among TB patients and associated with reduced treatment-seeking and adherence. Subsequently, it results in higher morbidity, mortality, transmission, and drug resistance.

A resident of Katchi Basti, Ranchi, Amit had a private job to support his family. One day on his way back from work, he felt a sudden burst of chest pain, which subsided soon after; hence he simply ignored it thinking it was not serious. After a few days, he began coughing which gradually became severe and discomforting. He lost his appetite and became weak. Without ignoring it any further, he consulted a doctor who suggested he should get an X-ray done. The X-ray result indicated that Amit had a TB infection. The doctor prescribed him a few medicines and referred him to the Sadar Hospital, Ranchi, for sputum microscopy. This test too confirmed he was TB positive.

When asked why he delayed the treatment, Amit with an astonished look and fear explained, "I thought it must be something related to acidity. It was shocking for me to hear that I had contracted TB as I had never thought I can get infected with it." For him, the matter of

concern was the six month long treatment regimen, which he would have to follow. After starting the medication, things turned out to be worse. He vomited each time he took the medicine on an empty stomach. As a result, his appetite dropped.

Piu Naskar, the Care Coordinator under the project 'Closing the Gaps in Care Cascade' (CGC) came in contact with Amit during the field visit. The project not only supports TB patients in getting care and treatment but also provides mental health counselling and referral services to patients undergoing treatment. Psycho-social symptoms, depression, loneliness, anxiety, and low self-esteem are very common among TB patients. Piu Naskar developed rapport with Amit and cautiously assessed his mental health status. He reported mild mental health symptoms. She counselled him and suggested few activities to reduce his stress and anxiety with meditation and deep breathing techniques and how to take medicine safely over the four session counselling. The outcome has been positive for Amit as he feels much at ease with himself.



Piu Naskar in conversation with Amit

IMPACT ON PEOPLE'S LIVES

In 2021, we positively impacted the lives of a significant number of people by reaching out through our health interventions. Few services/indicators that benefitted the people are as below.



20,158
Cumulative
Teleconsultations



47,016
TB patients
diagnosed and
on treatment



15,396
TB patients enrolled for
Treatment Adherence
using various
technologies



42,640
TB patients
with successful
treatment outcome
followed up



5,417
i-Smart free
chest X-ray
services with
AI intervention
accessed



23,069
Mental health patients
provided counselling
and referral services
(TB and COVID-19)



11,249
People vulnerable
to gender-based
violence identified



89,210
People reached
with messages
and referral for
MCH services



268,572
Family planning
(messages, referral
and services)

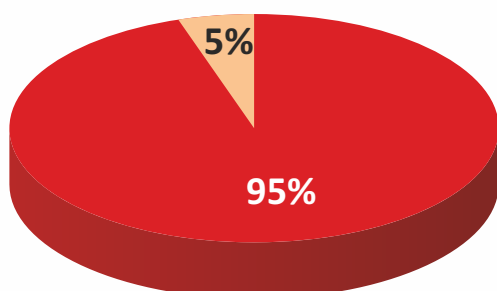


15,500
WHP service
provider network
in India

FINANCIALS (APRIL 2021-MARCH 2022)

Revenue

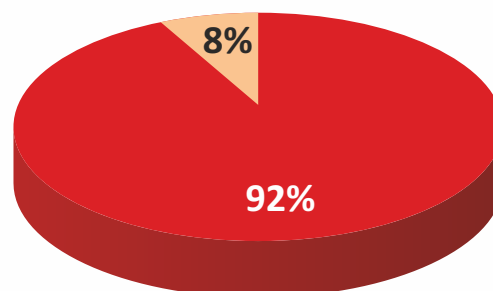
Our total revenue in 2021 was USD 51,36,080. The below chart provides a break-up of the source of revenue.



■ Grants and Contributions ■ Others Income

Expenditure

Our total expenditure was USD 49,04,683 in 2021. The below chart shows that we have utilised maximum revenue on our programmes.



■ Program Expenditure ■ Administrative

PARTNERSHIPS

Donors

- State Government of Bihar
- State Government of Punjab
- State Government of Odisha
- United States Agency for International Development (USAID), Regional Office of Acquisition and Assistance
- 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)
- Indian Institute of Public Health, Gandhinagar
- Hospital for Mental Health Ahmedabad (HMHA).
- Everwell Health Solutions
- Harvard Medical School
- Leapfrog to Value

ABOUT WORLD HEALTH PARTNERS

The genesis and our journey so far

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 care to equip the community with appropriate knowledge and understanding and curative care to ensure that they do not remain deprived of basic healthcare services. We understand that this is a mammoth task, and treading alone will not help achieve our aspiration. We, therefore, strive to creatively use all public and private resources available and work in synergy with the public health institutions and private service providers in implementing our projects. Our programmes create an entire ecosystem of healthcare, and the solutions for each constituent are built on the human aspects of the user by factoring in medical, social, educational, religious, and financial aspects of their environment. The ensuing structure becomes robust enough to handle a range of products and services, which is needed to create volumes that are essential for reducing the cost of delivery.

WHP started its operation from three districts of western Uttar Pradesh and later expanded its work to various states in India. The organization's initial intervention focused on tele-consultation and tele-medicine. Currently, it is delivering health services in more than 50 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.

Being a service delivery organization, we have a model that encompasses trained and networked providers that deliver most services on their own while the technology solutions play a supplementary role for referral to connecting experienced doctors in cities. Together, this approach has created easy access to good quality healthcare and reproductive healthcare covering a range of services including family planning, maternal health, and treatment for tuberculosis and childhood illnesses. We have started the intervention for mental health screening and counselling among TB and COVID-19 affected survivors and reached out to a significant number of people.

The projects of WHP gained support from donors, bilateral agencies, and implementers who saw value in our work. The support base grew with time, reinstating our belief in what 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 ensure responsible scalability and sustainability of our programmes. This has prompted us to explore model programmes 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.

In the coming year, we plan to make our programmes more inclusive, diverse, and integrated by reaching out to the fringe population such as the transgender and people with disabilities.

Mission

World Health Partners' mission is to provide health 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.

What we believe in/Organizational Ethics

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

- Benchmark - Our constant effort is to create new standards in the area of quality healthcare service delivery
- 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 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





WORLD
HEALTH
PARTNERS
HEALTHCARE WITHIN WALKABLE DISTANCE



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