



IMPACT REPORT

Q1 FY 2024 - 2025 (April - June 2024)





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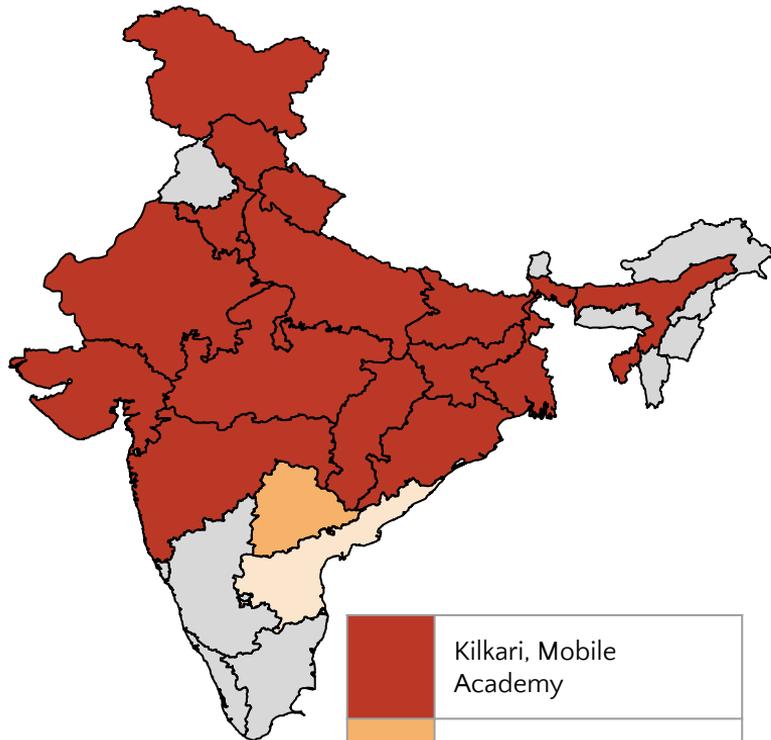
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Growth Overview

- Interventions implemented by ARMMAN have now reached **50+ million women and their children** and trained **409,000+ health workers** across multiple cadres in 21 states till date.
- Mobile Academy is working towards 100% Accredited Social Health Activists (ASHAs) completing their course across states. **This quarter, 100% ASHAs in five districts of Chhattisgarh have completed the Mobile Academy course.**
- **Almost 1,000 health workers have been trained on 6 high-risk condition protocols in two districts of Uttar Pradesh** – Sambhal and the aspirational district, Shravasti. **The Learning Management System (LMS) application has also been launched.**



Reach to Date



Dark Red	Kilkari, Mobile Academy
Orange	IHRPTM
Light Orange	Kilkari, Mobile Academy, IHRPTM

50+ Million Women & Children Reached*

Programme	Q1 Target	Q1 Achieved	Cumulative
Kilkari	3,500,000	3,901,126	47,469,390

409,000+ Health Workers Trained

Programme	Q1 Target	Q1 Achieved	Cumulative
Mobile Academy	30,000	24,133	396,846
IHRPTM	1,230	1,359	13,103
Total	31,320	25,492	409,949

*Includes 3 million women reached via mMitra in previous years

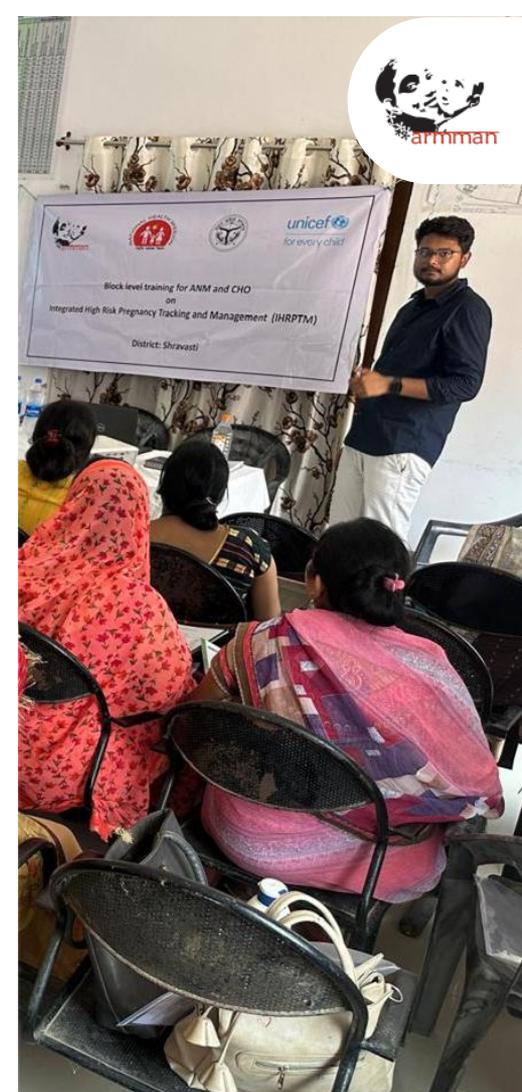
Programme Highlights: Kilkari and Mobile Academy

- Through Kilkari, ARMMAN has **created an impact on the lives of 47+ million women and their children in 20 states of India.**
- **100% of the Accredited Social Health Activists (ASHAs) in five districts of Chhattisgarh - Bemetara, Rajnandgaon, Balod, Khairagarh, and Kabirdham - have completed the Mobile Academy refresher training course.** The team is working towards replicating these results in all states across the country.
- ARMMAN is working towards **further expanding Kilkari and Mobile Academy.** For this we have **completed the scripting and production of Kilkari and Mobile Academy content in Tamil and Malayalam.** Once we receive approval from Tamil Nadu and Kerala state authorities, we will launch the programmes in these two states.
- Kilkari and Mobile Academy have been featured in the Andhra Pradesh edition of [Indian Express](#), highlighting the **impact of these innovative initiatives on maternal and child health among underserved populations.**



Programme Highlights: IHRPTM

- **Training of ANMs on six high-risk conditions** – quality antenatal care (ANC), fever, heart disease with shortness of breath (SOB), hypertension, anemia, and antepartum haemorrhage (APH) – **has been completed in Sambhal and Shravasti districts in Uttar Pradesh, along with the launch of the Learning Management System (LMS) application.** Almost **1,000 health workers** across various cadres have undergone training so far, and we are working towards expanding the programme to the entire state once we have approvals from the state government.
- ARMMAN has **completed the layering of LMS on the existing government application in Andhra Pradesh and testing will commence soon.** This will enable self-based learning among health workers on high-risk pregnancy conditions.
- In **Telangana**, ARMMAN is working to add **more health indicators to the state portal for early detection of high-risk pregnancies.** These enhancements, including **pop-up messages alerting ANMs of next steps the moment they insert relevant health indicators**, is expected to go live in Q2.



Programme Highlights: Swasth Kadam

As we continue to focus on strengthening operations in the existing locations of **Mumbai and Aurangabad**, we have seen considerable developments via the following:

- 1. Developing an AI model** - The AI model has developed a new feature which does re-profiling of existing beneficiaries to check their health status and if they continue to be moderately underweight (MUW). The team is working towards upgrading the model so it can tag beneficiaries into various categories based on the severity of their condition to ensure they receive appropriate counselling.
- 2. Building a Peer model** - The key focus has been on strengthening and scaling the network of women in our areas of operation via continued trainings on the enrollment of potential beneficiaries. These field activities have been initiated in rural Aurangabad and 2 new districts of Mumbai - Thane and Wadala.
- 3. Call Centre** - We have started remote enrollments in Mumbai and Aurangabad via the call centre in order to reduce the manpower on the field.



Innovation Updates

Kilkari High-Risk Pregnancy Pilot in Odisha

The aim of the Kilkari pilot is to test the feasibility of sending targeted content on specific high-risk conditions.

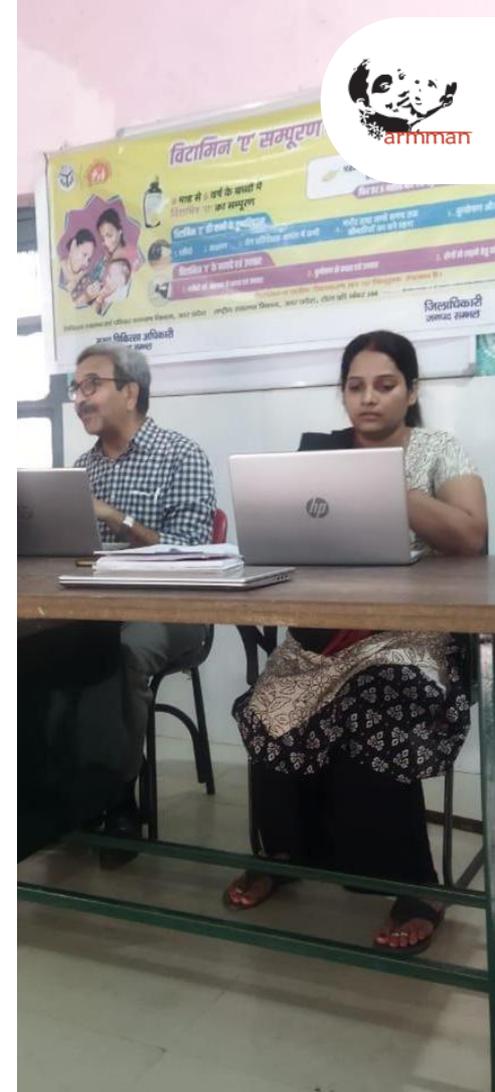
Three cohorts of the Kilkari high-risk pregnancy pilot were completed in two districts of Odisha - Ganjam and Sundargarh - and the fourth cohort is to begin soon. The women in these cohorts received calls focused on three high-risk conditions - hypertension, diabetes and anemia - among pregnant women.

Results from a telephonic survey conducted with a small group of women who had listened to the calls, showed that **67% of the women reported making changes in managing their pregnancy related practices based on the information they gathered from the Kilkari calls.**



Research and Evaluation

- **The Vitals, Essentials, and Desirables (VED) study of Primary Health Centres (PHCs) and Health Sub Centres (HSCs) in Andhra Pradesh** was done to assess the preparedness of health facilities to provide quality antenatal services, and to diagnose and manage high-risk pregnancy cases. As per preliminary analysis, 40% of PHCs and 36% of HSCs fall under the 'green' category (the facility has all necessary systems in place to diagnose and manage high-risk pregnancy cases). However, **a higher percentage (44% of PHCs and 38% of HSCs) fall in the 'red' category (major overhaul required)**. A draft report is currently being prepared, and will be shared with the state government of Andhra Pradesh.
- **In Uttar Pradesh, a qualitative baseline survey has been initiated** as part of the impact evaluation of the IHRPTM programme. For this we are collecting qualitative data from system stakeholders and quantitative data from approximately 4,000 recently delivered women, **starting in August 2024, across Sambhal, Shravasti, Gonda, and Buduan districts**.



ARMMAN at Skoll World Forum

ARMMAN was at the [Skoll World Forum 2024](#) from April 9-12, 2024, in Oxford, UK.

Dr. Aparna Hegde, Founder of ARMMAN, was also a member of the 2024 Skoll Awardee Steering Committee.

She also represented ARMMAN on the panel discussion **'Scaling Health Solutions Nationally: Insights from Non-Profit, Government and Philanthropy Partnerships'** hosted by **LGT Venture Philanthropy and Co-Impact**, where she presented our model of leveraging technology and collaborating with governments for systems change.





Kilkari: Impact Story



Transforming A First-Time Mother's Journey

Purabi Nath, a first-time mother from Malibari village, Kamrup district, Assam, received her first Kilkari call just 5 days after giving birth, and was instantly hooked to the guidance on providing for her newborn baby. She never missed a call in the following months, and heard almost all the messages till the end.

Dr. Anita, Kilkari's fictitious character, provided Purabi with crucial baby care tips, appropriate feeding practices, danger sign recognition, and details on the immunisation process. The calls were perfectly timed, arriving just before her baby's immunisation appointments. When her baby missed a vaccination due to illness, a Kilkari call reassured Purabi that the dose could be administered after recovery, offering her much-needed peace of mind. Her husband also appreciated the family planning advice shared through the calls.

Now, Purabi passionately encourages all pregnant and lactating mothers to pay close attention to Kilkari calls, emphasizing their importance for the health and welfare of both mother and child.



Mobile Academy: Impact Story

Empowering Frontline Health Workers to Confidently Counsel Women

“I feel confident while counselling women, thanks to Mobile Academy.”

Munga Devi, an ASHA (frontline health worker) from Bokaro district, Jharkhand, has been dedicated to her role since 2010. Upon learning about the Mobile Academy course, she saw an opportunity to enhance her skills as a health worker.

The course served as an excellent refresher on maternal and child health, and Munga Devi appreciated its simplicity, and accessibility via her mobile phone.

Reflecting on her experience, Munga Devi shares, “The Mobile Academy course was very engaging. It enriched my knowledge about antenatal care, breastfeeding, nutrition, and post-delivery care, enabling me to effectively counsel and guide pregnant women and lactating mothers. These women trust the advice I provide, which makes me feel respected.”





Swasth Kadam: Impact Story



Providing Timely Support to Mothers of Moderately Underweight Children

Kartika, from Navi Mumbai, was enrolled in the Swasth Kadam programme when she was one year and five months old. At registration, she weighed 8 kg, which was below the expected range for her age.

Kartika's mother, Suchita, diligently followed the advice from the trained nutrition counsellor, and actively sought guidance on childcare practices. After learning about the adverse effects of tea and junk food, she stopped feeding them to Kartika. When she sought advice on deworming, she learned the importance of administering medication every six months.

When Kartika was diagnosed with low haemoglobin, Suchita was hesitant to give her the prescribed Iron and Folic Acid (IFA) tablets. The counsellor informed Suchita about the benefits of IFA, and advised her to include iron-rich foods like carrots and beetroot in Kartika's diet. Following this guidance, Kartika's haemoglobin levels improved significantly.

Additionally, the counsellor discussed family planning with Suchita, emphasizing the importance of spacing pregnancies for the mother's health. Now, Kartika is two years old, weighs 10 kg, and Suchita is delighted with her progress.

Financial Highlights (in USD)



	Budget (Apr '24 - Mar '25)	Utilisation (April - June '24)
Direct Costs	8,481,967	1,155,045
Indirect Costs	322,069	74,774
Total	8,804,037	1,229,819

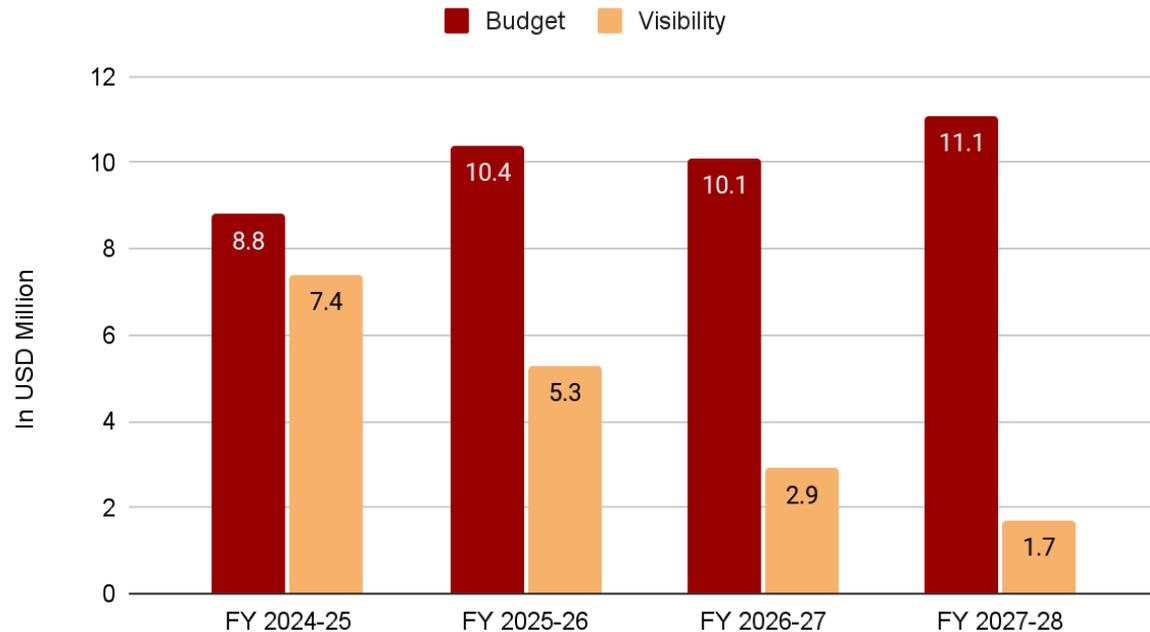
Note: Direct costs includes the budget of programmes such as Kilkari, Mobile Academy, IHRPTM, Swasth Kadam and Arogya Sakhi. Indirect costs includes the budget of support functions such as Finance, Human Resources and Administration, and Resource Mobilization and Communication.



Funding Visibility from FY 24-25 to FY 27-28



Organisational Budget vs Visibility



As of July 2024, we have raised **84%** of the funds required for this year (FY 2024-25) vs the budget of USD 8.8 million.

We have a funding visibility of **43%** over the next four years vs a total budget of USD 40.5 million, and are raising funds to plug the USD 23.2 million funding gap.

Looking Ahead

- **Kilkari and Mobile Academy**

We are working towards the **expansion of Kilkari and Mobile Academy to 9 new states** in this financial year. We also aim to launch the **Kilkari WhatsApp product in 3 states** - Delhi, Jharkhand, and Himachal Pradesh - **in the next few quarters** (based on government approvals).

- **IHRPTM**

We will complete **Phase 1 of the refresher trainings in Telangana** in the remaining 21 of 33 districts, and start **training ANMs in Andhra Pradesh** in the next quarter.

- **Swasth Kadam**

The development of a **two way communication channel on WhatsApp** is ongoing to support counsellors in **providing accurate solutions to parents/guardians of children enrolled in the programme.**

