

# A scalable model for tribal health transformation: Digitally empowered, locally led

A collaborative initiative by Keshav Srushti and district authorities combines grassroots mobilisation with digital tools to build a sustainable, community-owned health system





Working with community members reduces resistance and builds trust. It's sustainable and cost-effective

# **Dr Suresh Saravdekar**

Project Head - Keshav Srushti Gram Swasthya Project

India's tribal regions continue to face long-standing challenges in health equity. Palghar, Maharashtra, home to 37.4 per cent Scheduled Tribe population, exhibits some of the country's starkest indicators: high child mortality, chronic under-nutrition, low female literacy, and inadequate access to primary healthcare. All this results in no actual health data and no proper plans for effective health security.

To address these issues systematically, the Keshav Srushti Gram Swasthya Yojana, in collaboration with District Health Authorities, has rolled out the Keshav Srushti Atmanirbhar Gram Swasthya Project across 50+ tribal villages over the past two years. The project focuses on sustainable health security by leveraging local human resources, community participation, and digital innovation.





### The Gram Swasthya Model: Five key verticals

The model is implemented through five integrated verticals under two broad categories:

# Part 1: Disease detection, treatment and support

• **Digital health locket and Mapping:** Each household is mapped and issued a Digital Parivar Swasthya Card, embedded in a wearable

QR-coded health locket. This enables early detection, digitisation of health records, and emergency access to medical history. Preparation of two geo-tagged health maps of villages i.e. basic facilities available and the disease profile of the village

- Health security and referral services
  - a) basic emergency treatment and referrals to tertiary care (e.g., JJ





Hospital Mumbai, Vedanta Hospital Dahanu) are provided.

b) Through Gram Swasthya Suraksha Bima Yojana free medicines and investigations are provided to all patients in a village, facilitated with a small contributory fund from villagers

• Tele-consultation services: Remote villages are connected to city-based doctors via Google Meet, facilitated by QR scan access to patients' digital health data.

# Part 2: Disease prevention through health promotion and education

- Star health grade cards for children (5-12 years): Children are assessed on four physical growth markers and one biomarker (haemoglobin), scoring up to 20 stars. Nutrition interventions and IFA supplementation are delivered accordingly. Parents educated on proper diet.
- Adolescent girls' awareness and Education on women's health: Topics include menstrual hygiene, maternal nutrition, family planning, and social media literacy delivered weekly by trained female members of the Swasthya Rakshak Dampatis. The free sanitary napkins are delivered to adolescent girls in 26 villages.



# Core enabler: The Swasthya Rakshak Dampatis (SRDs)

Community participation is enabled by deploying educated couples from the same villages - known as Swasthya Rakshak Dampatis. They receive hands-on training in:

• Digital diagnostics and screening (diabetes, anemia, hypertension)

- Health education and data entry
- Preventive care, first aid, and sanitation practices
- Tele-consultation service facilitation

They prepare and maintain the Digital Family Health Card, two Village Health Maps, and coordinate all verticals in their localities.

# **Current Team of Swasthya Rakshak Dampatis**



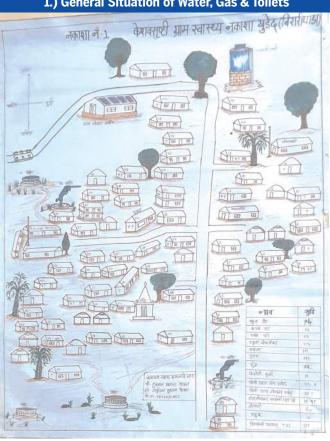
# **Highlights and innovations**

- **Health locket:** Enables rapid diagnosis, reduces duplication of tests, and improves continuity of care during referrals and emergencies.
- Teleconsultation: Currently operational across 45 villages, with weekly virtual clinics led by specialists such as Dr. Preeti Patil from Wada.
- Village mapping and GPS dashboards: Enables cluster-based planning for NCD hotspots, vaccination gaps, and sanitation

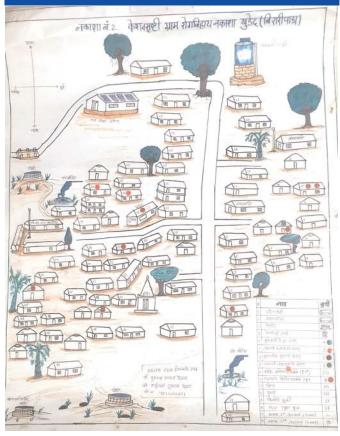
#### improvement.

- Purified drinking water program: Boiling, sachet-based filtering, and TDS monitoring campaigns, led by children and youth.
- First-aid kits and primary care training: Emergency response for fever, animal bites, dehydration, burns, etc., taught at the household level.
- Educational tools: Marathi-language comic books on menstruation and women's health distributed to 2,000+ adolescent girls.

# Preparation of Health Maps of a Village 1.) General Situation of Water, Gas & Toilets



# 2.) Health Map- Mapping & Marking of all homes for diseases & Vaccination







### **Case studies**

#### Digital access saves a life

A farmer from Vikramgad collapsed in his field. His Health Locket revealed a history of hypertension when scanned at the clinic. Treatment was initiated promptly, avoiding complications.

### Chhaya's health journey

8-year-old Chhaya scored 4/20 on her Star Health Card. After two

months of nutrition (MDD sweets by ISKCON) and IFA treatment, followed by parental education, her score rose to 18/20.

#### Adolescent health dialogue

Girls from 21 villages are now participating in weekly education sessions on menstrual hygiene, puberty, and digital safety. The initiative has helped break social taboos and improve hygiene behaviour.

## **Gram Swasthya Suraksha (Village Insurance Model)**

A voluntary contributory model collects small amounts ( $\Box 100$ - $\Box 500$ ) from each household. This fund supports:

- Free medicine for BPL families
- Nutrition kits for malnourished women and children
- Water purification units
- Shared ambulance and driver costs for nearby village clusters In KatkariPada (Pimplas), the model is already operational since May 2025 ,with full village participation and donor support.



# **Recognition and scalability**

- National recognition: Best CSR Initiative / Public Awareness Award (India)
- International recognition: One Asia Creative Award (2023)
- Knowledge transfer: Dindayal Research Institute (DRI) has replicated the model in 550 villages of Madhya Pradesh

Key Impact Metrics (2022-2025)	
Metric	Value
Villages covered	46+
Children with Star Health Cards	1,000+
Tele-consultations conducted	20+(Just started in
	May 2025)
Health lockets distributed	1000+
SRDs trained and active	92+ (46 couples)
Adolescent girls reached	1000+
Free Sanitary Napkin Distribution	26 Villages



• Collaborations: With ISKCON, Menstrupedia, P&G, MAD Foundation, Maharashtra DHS

## Conclusion

The Keshav Srushti Gram Swasthya Project combines community-led health mobilisation, digital transformation, and cross-sectoral partnerships. With measurable success across disease prevention, data integration, and health education, the model offers a scalable blueprint for addressing rural and tribal health inequities.

### Contact

## Dr. Suresh Saravdekar

Project Head - Keshav Srushti Gram Swasthya Project Former Assistant Director - Ministry of Medical Education & Health and Honorary Consultant- Institute of Medical Sciences , Banaras Hindu University (BHU), Varanasi  $saravdekarsuresh@gmail.com/+91\,98191\,52566$ 

5

#### Mr. Bimal Kedia

Convener - Keshav Srushti & Head Gram Vikas Project

#### **Brandcare Medical Advertising & Consultancy**

Thane Maharashtra- IT consultant