

DHWANI

Inform | Inspire | Influence

OUR ACHIEVEMENTS

80 new Mobile Medical Units (MMU) vehicles for our Sanjeevani Village Health Outreach Program (VHOP)



WHAT'S INSIDE

- [Insights from Leaders](#)
- [Swasthya Connect](#)
- [DigiFrontline](#)
- [From the Heart](#)
- [Our Achievements](#)
- [Media Corner](#)
- [About Us](#)



Watch this video from our successfully completed SPARSHA project in Arunachal Pradesh and Assam — showcasing how our Mobile Medical Units (MMUs) brought quality healthcare to communities in some of India's most remote areas.

Click on the picture to watch the complete video



HOW AI CAN TRANSFORM PUBLIC HEALTH IN INDIA

By **Ravi Trivedi**, Chief Digital Officer
Digital Bharat Collaborative

India stands at a pivotal juncture where artificial intelligence offers unprecedented opportunities to reimagine public health delivery. With 1.4 billion people, chronic physician shortages, and disease burdens spanning tuberculosis to diabetes, the question is not whether AI will transform India's health system, but how strategically it can be deployed to create equitable, proactive, and resilient public health infrastructure.

From Reactive to Predictive Healthcare

The most transformative potential of AI lies in shifting India's healthcare model from treating disease to preventing it. AI-driven predictive analytics can analyze vast populations across demographics, lifestyle patterns, clinical history, and environmental data to identify high-risk individuals before symptoms emerge. This capability is particularly crucial for India's non-communicable disease burden, where early intervention can prevent millions from progressing to severe illness. Generative AI is accelerating this transition by enabling clinical decision support systems that assist physicians in real-time. Healthcare workers in rural clinics can now receive AI-generated prompts and alerts that flag early warning signs of conditions like prediabetes or hypertension progression. A mid-size clinic in Pune that implemented AI-based predictive analytics found increased patient adherence to chronic care plans by 32% while reducing unplanned emergency visits by 45% within 4 months.

Democratizing Specialist Expertise Across Geographies

AI-enabled diagnostic tools are making specialist-level medical analysis accessible to India's 65% rural population. Predictive models for diabetic retinopathy detection, tuberculosis screening, and maternal-child health monitoring are scaling across remote clinics without requiring expensive infrastructure or specialist presence. When integrated with telemedicine platforms like eSanjeevani, these tools enable rural health workers to conduct screenings and transmit results to urban specialists within minutes, fundamentally reshaping the geography of healthcare access.

Building Digital Infrastructure: The AMRIT Example

Open Platforms like AMRIT (Accessible Medical Records via Integrated Technologies), developed by Piramal Foundation, demonstrate how AI-ready digital infrastructure can scale public health delivery across India. AMRIT has reached over two crore beneficiaries across 16 states and 46+ facilities, equipping frontline health workers with comprehensive digital tools. The platform's embedded Clinical Decision Support System helps healthcare workers improve diagnostic accuracy and treatment plans at the point of care. At the same time, its offline functionality ensures uninterrupted service delivery in connectivity-limited rural areas. Critically, AMRIT's compliance with global health data standards (SNOMED CT, HL7, LOINC) and its integration with ABHA card generation create an interoperable foundation for AI applications—enabling seamless data flow, predictive analytics, and population health management at scale.

Real-Time Disease Surveillance and Outbreak Prevention

Health Sentinel, developed by Wadhvani AI for India's National Centre for Disease Control, exemplifies AI's transformative power in public health surveillance. Since deployment in 2022, this tool has identified over 5,000 potential infectious disease outbreak clusters in real-time by scanning millions of social media posts, online reports, and news sources—work that previously required 98% more manual effort by human epidemiologists. The system detected a 150% increase in published health events compared to pre-AI years, revealing disease signals that traditional surveillance would have missed entirely.

This "human-in-the-loop" approach—where AI identifies patterns and epidemiologists validate findings—balances technological speed with expert judgment, ensuring actionable accuracy rather than algorithmic overreach.

Breaking Data Silos for Integrated Care

The Ayushman Bharat Digital Mission, now encompassing over 797 million digitized health accounts, creates the foundational layer for AI's transformative potential. Federated learning approaches—where AI models train across decentralized datasets without exposing individual patient information—allow India to improve diagnostic accuracy while safeguarding privacy. This interoperable health data ecosystem enables population-level insights that individual hospitals cannot generate, supporting resource allocation, policy design, and personalized prevention strategies.

Workforce Multiplication and Efficiency

Rather than replacing clinicians, AI augments their capacity. Administrative burden—documentation, prescription filling, appointment scheduling—can be automated, freeing physicians to focus on complex clinical reasoning and patient care. In under-resourced regions, this multiplier effect is transformative: one physician equipped with AI decision support becomes effectively more productive than several without such tools.

The Path Forward

As per a report from IMARC group, India's healthcare AI market's projected to grow at a 30% CAGR to \$4.1 billion by 2033, reflecting accelerating adoption. However, realizing AI's full transformative potential requires addressing current implementation barriers: infrastructure gaps, algorithmic bias, data quality concerns, and professional resistance. Strategic priorities include robust IT infrastructure investment, comprehensive clinician training, and governance frameworks ensuring accountability and transparency. India's emerging model—blending public digital infrastructure with public-private partnerships, maintaining human expertise in decision-making, and prioritizing equity—offers a template for low- and middle-income countries globally. When implemented thoughtfully, AI doesn't just improve individual health outcomes; it fundamentally restructures how nations deliver public health at scale, speed, and equity.

About Ravi Trivedi

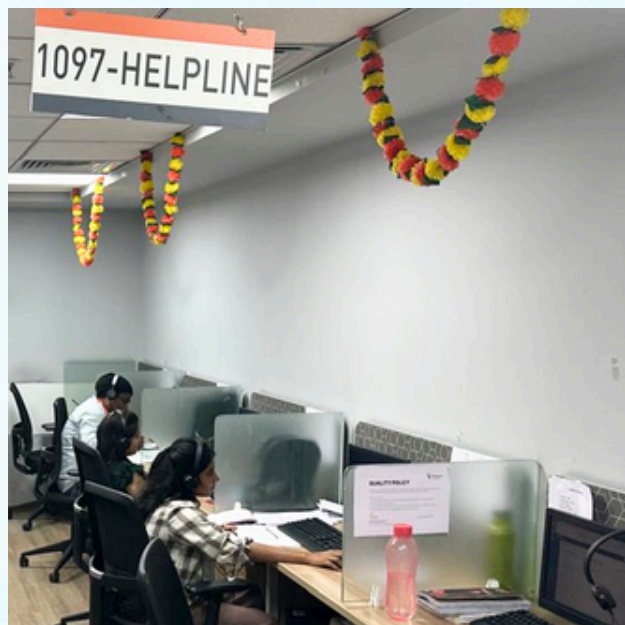
Ravi brings 25+ years of global experience in entrepreneurship, investing, and product leadership. Post a successful startup exit, he served as an Indian Administrative Fellow and now mentors startups and non-profits, driving AI and innovation for social impact.

1097 National AIDS Helpline: India's flagship support program for HIV/AIDS

The 1097 National AIDS Helpline stands as India's pioneering national service for comprehensive information and support related to HIV/AIDS and sexually transmitted infections (STIs). Launched on World AIDS Day in 2014 by the National AIDS Control Organization (NACO)- a division of Ministry of Health and Family Welfare, this crucial initiative is implemented in partnership with Piramal Swasthya.

A core strength of the 1097 Helpline is its commitment to nationwide accessibility. The service operates round-the-clock (24x7), ensuring help is always available. Managed by four strategically located call centers in **Hyderabad, Jaipur, Guwahati, and Chandigarh**, the staff provides nationwide coverage and is equipped to assist callers in 16 different languages, effectively addressing linguistic barriers to seeking health information.

The helpline offers a full suite of services, including expert information, confidential counselling ensuring anonymity, and essential referral services for testing and treatment. It also functions as a resource directory and a system for grievance redressal.



Since its inception, the 1097 National AIDS Helpline has made a profound national impact, successfully aiding



Sehat OK Please: Enhancing NCD screening in remote areas of Maharashtra

Piramal Swasthya, in collaboration with the French multinational pharmaceutical company Sanofi, initiated the impactful mobile healthcare project titled 'Sehat OK Please.' Launched in February 2022 and currently operating in its second phase, this initiative uses a dedicated fleet of Nurse Led Mobile Medical Units (MMUs). The project utilizes 21 MMUs across ten districts of Maharashtra to bring health services directly to underserved communities.

The primary focus of 'Sehat OK Please' is the screening of beneficiaries aged 30 years and above for major Non-Communicable Diseases (NCDs), including diabetes mellitus, hypertension, and oral cancer. This new phase elevates the strategy by prioritizing health education and behavior change activities to foster sustained health-seeking behavior among populations previously with poor health literacy regarding chronic disease risks.

By facilitating early diagnosis, conducting essential health education efforts, and establishing robust referral linkages for follow-up care, the program ensures continuity of treatment. This integrated approach has enabled the project to deliver substantial impact, **servicing more than 1.06 million beneficiaries since its inception.**



Digital Health Push: mASHA application Adoption in Gaya Rises from 7.33% to 25.98%

Digital health adoption in Gaya district has gained strong momentum, with mASHA application usage **rising from 7.33% in March 2025 to 25.98% by September 2025**.

A field visit at HWC Lakhibagh highlighted notable progress in household and beneficiary registration through the BHAVYA mASHA (ASHA) application, reflecting the district's advancing digital transition. The visit also reviewed the continuum of care and seamless data flow across digital platforms, reinforcing efforts toward an integrated and efficient public health ecosystem.



Chhattisgarh Empowers Mitanins Through Digital Training



52 Mitanins from Mahasumund and Baghbhara trained on the Mitadin app with support from Piramal's Ops and DigiFrontline COE teams. Despite progress, 31% need continued handholding. Experts stress involving KFs in CCC to drive deeper digital adoption and strengthen grassroots health delivery



Meet Muni, our former **Karuna Fellow**, who shares how the fellowship journey supported her grow and discover herself.

Click on the picture to watch the complete video





DRIVING LAST-MILE DRUG DELIVERY THROUGH INNOVATION: BIHAR'S 3PL SUCCESS STORY

By Dr. Durbha Rohini Kumar, Program Director and Subhadarshi Routray, Senior Program Manager, Digital Bharat Collaborative



Collaborating for a Healthier Bihar – Innovation on Wheels
Transforming healthcare access through logistics excellence and collaborative governance.

The Challenge: Reaching Every Health Facility

Ensuring uninterrupted access to essential medicines across Bihar's vast and varied geography has long been a formidable challenge. Remote locations, limited transport capacity, and manual tracking systems often delayed delivery to Health & Wellness Centres and Sub-Centres—impacting both healthcare providers and patients.

The Collaboration: Innovation through Partnership

Recognizing these systemic gaps, the State Health Society Bihar (SHSB), in collaboration with the Piramal Foundation (PF), embarked on a journey to transform medicine distribution through innovative logistics interventions. What began as a pilot under the AVD Green Channel Initiative in 2020 has now evolved into a statewide, tech-driven model redefining last-mile delivery.

To overcome persistent last-mile supply challenges, SHSB, in collaboration with PF, introduced the AVD Green Channel initiative in 2020 as a logistics innovation to ensure uninterrupted medicine availability at VHSND sites. Building on its success, the initiative was institutionalized under the State PIP and expanded statewide. In 2024, a pilot was conducted to strengthen medicine availability at Health & Wellness Centres and Sub-Centres under Phase II.



Leveraging these learnings, the state adopted an advanced Third-Party Logistics (3PL) model integrating GPS-enabled vehicle tracking with the Drug and Vaccine Distribution Management System (DVDMS). PF collaborated with SHSB to develop PIP proposals for fund allocation and supported the drafting of the RFP for onboarding 3PL services. The model is now self-sustaining, driving efficiency and accountability across the supply chain.

The Impact: From Pilot to Statewide Reform

In December 2024, Bihar took a decisive leap forward with the launch of the "Muft Aushadhi Vahan" initiative—a statewide rollout of the 3PL system, flagged off by Hon'ble Chief Minister Shri Nitish Kumar and Hon'ble Health Minister Shri Mangal Pandey. This initiative integrates technology, logistics expertise, and government oversight to ensure every consignment is monitored in real time and reaches even the remotest facilities on schedule.

Over 180 GPS-enabled vehicles now serve all 38 districts, covering 13,300+ healthcare facilities, directly benefiting more than 3 crore citizens. Early outcomes show a significant growth in medicine availability more than 80% up to lastmile, enhanced transparency, and improved patient trust. Bihar's achievement stands out nationally—Rank 1 on the MoHFW DVDMS Central Dashboard, a testament to visionary governance and collaborative innovation in public health supply chain transformation.

About the Authors

Dr. Durbha Rohini Kumar – Providing strategic leadership in public health procurement and supply chain transformation, driving innovation and system efficiency across programs.

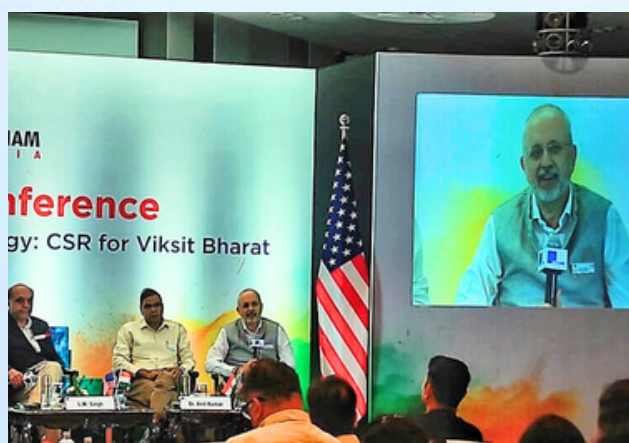
Subhadarshi Routray – Leading key initiatives in public health supply chain strengthening and digital system optimization to enhance last-mile efficiency and service delivery.



We are honoured to **announce that Hon'ble Shri. Himanta Biswa Sarma, CM Assam**, flagged off **80 new Mobile Medical Units (MMU)** vehicles for our Sanjeevani Village Health Outreach Program (VHOP) on October 16.



At the CSR'25 Summit in New Delhi, UNMUKT, our Mobile Medical Unit-based screening and counselling program for Sickle Cell Anaemia – was recognized as a **Winner in the Aarogya Shakti category.**



Our **CEO, Ishmeet Singh**, was invited to speak at AMCHAM India's 9th CSR Conference - 'From Responsibility to Strategy: CSR for Viksit Bharat' where he shared his vision for how technology can drive real, meaningful social impact.



Our Vice President, **Sagar Shukla**, joined a distinguished panel at the national launch of 'The State of Social Protection in India 2025: A Ground Up Report', by SETU - The Social Protection Coalition.



Nirmala Mishra, Sr. Program Director, was invited to speak at the National Conference on Prioritising Patient Safety in Health Institutions, organised by the Ministry of Health & Family Welfare (Delhi) and AIIMS, Mangalagiri.



We are honoured by the faith reposed in us as we ink an **MoA with Bokaro Power Supply Company Pvt Ltd** to continue operating a Mobile Medical Unit (MMU) in the peripheral rural areas of Bokaro for the next three years (2025-28) under the Swasthya Kiran project.

FROM ANGANWADIS TO APPS: HOW NUTRITION COULD DECIDE INDIA'S \$30-TRILLION FUTURE

By **Pallav Patankar**, Vice President, Digital Bharat Collaborative featured in **THE WEEK** on 10th November, 2025



Pallav Patankar
Vice President

India's future economic strength depends not just on infrastructure and industry, but on nourishment delivered to mothers, children, and families at the last mile.

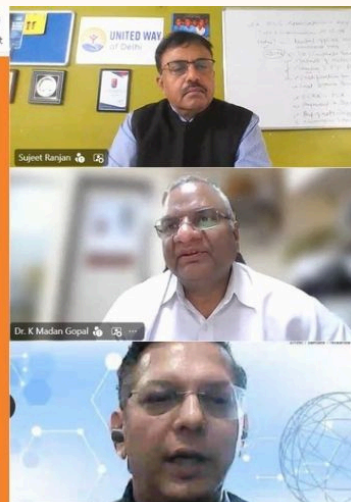
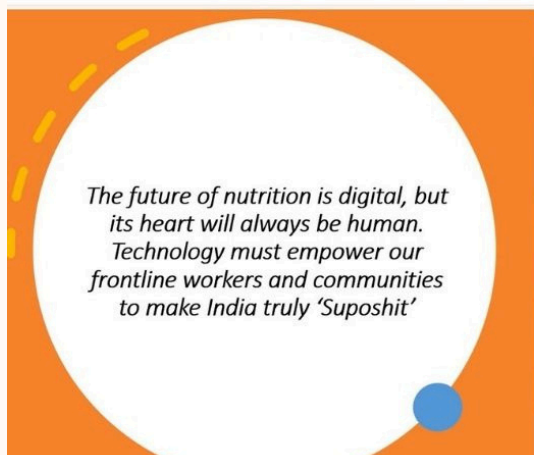
In the late 1960s, India faced a food security crisis. Bold ideas and collective effort gave birth to the Green Revolution, a turning point that, in feeding the nation, transformed its destiny. Today, we stand at a similar threshold.

Our nation's trajectory is being shaped not just in its parliaments or boardrooms, but in its kitchens, anganwadis, and maternity wards. A nourished child learns better, a nourished adolescent dreams bigger, and a nourished mother builds healthier generations. Nutrition, then, is a fundamental question of India's human capital. If we are to become a \$30 trillion economy by 2047, nutrition must be seen as an economic and governance priority.



[Click the photo to read the full article](#)

NUTRITION AT THE LAST MILE



Listen in to the insightful conversation on [Nutrition at the Last Mile](#). The DBC webinar brought together leading experts Dr. Sujeev Ranjan (CEO - United Way of Delhi, a part of Tata Trusts) & Dr. K. Madan Gopal (Advisor - Public Health Administration, NHRSC, MoHFW) threw light on how digital innovation, frontline champions, and data-driven governance can transform nutrition delivery systems.



The Karuna Fellowship journey taught me the power of non-violent communication, which helps me stay calm and focused even in the most difficult conversations.

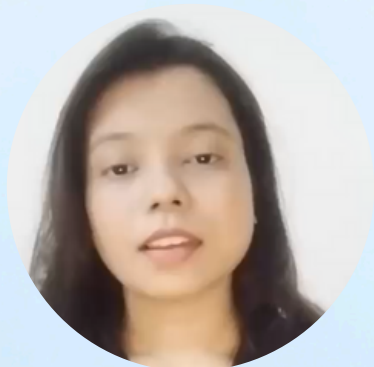
Mamtha Naramoni
Karuna Fellow, Batch-8



During my Gandhi Fellowship journey, I learned about non-violent communication, and it has impacted me both professionally and in my personal life.

Keziah Mathew
Gandhi Fellow, Batch-17

CELEBRATING WORLD MENTAL HEALTH DAY



It's often seen that mental health is neglected during times of chaos, even though these are precisely the moments when support is needed the most.

Barsha Roy
Clinical Psychologist - SARATHI 104



Mental health care must always be an essential part of emergency response, not an afterthought, as emotional well-being is as crucial as physical safety during crises.

Varsha Jaiswal
Clinical Psychologist - SARATHI 104

ABOUT US

Digital Bharat Collaborative is a part of Piramal Swasthya (a subsidiary of **Piramal Foundation**). We are driven by our vision of Building Bharat through acceleration of Information Systems to transform public systems' responsiveness and governance led by women and youth.

We support the government in strengthening the governance of programs and promote data-led decision making. We are committed to enabling equitable access to quality public services for all, especially the underserved populations. With the support of our partnerships, we have touched the lives of over 40 million people at the last mile.

To read our earlier newsletters, [click here](#)

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