



GOVERNMENT OF KERALA  
HEALTH AND FAMILY WELFARE DEPARTMENT



# SHSRC-KERALA ANNUAL REPORT 2024-25



SHSRC-KERALA

STATE HEALTH SYSTEMS RESOURCE CENTRE KERALA



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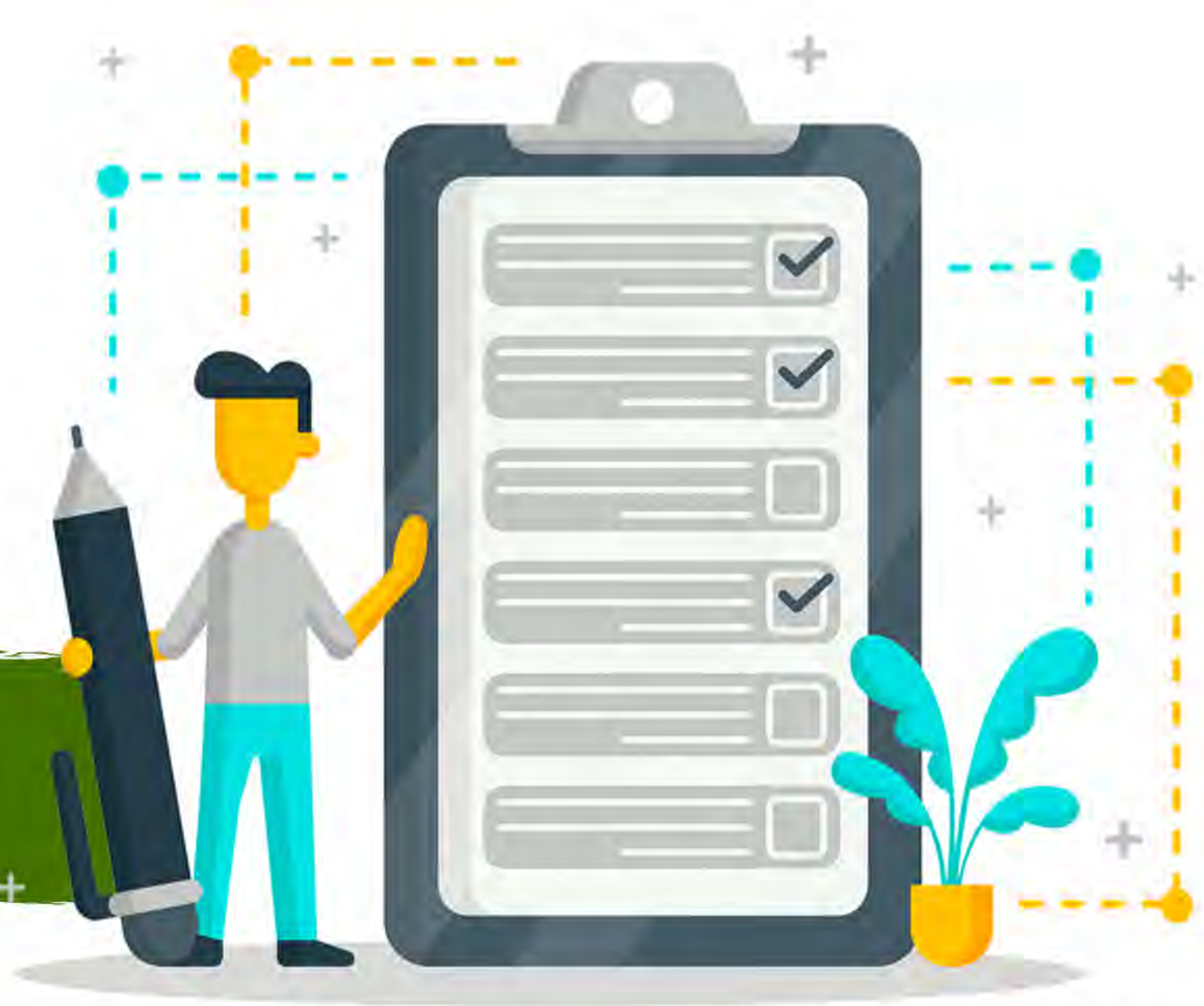


# ANNUAL REPORT 2024-25



**STATE HEALTH SYSTEMS RESOURCE CENTRE KERALA**

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# ABOUT SHSRC- KERALA

The State Health Systems Resource Centre, Kerala (SHSRC-K), was established in 2008-09 as a dedicated technical support organization under the Department of Health & Family Welfare, Government of Kerala. Modelled after the National Health Systems Resource Centre (NHSRC), New Delhi, SHSRC-K plays a pivotal role in strengthening the state's health systems by providing expert guidance on the formulation and implementation of effective health policies and strategies. Recognizing its growing impact and potential, the Government of Kerala granted SHSRC-K autonomous status in 2013-14. This enabled the organization to expand its mandate with a stronger focus on evidence generation which in turn facilitates the delivery of regular policy and strategic advice while mobilizing technical assistance to address critical health system challenges. Today, SHSRC-K serves as a trusted advisor to the government, fostering innovation and evidence-based approaches to improve public health outcomes across Kerala.

## VISION

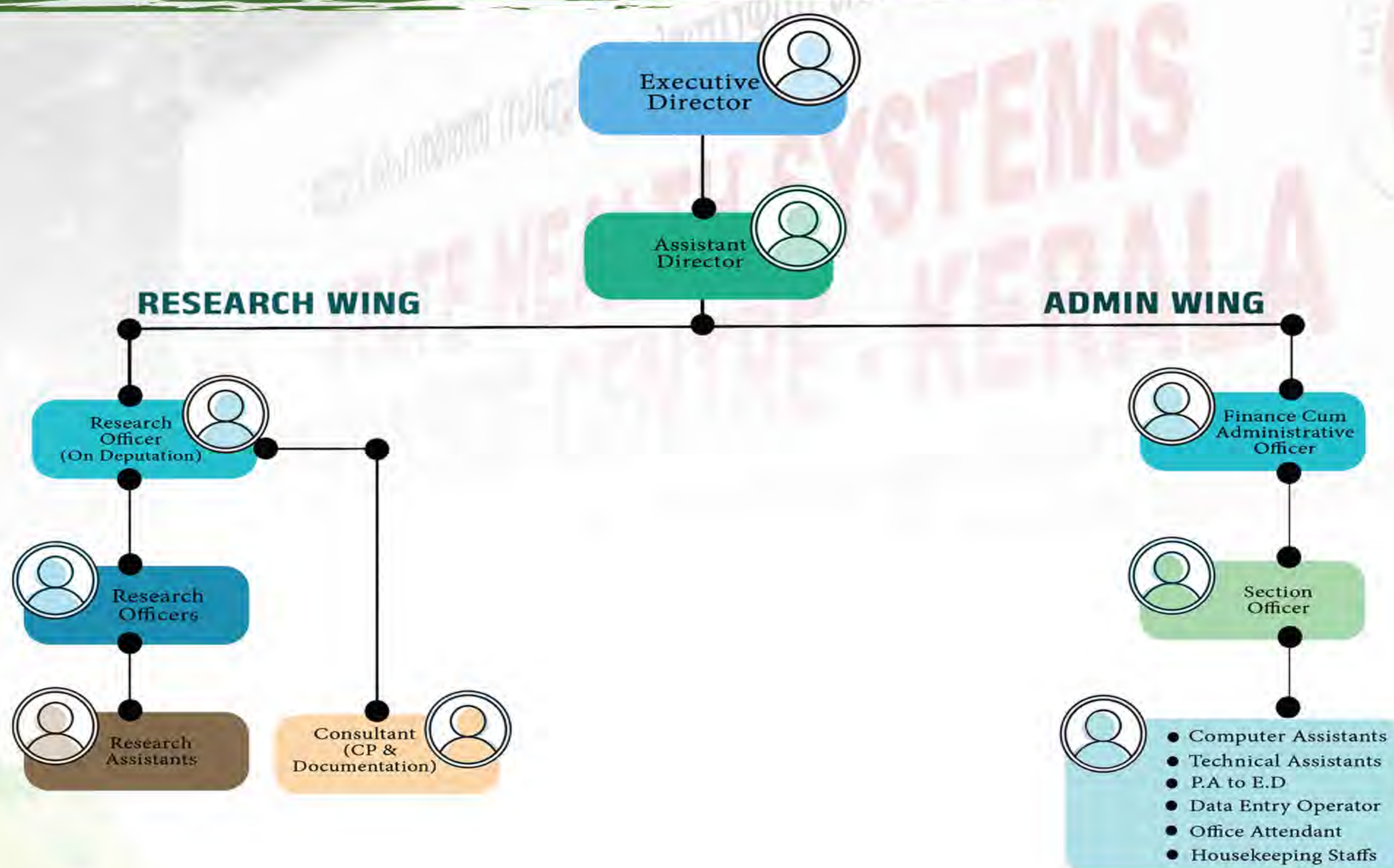
To emerge as a leading centre of excellence in Health Policy Systems Research and innovation, driving transformative change for strengthening health systems and improving the health and well-being of the people of Kerala

## MISSION

To strengthen Kerala's health systems by providing high-quality technical support, fostering evidence-based decision-making, and addressing on-the-ground challenges. We aim to:

- Conduct cutting-edge research to inform and shape health policies and programs.
- Assess ground realities and identify challenges in program implementation to drive practical and effective solutions.
- Build the capacity of health systems at all levels to ensure efficient and equitable service delivery.
- Evaluate and monitor health interventions to measure their impact and effectiveness.
- Facilitate collaboration with academic institutions, research organizations, and other stakeholders to promote innovation and knowledge sharing.
- Leverage data, technology, and evidence-based approaches to improve health outcomes and ensure sustainable development.

# ORGANISATIONAL STRUCTURE



## GOVERNING BODY

The policies, directions and overall guidance for the activities of the SHSRC-Kerala are entrusted to a regulatory body which is entitled, the 'Governing Board'. Hon'ble Minister, for Health & Social Welfare, Government of Kerala is the Chairperson of the Governing Board and has general control on the affairs of the SHSRC-Kerala.

MEMBERS OF THE GOVERNING BODY	POSITION
Minister for Health & Family Welfare (H&FW)	Chairperson
Secretary to Health & Family Welfare (H & FW)	Vice Chairperson
Secretary to Govt., Finance Expenditure(or) Nominee from Finance Dept	Member
State Mission Director, National Health Mission (NHM)	Member
Director of Health Services (DHS)	Member
Director of Medical Education (DME)	Member
Director Indian Systems of Medicine (ISM)	Member
Director, Homoeopathy	Member
Principal, KSIHFW	Member
Executive Director, SHSRC- Kerala	Member Secretary

## EXECUTIVE COMMITTEE

The role of the Executive Committee is to implement the Governing board's strategic, and generative plans, policies, and decisions consistent with the organization's vision, mission and guiding principles. Secretary to Health & Family Welfare Department, Government of Kerala, serve as the Chairperson of the Executive Committee, along with other members as specified below.

MEMBERS OF THE EXECUTIVE COMMITTEE	POSITION
Secretary to Health & Family Welfare (H &FW)	Chairperson
State Mission Director, National Health Mission (NHM)	Vice Chairperson
Director of Health Services (DHS)	Member
Director of Medical Education (DME)	Member
Director Indian Systems of Medicine (ISM)	Member
ADHS PH	Member
Principal, KSIHFW	Member
Executive Director, SHSRC- Kerala	Member Secretary



# ACTIVITIES OF SHSRC-KERALA

SHSRC-Kerala actively conducts research and supports research initiatives of external institutions, both within and outside the Department of Health and Family Welfare. SHSRC also collaborates with other line departments such as the Women and Child Development Department, to augment the process of scientific research which can lead to the implementation of programmes and policies which are important in terms of public health. To aid this vision, SHSRC-K has established an Institutional Ethics Committee (IEC) and an Institutional Research Committee (IRC) for scientific reviewing of research proposals. The centre engages in both internal projects, undertaken with its own research fund, and collaborative endeavours with external agencies.

Below are the details of the research activities conducted by SHSRC Kerala during the year financial Year 2024-2025



## ● Assessment of Aswasam Programme for Screening and Management of Depression at Family Health Centres in Kerala

Aswasam is a programme for depression management in Primary Care that was started on April 7th, 2017, the World Health Day in the 170 FHCs upgraded under the Aardram Mission. This study aimed to

comprehensively examine and document the challenges and constraints faced by the Aswasam programme, identify facilitating factors, and offer potential suggestions based on stakeholders' perspectives using multiple methods approach involving both primary and secondary data. The ultimate goal was to formulate policy recommendations for enhancing the programme at various levels, contributing to the overall improvement of mental health services.

Larger qualitative analysis and quantitative secondary analysis was done in this study. For the qualitative study- Wayanad, Kottayam, Kollam districts were selected based on screening rates as per Aswasam State Report of November 2022, and from each district, two FHCs- one with the highest and the other with the lowest positivity rate for depression were selected- mainly FHCs Poothady and Pozhuthana from Wayanad, Meenachal and Madappally from Kottayam and Peruman and Eravipuram from Kollam district. Programmatic challenges were obtained from SNO, DNOs, FHC staff and beneficiaries.

The outcomes that are identified in the study are:

Inconsistent screening practices, misclassification of cases, lack of clarity among providers, lack of confidence among medical officers, inconsistencies in follow up, lack of clarity regarding the role of MLSPs and ASHAs, Lack of confidence in the programme design among officials, lack of clarity regarding psychosocial intervention, lack of training and trained staff, lack of community awareness, issues in regular maintenance of registers and reporting.

## ● Assessment of Quality of Care given to survivors of Gender-Based Violence at Bhoomika Centres in Kerala

In 2009, the Government of Kerala initiated the Bhoomika programme to address the medical and psychological needs of survivors of Gender-Based Violence (GBV) through the establishment of Gender-Based Violence Management Centres (GBVMCs) in District Hospitals, General Hospitals and Taluk Hospitals across all 14 districts, expanding to 21 centres by 2013. These centres offer integrated support services including legal assistance, protection, medical care, and police support to the survivors of GBV.

This study seeks to assess the quality of services

provided at these centres by using the WHO Gender-Based Violence Quality Assurance (GBV QA) Tool, which measures performance across 28 standards and 10 key parameters of service delivery, at all 21 centres in Kerala. Additionally, the study gathers insights from stakeholders, Bhoomika Counsellors, and GBV survivors through Focus Group Discussions (FGDs) and In-Depth Interviews (IDIs) to capture their perspectives, identify existing gaps, and highlight positive aspects of the programme; mainly from 6 centres- DH Kannur, DH Palakkad, GH Trichur, THQH North Paravur-Ernakulam, DH Idukki, DH GH Kollam. The findings aim to inform recommendations for improving service quality and addressing the needs of GBV survivors more effectively within the Bhoomika framework.

The outcomes that are identified in the study are: Inadequate management of Sexual Violence cases at Bhoomika Centres, decline in orientation and training programmes, Less emphasis on GBV cases, Reduced integration with hospital services, variation in infrastructure and facilities, accessibility issues due to relocation and location challenges, outdated IEC materials, insufficient training for counsellors, weak Reporting and Information Systems, ineffective review meetings of Bhoomika activities at hospital level, non-functional committees, lack of standardization across centres, inconsistent service quality

### 🌍 Health Systems Responsiveness to the Health care needs of Tribal communities through Family Health Centres in Kerala

A deeper exploration was essential to unearth the reasons for why health care utilization among tribal communities is seen to be low and much behind non-tribal communities, despite poor health outcomes. One of the main objectives of Aardram Mission launched by Kerala is to provide access to comprehensive health services for the marginalized/vulnerable populations through specially framed service packages, including the tribal populace. This study seeks to examine how the FHCs address the health care needs of the STs and what are the issues faced in the provision of services, along with beneficiary perspectives.

The research adopts a qualitative research design, which allows for in-depth exploration and captures the nuanced experiences and perspectives of healthcare providers and beneficiaries. The centres chosen were FHC Begur in Wayanad district, FHC Pudur in Palakkad and FHC Marayoor in Idukki. Additionally, FHC Noolpuzha in Wayanad and FHC Edamalakudy in Idukki districts were taken as special cases.

This study aims to provide policy recommendations for development of inclusive strategies to improve the health care service delivery for tribal population at the FHC level which may help in framing specialized service packages.

The outcomes that are identified in the study are: Linguistic disconnect and lack of cultural sensitivity, Perceptions of discrimination, Government 'freebies' create dependency, Absence or poor mobile network, Lack of accessibility, Inadequate communication channels, Health beliefs, Timing of FHC, Economic barriers, Lack in addressing mental health issues of tribal communities, Inadequate infrastructure, Lack of Human resources, Lack of proactive engagement of the LSG, Inconsistent medication availability, Inconsistent registration and follow-up practices for NCDs, Fear and reluctance within tribal communities regarding referrals, Lack of functioning of specialized clinic, Lack of special packages, Challenges faced by ASHAs, Issues in data management, reporting and monitoring supportive supervision.

### 🌍 Realistic evaluation of Kerala State Community Palliative care programme

The study employed a realistic evaluation methodology coupled with a convergent parallel mixed method approach. Both the qualitative and quantitative data were collected simultaneously, analyzed in parallel, then compared and merged the findings to answer the study objectives. The utilization pattern and satisfaction of beneficiaries with the state palliative care program were studied quantitatively using secondary data analysis and survey methods. The information on the evolution of the program, strengths and barriers of the program were studied using qualitative methods (in-depth interviews and observation). The study was conducted in five randomly selected districts in Kerala- Thiruvananthapuram

ram, Kollam, Ernakulam, Thrissur, Malappuram and Wayanad. From each district, nine home care units at primary care were selected randomly. The program possessed certain strengths including the opportunity of decentralized governance, provided flexibility and credibility, enhanced resource mobilization and community involvement. It was highly regarded by elected representatives and nurses, who viewed the program as a significant and noble initiative. This upbeat attitude was evident in nurse's interviews; they saw their work as a divine duty and kept a cheerful disposition. The mandatory nature of the program, backed by periodic policy revisions and state-allocated budgetary funds, ensured its sustainability. The choice between biomedicine and traditional medicine in home care programs enhanced beneficiary's satisfaction. The program generally followed an inclusive approach by incorporating vulnerability assessments and providing support to individuals/households, including both impoverished and non-poor beneficiaries. The program helps to reduce out-of-pocket expenditures to a certain extent by providing procedural care monitoring of blood pressure and glucose levels, psychosocial support and physical rehabilitation at their home at free of cost. Overall, the program adopted a person-centric approach and the satisfaction of beneficiaries with the Kerala State community palliative care program was estimated to be 69.1%. Although the program largely complies with existing circulars and guidelines, there are still some areas of concern. Distribution of medicines at home, physical therapy at home with a minimum of two or three sessions per month, and the inclusion of doctor's visit in home care are the main needs reported.

The study findings and recommendations were shared to the State Palliative Care Policy 2019 action plan working group. Following the guidance of the high power committee group / action plan working group, SHSRC-K has prepared the State Palliative Care Policy 2019 action plan and submitted it to the Government of Kerala (GO.(Rt) No. 1592/2023/H&FWD dated 03.07.2023).

### **Adherence to infection control practices at different levels of public health care settings in Trivandrum district, Kerala**

Hospital-acquired infections (HAIs), also known as nosocomial infections pose a serious occupational hazard to the healthcare-providing community. The burden of HAIs is disproportionately high in low- and middle-income countries (LMICs), where up to 25% of hospitalized patients. Majority of the HAIs can be avoided by using widely accessible, cost-effective techniques such as hand hygiene practices, wearing Personal Protective Equipments (PPEs), adhering to aseptic procedures, cleaning and decontaminating contaminated instruments following established standards before sterilization or high-level disinfection, and proper biomedical waste management. Therefore, standard Infection prevention and control (IPC) procedures in healthcare settings are imperative for the safety of patients as well as healthcare providers. IPC continues to be a key strategy for preventing HAIs and antimicrobial resistance (AMR). SHSRC-K has been entrusted to develop a state-wide IPC protocol. In connection with that SHSRC-K carried out a study to document the existing infection control practices in different levels of public health care institutions. The study was conducted in Family Health Centre (FHC) Amboori, Community Health Center (CHC) Vizhinjam, Taluk Hospital (TH) Malayankeezhu, General Hospital Thiruvananthapuram and District Model Hospital Peroorkada. The study adopted direct observations and freewheeling interviews with Staff nurses, Nursing Assistants and Hospital Attendants. The key findings could be summarized under seven domains: Infection control programs and procedures, hand hygiene practices, personal protection, processing of instruments and equipment, housekeeping practices, biomedical waste management and patient safety.

## ● Healthcare needs of Intersex People in Kerala: A qualitative study

Intersex individuals are people who are born with physical or biological sex characteristics that do not fit typical male or female categories, and are an often marginalized, misunderstood population in India. Many intersex individuals face discrimination and marginalization not only because of their intersex status, but also due to their gender identity, sexual orientation, race, and other factors. Addressing these intersections will require a deeper understanding of intersex experiences and the unique challenges that intersex individuals face. In addition, exploration of how equipped the health care providers are in order to provide and take informed and judicious decisions on such surgeries are hitherto unexplored and unknown.

This study employed a qualitative research design using In-Depth Interviews among consenting intersex individuals and relevant categories of health-care providers from within the healthcare system in Kerala comprising of endocrinologists, paediatrician, paediatric surgeon, psychiatrist, gynaecologist, plastic surgeon, community medicine professionals. This formative study aims at tapping into their valuable perspectives, experiences and needs that can inform and enrich discussions and decision-making processes with regard to the health-care needs of this sect within the community.

The major outcomes of the study/gaps identified in the study are:

- Specific issues- recurrent urinary ailments (most reported), post-surgical blood sugar increase, Post hormone treatment issues, complication post-surgery, for years after.
- Childhood surgeries without the individual's consent was vehemently opposed by intersex people
- Mental Health issues starting right from childhood- Body dysmorphia, gender incongruence- affecting daily life, education, work, life
- Denial of treatment by government doctors, Privacy issues, Lack of follow up
- Stigmatization and non-queer affirmative responses

- Lack of general awareness/incompetency among health providers, Limited exposure of providers to intersex conditions,

## ● Development of a screening tool for identifying the home fall hazards of older person

Falls among the elderly are a significant public health concern, particularly in Kerala, where the aging population is growing at rates higher than the national average. Despite the global recognition of falls as a major cause of injury and death among older adults, there is a lack of tools that specifically assess environmental fall hazards in the Indian, and particularly Kerala, context. This study aimed to develop and validate an environmental fall risk assessment tool tailored to the local setting, making it the first of its kind in Kerala.

The study utilized a structured methodology to develop the tool. Initially, existing tools from other countries were reviewed, and relevant items were customized to suit the local environment. Both deductive and inductive approaches were used, involving literature reviews and expert interviews, to generate a pool of items that covered all relevant domains of fall risk. Content validity was ensured by evaluations from both experts and the target population, ensuring the Tool's relevance and clarity. The tool was then piloted in elderly households, with trained frontline health workers administering the tool under researcher supervision to ensure that it captured the intended data accurately.

The results showed a high prevalence of fall risks among the elderly, with female participants accounting for 75.3% of the sample, and 46.8% of participants being identified as having moderate fall risk. The most frequently identified environmental hazards included wetness in the courtyard (44.2%) and bricks or gravel in the courtyard (37.7%), highlighting the significant role of extrinsic factors in fall risks. These findings underscore the importance of environmental assessments in fall prevention among older adults in Kerala.

This tool will now be available to frontline health workers, offering a comprehensive, easy to use checklist for identifying fall risks in the home environment. It provides a valuable addition to public

health efforts aimed at reducing falls and associated injuries among older adults in Kerala, allowing for timely interventions and improved safety for this vulnerable population.

### ● Preference for private health care facilities for institutional delivery in Kerala – an exploration

This study aimed to identify the determinants influencing the preference for either the public or the private sector for institutional deliveries in Kerala. It also sought to explore the perspectives and experiences of stakeholders (including key informants in the public sector such as RCH officers, gynaecologists, staff nurses, Junior Public Health Nurses, Junior Health Inspectors, Accredited Social Health Activists) and beneficiaries from both sectors regarding institutional deliveries.

This study was conducted and completed across seven selected districts in Kerala, India, including Thiruvananthapuram, Alappuzha, Idukki, Ernakulam, Kozhikode, Kasaragod, and Wayanad, which was analysed separately as a case study due to its unique status as the only aspirational district.

Our findings suggest that although women in Kerala may express a preference for a particular facility, their actual choice is influenced by a complete interplay of factors and challenges encountered during the antenatal and postnatal periods. These factors were shaped by perceived quality of healthcare resource inadequacies, privacy concerns, and economic status.

While private hospitals offered certain advantages, affordability remained an important limitation. Strengthening public health infrastructure, addressing staffing shortages can help improve service delivery and utilization.

The major findings in the study are:

- Suboptimal antenatal hospital visit experiences for beneficiaries of government hospitals.
- Limited availability of required facilities for antenatal care checkups in government hospitals like scanning facilities and medicines.
- Government hospital beneficiaries are more likely to experience privacy violations.

- Government hospital beneficiaries more likely to visit doctors at home.

- Reasons for preference for public institutions over private for delivery: affordability, accessibility, and a sense of familiarity

### ● Functioning of public dental Out Patient centres in Thiruvananthapuram, Kerala: an assessment report

This study focused on assessing the functioning of government dental outpatient centres of Trivandrum district in terms of their general features, available infrastructure and equipment, strength and self-reported adequacy of human resources, provision of services and scope of procedures and policy features; and exploring the facilitators and barriers in service utilisation and delivery, according to healthcare providers and beneficiaries.

Some of the key positive findings from the study include:

- Availability of essential infrastructure and equipment for routine procedures
- Satisfactory record-keeping practices
- Most sanctioned posts are adequately staffed.
- Affordability of services for patients
- Flexible appointment scheduling options
- Access to timely emergency care services
- Good patient- provider interactions.

These findings highlight the strengths of the current healthcare system and underscore areas where improvements have been effectively implemented.

Inadequacies:

- Insufficient number of IEC activities per year.
- Inadequate specialist availability.
- Inadequate number of dental assistants.
- Insufficient dental laboratory facilities.
- Radiology availability limited.
- Inadequate Root canal treatment facilities.

The following recommendations emerged from the research period:

- Establish a regular inspection and maintenance schedule for all radiographic equipment in dental centers
- Install dosimeters and other radiation monitoring devices to ensure safety and compliance

- Increase the frequency of Information, Education, and Communication (IEC) activities throughout the year
- Improve access to essential services, such as X-ray imaging and root canal treatments
- Expand the dental workforce by increasing the number of sanctioned posts

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- Improve access to essential services, such as X-ray imaging and root canal treatments
- Expand the dental workforce by increasing the number of sanctioned posts
- Ensure the availability of specialists on a rotational basis to meet patient needs
- Build or upgrade onsite laboratories to manufacture necessary dental appliances, and partner with private dental labs and universities for additional support and resources

These recommendations aim to enhance the quality of care, improve operational efficiency, and ensure the sustainability of dental services.

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## 🌐 Digital transformation of public healthcare in Kerala: an analysis of e-health adoption and utilization

The study assesses the adoption and utilization of the Kerala e-Health Project, launched in 2017 to modernize public healthcare infrastructure. The project aims to establish a centralized state health information system with Electronic Health Records (EHR) for all citizens, supported by Aadhaar-based Unique Health Identification (UHID). This study examines the extent of e-Health system adoption across public healthcare facilities and its integration into service delivery, focusing on UHID registration, OPD visits, IP visits, laboratory services, online consultations, and advance bookings through e-Health. By analyzing data from the e-Health Dashboard and Directorate of Health Services (DHS), this study assesses adoption rates, utilization levels in performance metrics such as outpatient (OPD) visits, inpatient (IP) admissions, and laboratory investigations. Conducted after nearly seven years since its launch, the assessment identifies successes, challenges, and areas for improvement in utilizing digital tools for efficient, accessible, and patient-centered healthcare. The findings reveal notable progress in digitizing healthcare services, streamlining operations, and improving continuity of care across the states public healthcare system. However, gaps in adoption and inconsistent utilization in some facilities highlight the need for targeted interventions, capacity building, and improved infrastructure to optimize the systems potential fully. As a pioneer initiative, Kerala's e-Health Project plays a critical role in the broader national movement toward digitized healthcare. The study's findings provide actionable insights to enhance service delivery, guide further expansion, and strengthen the state's public health system, contributing to the larger goal of achieving equitable and efficient healthcare for all.

## 🌍 Awareness of HIV and its determinants among community level workers (CLWs)

Community Level Workers, including Kudumbasree members and Anganwadi workers, play a pivotal role in disseminating health-related information to communities. Their awareness and understanding of HIV are crucial for promoting prevention, reducing stigma, and improving access to care and treatment. Given the importance of their role, this study aims to assess their level of HIV awareness, identify key influencing factors, and evaluate the effectiveness of awareness campaigns. Understanding these aspects is essential for designing more effective interventions to enhance HIV knowledge and reduce stigma in the community. Using a mixed-method design, data were collected through structured questionnaires across five districts and supplemented with key informant interviews with Kerala State AIDS Control Society officers. A case-control comparison was conducted between attendees and non-attendees of the Know Your Status campaign. The qualitative component included the key informant interviews with program officers of the Kerala State AIDS Control Society to understand the implementation experiences.

The study found that 64% of Community Level Workers (CLWs) had high or very high awareness about HIV, while 36% had low or very low awareness. Key factors associated with higher awareness included being married, using social media, prior HIV testing during other treatments, and participation in awareness activities. The KYS campaign proved effective in enhancing awareness among those who attended, indicating the value of such targeted interventions. However, implementation barriers—including limited manpower, funding constraints, and persistent stigma—hindered broader reach. Program officers emphasized the importance of a multi-platform approach, local self-government support, and more customized messaging for high-risk groups like migrants. Enhancing targeted interventions, reducing stigma and leveraging innovative outreach methods can improve HIV awareness. Strengthening training programs and integrating awareness efforts into existing health

initiatives will be essential to achieving better HIV education outcomes and supporting the National goal of eliminating HIV by 2030.

## 🌍 Stigma and discrimination faced by PLHIV and key population in Kerala

Despite progress in treatment and prevention, stigma and discrimination continue to hinder the health and well-being of PLHIVs and KPs such as IDUs, TGs, FSW and MSM, which hinder their access to healthcare, affect their mental health and social well-being, and contribute to poor health outcomes. Addressing stigma and discrimination is critical to ensuring equitable access to service, promoting adherence to treatment and improving overall quality of life. The study aimed to assess the level of stigma and discrimination and identify its determinants among PLHIV and KPs in Kerala. For this, a mixed method study was conducted in Thiruvananthapuram, Kottayam, Ernakulam, Thrissur and Kozhikode districts of Kerala. The quantitative data were collected from 400 PLHIVs (100 PLHIVs from each district) and 399 people from Key Populations (100 IDUs, 103 TG persons, 100 FSWs and 96 MSM) using a structured questionnaire prepared by NACO. The qualitative data were gathered through in depth interviews with 2 PLHIVs and 12 KPs to gain deeper insights into their lived experiences.

This study revealed that stigma and discrimination continue to be widespread among both people living with HIV (PLHIV) and key populations in Kerala, adversely impacting their mental health, social integration, and access to healthcare services. The burden of stigma is particularly high among transgender persons and injecting drug users, with gender differences influencing the nature and extent of discrimination. Anticipated and internalized stigma led many individuals to avoid healthcare and isolate themselves, highlighting a need for psychosocial support and stigma-sensitive services. The findings underscore the urgent need for comprehensive and sustained stigma-reduction strategies, including training of service providers, gender-sensitive interventions, community engagement, and improved grievance redressal systems.



🕒 **Exploring utilization pattern along with enablers and impediments in sustaining the teleconsultation service 'eSanjeevani' encompassing Primary Healthcare settings of Kerala in the Post-pandemic period: A Qualitative study**

eSanjeevani – National Telemedicine Service of India is a step towards digital health equity to achieve Universal Health Coverage (UHC). This mixed method study describes how eSanjeevani is being utilised in the Primary Healthcare settings in the Post-Pandemic period. This study has received approval from the Institutional Research and Ethics Committees and is currently in the stage of report draft vetting.

🕒 **Interventions for prevention of falls among older persons- a randomized control trial in Kerala, India**

Age-related population growth is occurring globally. Among older people, falls and the injuries they cause are substantial public health concerns. Falls also enhance an elderly person's impairment, reliance, and long-term bed rest. Every year, over 30% of elderly people over 60 experience a fall. The majority of falls are avoidable, according to the data

avoiding falls, older people's mortality, morbidity, and reliance can be reduced to some extent. Fall prevention can also reduce the health care and societal expenditures associated with treating injuries and disabilities sustained by elderly people as a result of falls. The RCT registered with Clinical Trial Registry of India (CTRI/2024/04/066448) aims to study whether a multifactorial fall prevention program comprising education on falls, lifestyle advice, medication reviews, and exercise intervention, along with recommendations for environmental

adaptation, can decrease the number of falls among community-dwelling older persons when compared to conventional care, including education on falls and lifestyle advice. The interventions are given for a period of twelve months to the elderly aged 60 and above screened to have moderate to high risk for falls.

🕒 **Catastrophic health expenditure and coping strategies among stroke survivors in Thiruvananthapuram**

Stroke is a life changing event that affects not only the stroke survivors who may be disabled, but also their family and caregivers immensely in such a way that can lead to loss of jobs, interruptions at work, disruption in education of children, selling of assets, and intake of loans. This might lead to poverty. In India, epidemiological data regarding stroke are widely available but there is paucity of information about the cost and economic impact of stroke. Despite public health care institutions being abundant in Kerala, all comprehensive stroke units were centered around the apex institutions like medical college, general hospital and Sreechitra institute of medical sciences and technology which is not immediately reachable to all. The most crucial factor influencing recovery in stroke patient is how quickly the patient reaches the hospital. As time progresses, complications of stroke, especially physical disability occur. Therefore, people always try to bring the patient into the nearest hospital even it is a private hospital

Policies and programs are needed to address the financial needs and security of post stroke survivor's families. Insight into their direct and indirect health related expenditure would provide valuable inputs for the development of new strategies to sustain caregivers in their vital roles. It is particularly important to address the issue of women (either survivor or caregiver) because of her multiple responsibilities in this patriarchal society. The push to develop health-financing systems that compromise financial risks and to achieve universal health coverage in developing countries is promising. However, policymakers need to ensure that the health as

as well as the financial burden from any long-term disease is adequately addressed in future reforms.

There is limited information on economic burden of stroke in the Indian subcontinent and the economic burden caused by stroke in Kerala has not been explored. This study mainly aims to estimate the catastrophic health expenditure and its coping strategies among Stroke survivors in Thiruvananthapuram district. A hospital based cross-sectional survey was conducted during July 2023 – April 2024 in Thiruvananthapuram district. Data was collected from 305 stroke patients in Thiruvananthapuram district. Currently the study is complete and the report is complete.

### 🌍 **Towards inclusive elderly health interventions: social engagement for studying semantics of ageing, health, illness, and quality of life in order persons**

Demographic transition has resulted in the state of Kerala having the highest proportion of elderly (defined here as persons 60 years or older) in India. The state has been trying to address this situation through several age-specific benefits and services. However, the needs far outweigh the interventions currently in place due to the onslaught of non-communicable diseases, changing family structure and increased dependence. There is a need to develop or expand health interventions for the welfare of the elderly and some initiatives are taking place at the level of local governments. Such interventions need to be equitable and inclusive, but the current ones are somewhat patronizing and may be affected by ageist approaches. Robert Butler coined the term ageism in 1969 to indicate differential treatment of older persons because of their age. The discrimination may be direct where someone is directly discriminated because of their age or indirect where conditions are applied such that a different proportion of elderly persons become eligible as compared to others. What has sometimes been labelled as positive discrimination of elderly, e.g., separate queues and benefits, and have often been projected as helpful, still amounts to ageism that is patronizing. In this context, exploring and understanding alternative perspectives can improve our comprehen-

sion of the lives of the elderly, enable better engagement with the context in which they live out their lives, and facilitate action for improvement of health and quality of life. This study uses a life course approach among elderly individuals living in rural and urban community settings in Thiruvananthapuram district of Kerala.

### 🌍 **Complexities of Urban Setting with Clusters of Socio-economically vulnerable groups and Tuberculosis, a Mini Ethnography in Thiruvananthapuram, Kerala.**

Urban settings with clusters of socio-economically vulnerable groups development and growth pose serious threats to public health, especially in relation to infectious diseases like tuberculosis. Understanding the sociocultural factors that influence TB transmission in these environments is important. The purpose of this research proposal is to carry out a small-scale ethnographic case study in Thiruvananthapuram, Kerala, to look into the history of the origin of such clusters and how they relate to tuberculosis. This study, which is in the data collection process, presently looks at community processes and structures within the setting. The study seeks to come up with tailored interventions and strategies to improve TB control/elimination and health delivery in similar settings, contributing to the broad discourse on infectious disease management and urban health equity.

### 🌍 **Estimation of risk factor of Type 2 Diabetes Mellitus among adolescents in Kerala**

The study aims to identify the risk factors of Type 2 Diabetes Mellitus among adolescents in Kerala. Early detection of diabetes can prevent complications associated with the disease. Therefore, the study's objective is to estimate the prevalence of each risk factor among teenagers and emphasizing primary prevention to mitigate the disease's impact.

The study was conducted in randomly selected districts in Kerala namely : Kasargod, Malappuram, Thrissur, Ernakulam, Alappuzha, and Kollam. A total of 859 samples were collected for the study.

collected samples are evaluated in the Thrissur district general hospital lab and other district Public Health Lab by the collaboration of each other. The Field investigations is conducted in selected Family Health Centres (FHCs), Community Health Centres (CHCs), and Rural Health Training Centres (RHTCs). Currently the Investigation team is involved in the data analysis work.

### 🌍 **Burden of Psychosocial Issues among Elders in Kerala: A cross-sectional study**

The study aims to estimate the burden and patterns of the psycho-social issues that are faced by the elderly population in Kerala. Population ageing refers to a proportionate increase in the number of elderly people, is a significant effect of the demographic transition. According to research, the state's aged population is expanding at a constant pace of 2.3%. The elderly aged 70 or 80 and above are seeing a rapid increase. As per the Ministry of Statistics and Programme Implementation, Government of India, the old age dependency ratio of Kerala at 19.6 percent is higher than the rest of the country at 14.2 percent, highlighting the importance of care for the elderly in Kerala. Kerala is ageing more rapidly than the rest of India and has the highest proportion of elderly individuals. The objectives were to estimate the burden of psychosocial issues among the elderly population in Kerala, to identify the patterns of psychosocial issues faced by the elderly population in Kerala and to find the associated factors of psychosocial issues faced by the elderly population in Kerala. The study will be conducted in the financial year 2025- 2026. Currently the study is on the initial phase.

### 🌍 **Development, Implementation, and Evaluation of a State Level Interactive Online Portal for monitoring, and addressing the health issues and grievances of Transgender and Intersex communities in Kerala: An Implementation Research**

As a part of the need for a centralized online interactive platform which would also act as a gateway for the formation of a much-needed credible

database of Transgender and Intersex individuals for addressing health-related grievances to ensure inclusivity in policy and practices, an implementation research has been commenced with the primary objective to develop, pilot, and evaluate a user-friendly and accessible online portal specifically tailored to the needs of transgender and intersex communities in Kerala, providing a centralized platform for health service delivery addressing grievances, and gathering a credible database of these communities. This research employs a mixed method approach incorporating an initial phase of formative research followed by implementation research with its subsequent evaluation.

The qualitative part of the study was completed and a state level consultative stakeholder meeting was held in a facilitatory mode, following which the blue print for the portal was partially designed currently qualitative data collection is completed in Trivandrum, Ernakulam, Kottayam, Trissur, Kozhikode and Malappuram districts. Simultaneously a state officials level meeting was conducted for discussing the administrative section of the portal.

### 🌍 **The chronicles of Family Health Centre, Noolpuzha: a case study of how a tribal health centre garnered national attention**

This study explores and documents the inputs, processes and outcomes of existing health programs at Noolpuzha FHC. It also assesses the perspectives of both providers and beneficiaries on the factors influencing service uptake and the impact of these programmes on community well-being. Onsite data collection of the study has been completed and data analysis is ongoing.

### 🌍 **Establishment of an early warning system for Nipah in Kerala: An Implementation Research**

Nipah Virus is a zoonotic RNA virus first identified in Malaysia (1998) that primarily spreads from fruit bats, posing a significant health threat due to its high fatality rates. The virus spreads through direct contact with infected animals, humans, or the consumption of contaminated food, such as raw date

palm sap. Since 2018 onwards Kerala State is experiencing a multiple outbreaks of the Virus. Robust surveillance, seroprevalence studies, and early warning systems are crucial to preventing future health crises.

The main objective of the study is to develop an implementation model to establish a comprehensive early warning system for Nipah virus surveillance in Kerala through public health interventions. The study will be conducted in Kozhikode, Malappuram and Wayanad districts of Kerala, which have been identified as high-risk areas due to past outbreaks, Nipah virus positivity in bats, and the circumstances of anecdotal unexplained encephalitis deaths in Wayanad. The study will be conducted over 10 months from March 2025 to December 2025 analysing the qualitative data by appropriate software.

### ● **Analysing policy and practice of the Amma Manassu programme to improve the beneficiary outcomes in maternal mental health issues in Kerala: A mixed method study**

'Amma Manassu' meaning 'Mother's mind' is an initiative by the Department of Health and Family Welfare of Kerala to address mothers' mental health issues during delivery and after childbirth. 'Amma Manassu' is the first initiative focusing exclusively on screening, early identification, and treating postpartum depression and other maternal mental health conditions at the primary care level. The study mainly aims to assist in developing policy recommendations for the further improvement of the programme at multiple levels by assessing the implementation of the 'Amma Manassu; programme from both the provider and beneficiary perspectives, looking into program's facilitators and barriers, thereby improving the beneficiary health outcomes. The study is planned to complete in 12 months from the date of getting IEC clearance. Presently the study is under proposal modifications

### ● **Assessing the access to non-communicable disease care from the public health system in Kasaragod district, Kerala: A mixed method study**

The study aims to understand the access and utilization of NCD care among the residents of the Kasaragod district. The study specifically focuses on the care related to diseases such as Diabetes, Hypertension, Stroke, and Coronary Artery Diseases(CAD). The study will try to understand the perspectives of key stakeholders on the health system-based facilitators and barriers in providing healthcare services in the district. And also identify the sufficiency and adequacy of primary and secondary-level facilities in providing the services for screening, diagnosis, treatment as well as management of these conditions. The study will try to estimate the proportion of catastrophic health expenditure experienced for NCD care among residents of Kasaragod district. The study is planned to complete in 12 months from the date of getting IEC clearance. Presently the study is under proposal modifications on the comments received from the IRC meeting.

### ● **Adolescent Friendly Health Clinics in Kerala: Evaluation, Challenges and Strategies for Strengthening**

This study aims to strengthen the Adolescent Friendly Health Clinics (AFHC) in Kerala. As the number of AFHCs continues to grow, it is crucial to assess their current operations, identify service delivery gaps, and introduce improvements. Strengthening these clinics will not only improve adolescent health outcomes but also contribute to the broader

The research will focus on identifying the implementation challenges and bottlenecks that hinder the effective functioning of AFHCs in Kerala and will propose practical, actionable solutions to address these issues.

The study will follow a parallel mixed-methods design, combining both quantitative and qualitative data collection and analysis. The research will be carried out across selected AFHCs in the districts of

Thiruvananthapuram, Alappuzha, Thrissur, Malappuram, and Kannur. The study is expected to span one year, following the approval of the Institutional Ethics Committee (IEC).

The Institutional Review Committee (IRC) approval for the study has already been completed



In the previous fiscal year, SHSRC Kerala reached a significant milestone in collaborative research by partnering with the Indian Council of Medical Research (ICMR) to explore four new research topics across various health domains in the state.

Building on this success, ICMR has once again joined hands with SHSRC Kerala in the current financial year to undertake two additional research projects,

- **The Aspire study- Antenatal Salivary progesterone to detect Pre-term births and Improve Reproductive Endpoints: A prospective observational study**

✔ **Status: Ongoing**

A handful of studies have shown that there is an association between salivary hormone levels and preterm births. This study seeks to study the diagnostic validity of salivary hormones such as progesterone, estriol and cortisol as a biomarker for preterm births in terms of sensitivity, specificity, positive predictive value, negative predictive value, and likelihood ratios. This study also seeks to determine the incidence and outcomes of preterm births in Kerala, and to assess the factors that would influ

ence the acceptability of such a test to predict preterm births.

For the study, 2 districts, namely Ernakulam and Trivandrum, are selected with 4 hospitals based on the number of OP and total number of deliveries. 2 project technical staff and 1 project research scientist are posted to each district.

The recruitment started in the month of November in both districts. In Trivandrum, sample collection was started on 26th November. In Ernakulam district, the facilities of the lab were provided in the month of December, and the test started on 16th December 2024.

Currently, a total of 662 pregnant women are recruited across 4 hospitals, and 193 samples are

collected and examined for progesterone, estriol and cortisol. Not received any reports from the lab to date. The follow-up for delivery cases will be from February.

- **Upscaling of Primary Stroke Care Units in Kerala to Certified Stroke Care Centres: An Implementation Research**

✔ **Status: Ongoing**

This participatory implementation research aims to enhance the quality of care provided in Primary Stroke Units (PSUs) to levels that will make them eligible for quality certification by the World Stroke Organization (WSO). Upgrading the PSUs to WSO standards will bring in a drastic change in the way PSCUs function in Kerala and the way Stroke is managed both in the acute phase and the long-term follow-up phase.

The Research was started in the end of the previous financial year and in this financial year the research team completed the Phase 1 of the Situational analysis of primary stroke units in 10 hospitals in Kerala namely General Hospital (GH) Pathanamthitta, G H Trivandrum, G H Kozhikode, District Hospital Kollam, District Hospital Perinthalmanna, G H Kottayam, District Hospital Palakkad, G H Thrissur, GH Ernakulam, District Hospital Thodupuzha. Team from SHSRC-Kerala and ICMR Project staff visited the 10 hospitals in the state with Primary Stroke Units (PSU) to

analyse the current function of PSU's. A Situational analysis report was made based on the findings. This report was presented in a 2-day workshop involving the stroke care team and the administrative staff of the 10 hospitals. Simultaneously, a patient database is being developed in collaboration with Digital University Kerala (DUK) for proper documentation and monitoring of the quality outcome. A stroke-specific case sheet was developed following a discussion with neurologists for implementation in all District/ General hospitals with PSU.

**🕒 Nurse Initiated Community health worker Empowerment (NICE) Study- Developing community-based COPD management package in Primary health care setting: Randomized Control Trial**

**✅ Status: Ongoing**

In 2017, in the backdrop of the 'Aardram' mission, COPD clinics were established in primary health centres - "Step Wise Approach to Airway Syndromes" (SWAAS) clinics. The study focuses on developing a comprehensive intervention (pulmonary rehabilitation) which includes exercise training, education and behavioural modifications, thereby enhancing the health-related quality of life (HQOL) of COPD patients. Part 1 of the study, which includes situational analysis of SWAAS clinics at 16 pre-selected FHC's, completed by the end of November 2024, Qualitative analysis of which is ongoing. Simultaneously, a cross-sectional survey to assess the Prevalence and determinants of COPD across Thiruvananthapuram district has been initiated since December 2025, and data collection is ongoing.

**🕒 Convergence and integration of programmes and leveraging technology for enabling healthcare teams for delivery of equitable, high-quality primary healthcare services through Health and Wellness Centres (CONVERTECH- HWCs) in Wayanad district of Kerala - An implementation Research**

**✅ Status: Ongoing**

This multistate implementation research was ap

proved under the Division of Socio-behavioural, Health Systems & Implementation Research. This 3-year implementation research has been designed to develop an effective implementation of contextualised strategies to improve the coverage and equity in delivering comprehensive primary healthcare services through the health and wellness centres through an iterative approach. The study is taking place in the Wayanad district of Kerala.

The ICMR project commenced at the start of the previous financial year on February 19, 2024, with its implementation in Kerala beginning on May 18, 2024. In the initial phase, preparatory activities, stakeholder sensitization, and a baseline assessment of Comprehensive Primary Healthcare (CPHC) services were conducted across 204 Sub Centre - Health and Wellness Centres (SC-HWCs) in Wayanad district. A series of capacity-building workshops was organised, covering CPHC services, action plan development, and both qualitative and quantitative research methodologies, including household surveys. Various assessments were carried out, including a rapid evaluation of SC-HWCs to identify gaps and assess effectiveness, a household survey to understand community perceptions and service utilization, and qualitative research through in-depth interviews (IDIs), semi-structured interviews (SSIs), and focus group discussions (FGDs) with healthcare providers, beneficiaries, non-users, and officials from health and other departments. Facility exit interviews provided direct patient feedback, contributing to an understanding of service satisfaction. Additionally, a village survey examined the broader healthcare context, while a facility survey assessed infrastructure, resources, and service delivery. These efforts collectively provided a comprehensive understanding of SC-HWC operations and challenges. Regular workshops and stakeholder meetings facilitated the discussion of findings and collaborative planning for intervention strategies.

As part of the first step of model implementation, the selection of HWCs for conversion was completed after discussions with the respective medical

officers and superintendents. In the second year, the focus will shift to piloting and optimizing the intervention model before full-scale implementation. Based on formative research findings, implementers and researchers will co-develop context-specific delivery strategies

● **A 'Transgender Community Link Worker (TG-CLW) led Intervention' targeting Substance Abuse among Transgender and Intersex Individuals through Vimukthi (De-addiction Centres) in Kerala: A Hybrid Implementation Research.**

✔ **Status: Ongoing**

This research delves into the overlooked issue of underutilization of Vimukthi (de-addiction) Centres by trans-people, examining the underlying reasons at both systemic and community levels. The study contributes to the first-ever Health System-initiated-database on substance-use among the trans population in Kerala (a subsidiary component of the main study), in the context of even NFHS-5 reporting binary estimates. Through comprehensive analysis, development and piloting of a novel intervention involving 'Transgender-Community-Link-Workers (TG-CLW), the study aims to empower, scale, and bridge the gap, promoting gender-inclusive de-addiction programmes.

● **Establishing an early warning system through environmental surveillance of Avian Influenza**

✔ **Status: Ongoing**

The study aims to conduct environmental surveillance of surface water and wastewater from water bodies in proximity to affected and identified farms that reported outbreaks of Avian Influenza in 2024. The long-term objective is to assess the feasibility, bottlenecks, facilitators, and barriers in implementing an early warning system for AIV. The objectives for the first phase of the study are:

- To assess the presence of AIV in surface water and wastewater samples taken from areas within 1-5 km and 5-10 km distance zones from epicentres of outbreaks that occurred in 2024.
- To evaluate the feasibility and scope of environmental surveillance as a tool for an early warning system for AIV.

The Principal Investigator of the study is Dr. Jithesh V, Executive Director of SHSRC Kerala. While serving as the Director of the One Health Programme in the previous financial year and into the mid of the current financial year, he oversaw the development of the research proposal, which later received approval from the ICMR. Currently, staff recruitment for the study has been completed, and the selection process for sampling sites in water bodies is underway.



**Collaboration with the National Institute of Virology**

The National Institute of Virology (NIV) conducted a field investigation on West Nile Fever (WNF) to assess the extent of disease spread, identify at-risk populations, and study its epidemiology. This research was carried out in collaboration with the Directorate of Health Services, with SHSRC-Kerala entrusted by the government to coordinate the field investigation. The SHSRC-Kerala team provided essential support to the NIV team, assisting in field studies and data collection to ensure a comprehensive understanding of the disease.

● **Investigation of West Nile Fever infection cases in Kerala**

✔ **Status: Ongoing**

The focus of this study is the epidemiological characterisation and verification of West Nile Virus (WNV) infection cases in Kerala, namely the districts of Ernakulam, Thrissur, Malappuram and Kozhikode.

It aims to assess the extent of WNV infections within the community by examining a broad clinical spectrum of cases. The study also includes a retrospective analysis to identify undetected recent cases and aims to identify patients with severe symptoms and explore the risk factors contributing to the severity of the disease. The findings will help enhance awareness and improve preparedness against WNV in the region.

This study thus aims to investigate the health care requirements of transgender individuals through the process of seeking general health care and gender affirmative care (GAC). It seeks to uncover the medical, physical and psychological health care needs. The study's rationale lies in addressing the current research gap regarding the general health care needs and special gender-affirmative care needs of transgender individuals who have done GAS.

The study is undertaken to develop a comprehensive understanding of the distinct health care needs transgender individuals seeking GAC have during the pre-surgery, intra-surgery and post-surgery periods, with the goal of

improving health care services and outcomes for this population. The study is conducted in collaboration with Mariwala Health Initiative. Currently right now the proposal has been prepared and the IRC has cleared.

### ● **Readiness and Understanding of Trans Community Link Workers (CLW) to Perform their Role as a Liaison Between Trans Community and Government System**

### ✔ **Status: Ongoing**

This research study is being conducted to explore the Community Link Worker Program in Kerala, specifically to understand the roles, responsibilities and skills of community link workers in performing their task of acting as liaisons between the trans community in Kerala and the state government/health system. In addition, the researchers aim to explore any gaps or barriers that may hinder the link workers from completing their tasks, as well as any further training or support they may need to better perform their roles and responsibilities.

The research objectives are as follows:

- To identify the roles and tasks of link workers to perform their role as liaisons
- To explore existing and required knowledge and skills required by link workers to perform their roles as liaisons



**Mariwala Health Initiative (MHI)** is a funding agency dedicated to supporting innovative mental health initiatives, with a strong focus on making mental health services accessible to marginalized individuals and communities. In collaboration with SHSRC-Kerala, MHI is working towards creating a queer-inclusive healthcare system by promoting research and conducting workshops. This partnership aims to strengthen healthcare support for marginalized communities, fostering a more inclusive and equitable health system for all.

### ● **Health Care needs of Transgender Persons in Kerala**

### ✔ **Status: Ongoing**

SHSRC-K has been extensively involved in ensuring equitable health care to the transgender community in Kerala, and in previous interactions with community members, multiple requests for documenting the issues faced by them in the period leading up to the surgery and post-surgery have been received. All transgender people deserve universal access to general health care needs and gender affirmative care (GAC) that is reliable, affordable, and safe. Due to the widespread stigma and discrimination faced by trans persons, the need to scale up GAC services provided by sensitised healthcare personnel across the country is urgent.

- To identify the functioning structure (including details of hierarchy and reporting) of the Community Link Worker Program in Kerala

The Initial Phase of the study is undergoing with the Mariwala Health Initiative

### 🕒 Unveiling the Kerala Paradigm: Crafting a Comprehensive Statewide Strategy to Prevent Suicides

#### ✅ Status: Ongoing

The study intends to address and contribute to the development of targeted strategies aimed at addressing the unique issues pertaining to this city. Through an exploration of suicide patterns and underlying factors, the research seeks to provide valuable insights that will aid in the formulation and implementation of effective measures tailored to the distinct challenges of Kerala.

The Primary & Secondary objectives of the study are:

- To understand the perceptions of stakeholders like policy makers and implementing officers (institutional and field level) regarding suicides, their prevention, management and follow-up in the state
- To understand the perceptions of community gatekeepers like Police Officers, Teachers, Spiritual leaders and others, in addition to health care workers
- To explore the existing facilitators and barriers in delivering services for the prevention and management of suicides in Kerala
- To explore the challenges faced by caretakers in families where bereavement has occurred due to suicide
- To explore the psychosocial causes and challenges that the suicide attempt survivors experienced both before the attempt and while accessing services
- To know the current pattern of suicides in the state, as per the state data

SHSRC-Kerala have drafted the proposal to the Mariwala Health Initiative, and the Initial phase

Discussion is undergoing on the way.



## Collaboration with the Women & Child Development Department

The Women and Child Development Department, in collaboration with SHSRC-Kerala, is conducting a study to assess the impact of the Poshaka Balyam scheme. This initiative provides milk and eggs to children in Anganwadis, aiming to improve their nutrition and overall well-being. The research will help to evaluate the scheme's effectiveness and guide in finding out future improvements.

### 🕒 Assessment of the impact of “Poshaka Balyam” on child undernutrition

#### ✅ Status: Ongoing

The primary objective of this study is to evaluate whether the “Nutritious Childhood” (or “Poshaka Balyam”) scheme, launched in 2022, has contributed to a reduction in the prevalence of stunting, wasting, and underweight conditions among Anganwadi child beneficiaries in Kerala, India. Currently, a memorandum of understanding between the Department of Women and Child Development and SHSRC-K has been signed, Institutional Research Committee Clearance has been received, and commencement of data collection is to follow.

# INSTITUTIONAL RESEARCH COMMITTEE

The Institutional Research Committee of SHSRC- K plays a vital role in providing technical assistance to researchers in developing and refining research proposals. Finalized proposals are submitted to the Institutional Ethics Committee for ethical clearance. IEC ensures all research meets standards with adherence to ethical guidelines and safe practices. During the financial year 2024- 25, SHSRC- K conducted 3 IRC Meetings



*10th IRC Meeting conducted at SHSRC-Kerala*

# INSTITUTIONAL ETHICS COMMITTEE

In SHSRC Kerala, the Institutional Ethics Committee (IEC) plays pivotal roles in facilitating research endeavours. The Institutional Ethics Committee (IEC) convened two meetings (8th & 9th) this fiscal year 2024-2025. IEC reviewed 9 research studies during their respective meetings.



*9th IEC Meeting conducted at SHSRC-Kerala*

# Policy support for Department of Health Services

## ● Referral Protocol

Existing guidelines on the referral protocol system in the state for referring cases from secondary- to tertiary-level institutions (district hospitals, general hospitals, medical college hospitals, and other specialty institutions) were initially developed against the backdrop of the need for a well-organised referral system in Kerala. Healthcare institutions at the primary, secondary, and tertiary levels of care across the state, however, vary in terms of their infrastructure, availability of equipment, and human resources. There was a need for these existing guidelines for referring cases to higher-level institutions to be further contextualised and made applicable to the realities of service delivery in the state.

In the previous financial year onwards SHSRC-Kerala was entrusted with the responsibility of drafting the revised guidelines catering to the needs of the state. Efforts were undertaken to categorise healthcare institutions, in terms of their infrastructure, the availability of human resources and other diagnostic services for the ease of physicians to refer and receive referrals of their patients. These guidelines were aimed to benefit health professionals working within the health system and improve patient health outcomes.

To draft these revised referral guidelines, state-level workshops and the formation of expert committees were undertaken. Revisions were made and forwarded to the Directorate of Health Services and the Directorate of Medical Education for review and suggestions.

At the beginning of this financial year, the referral protocol underwent several unofficial revisions following its submission to the Directorate of Health Services and the Directorate of Medical Education. These changes were made through a

series of online and offline meetings and discussions. After extensive vetting, a final vetting workshop was conducted at SHSRC-Kerala Hall 1, where the referral protocol was finalized.

## ● Public Health Cadre

To revamp the Public Health Management Cadre, the Government of Kerala's Health Department conducted several official meetings with SHSRC-Kerala and other committee members to restructure the existing public health system. As part of this initiative, Hon. Health Minister Veena George chaired a meeting with health officials to discuss and refine the proposal for the cadre's revamp.

At the request of the Government of Kerala and the Health Department, SHSRC-Kerala prepared a draft proposal outlining the restructuring plan and submitted it to the Directorate of Health Services for verification in this financial year. The primary objective of this proposal is to develop a Public Health Management Cadre that can be effectively integrated into Kerala's health system. It also aims to define the structure and functions of the cadre, ensuring a more organized and efficient public health framework in the state.

As a part of the framework of the Public Health Cader SHSRC-Kerala receives the official invitation from an international conference as a resource person to talk on a session on State Experiences with PH Cader: Kerala from the Department of Public Health Community Medicine, Kasaragod, Kerala

## Public Health Act

In the previous financial year of 2023-24, the Government of Kerala, Dept. of Health and Family Welfare took a significant step by implementing the Public Health Act. To ensure the effective execution of the Act, the Health and Family Welfare Department was tasked with formulating the necessary rules. In this financial year, a 12-member committee was established to oversee this process. The committee is chaired by the Directorate of Health Services (DHS), with the State Health Systems Resource Centre-Kerala (SHS-RC-Kerala) Executive Director Dr. V Jithesh serving as the convener. The remaining members were appointed to contribute to the development of the rules.



*Public Health Act meeting Conducted at SHSRC-Kerala*

Once the DHS completes its verification and evaluation of the rules and recommendations, they will communicate with the team member for the modification and be forwarded to the Kerala Government, Health and Health and Family Welfare Department for further review and amendments. Based on the feedback and suggestions from higher officials, SHSRC-Kerala will revise and redraft the rules, accordingly, ensuring that the final version aligns with the objectives of the Public Health Act and addresses the needs of the public health system in Kerala



*Public Health Act meeting Conducted at SHSRC-Kerala*

Given its role as the convener, SHSRC-Kerala played a pivotal role in drafting the rules. To facilitate this, SHSRC-Kerala organized both online and offline meetings. One physical meeting was conducted in the initial stage of preparing the draft and other one is in the final stage to evaluate and prepare the draft,

followed by the initial physical meeting several online discussions were conducted to draft rules. During these meetings, the committee members deliberated on the draft, which was subsequently sent to the DHS. As the committee reviewed the Act, they recommended certain amendments to enhance its effectiveness. These recommendations were highlighted by SHSRC-Kerala and the team members during the rule-making process.



*Public Health Act meeting Conducted at SHSRC-Kerala*

## Code Grey Protocol

To safeguard healthcare workers and protect health institutions, the Health Department has introduced the Code Grey Protocol. This protocol establishes guidelines on law, order, and conduct concerning healthcare professionals, ensuring a safer and more secure working environment. By reviewing and cross-checking the existing Code Grey Pro-

protocol, the Health Department ensures its effectiveness in maintaining law, order, and the protection of healthcare workers and institutions.

The Code Grey Protocol was approved and subsequently published by the Hon'ble Minister Veena George at the end of the previous financial year. However, to ensure effective implementation at the operational level, institutions required clear directives and orders.

To facilitate this, the State Health Agency has entrusted SHSRC-Kerala to help fulfill set of key tasks, including:

- Formation of a State-Level Resource Group
- Development of a comprehensive training module
- Implementation of the Code Grey Protocol at the hospital level
- Creation of a toolkit, Standard Operating Procedures (SOPs), policy documents, and other necessary resources

In response to these directives, SHSRC-Kerala conducted a preliminary meeting on July 2, 2024. The meeting brought together representatives from the State Health Systems Resource Centre, State Health Agency, National Health Mission, and Aardram Mission. During the discussion, members of the State-Level Resource Group were identified to oversee the implementation of the Code Grey Protocol across the state.

Following the meeting, SHSRC-Kerala drafted a list of State-Level Resource Group members and provided necessary directions to ensure the protocol's successful execution. This list of resource group has been submitted to the Minister's office for review and approval.

## 🌈 Queer Inclusive Health System Project

As part of the Queer Inclusive Health System in Kerala, SHSRC-Kerala, in collaboration with the Mariwala Health Initiative, conducted the state's first-ever Queer Affirmative Counselling Practices Residential Programme in the 2023-24 financial year. This initiative trained government healthcare providers, including doctors and Bhoomika Centre

counsellors, equipping them with essential skills and knowledge. The programme focused on perspective-building to help participants recognize systemic inequalities and understand their impact on mental health. It also provided practical tools to address distress and support the well-being of LGBTQIA+ individuals, fostering a more inclusive and empathetic healthcare system.

As part of the Queer Inclusive Health System Project, SHSRC-Kerala conducted four training workshops this financial year for state-level officials, health workers, Bhoomika counsellors, public relations officers, Transgender Community Link Workers (CLWs), and selected district-level officials. These workshops mark the beginning of the second phase in developing a Queer Inclusive Health System in Kerala.



*Queer Inclusive Health System Project Peer Support Practices (PSP) Training for Transperson Community Link Workers in Kerala*

A significant shift in knowledge and awareness regarding queer individuals (LGBTQIA+) was a key outcome of the workshops. Various institutions across the country are approaching SHSRC-Kerala to share expertise in this field, both as faculty and panelists. The next set of training has been charted for the next financial year with MHI to contribute discussions and training sessions. This growing recognition highlights the impact of SHSRC-Kerala's efforts in fostering an inclusive and equitable healthcare system for queer individuals.

# Technical support for Department of Health Services

## Disaster Management

The State Health Systems Resource Centre (SHSRC) Kerala plays a crucial role in disaster management across the state. This financial year, Kerala faced a significant public health challenge: the Nipah virus outbreak in Malappuram District on July 20. However, through technical expertise and efficient management, the state successfully averted a major crisis. To assess the situation and develop preventive measures, the Kerala Government held strategic meetings with SHSRC Kerala and proposed action plans.

The Nipah outbreak emerged in July, marking the first occurrence of the virus in Kerala this financial year. Acting swiftly, Health and Family Welfare Minister Veena George convened an emergency meeting with the heads of the health department to coordinate a response. SHSRC Kerala's Executive Director, V. Jitesh, actively participated in the meeting and joined the investigation team to trace the source of the outbreak.

With extensive experience and in-depth expertise in Nipah virus evaluation, SHSRC Kerala provided critical support to the health department in assessing and managing the situation. Notably, in the previous year, SHSRC Kerala had drafted a proposal to establish the Kerala One Health Center for Nipah Research (KOHCCR) in Kozhikode District and also developed a Standard Operating Procedures for Nipah related Studies. Building on this initiative, the organization has now launched an implementation research study aimed at developing an early warning system to detect future Nipah outbreaks in Kerala.

## Kerala State Best Nurse Award

The Directorate of Health Services has entrusted SHSRC-Kerala with drafting the selection criteria for the Best Nurse Award in the health department. Following this directive, SHSRC-Kerala developed the criteria and drafted the report in the previous financial year.

Recognizing its contributions, the Department has appointed SHSRC-Kerala as a member of the State-Level Scrutinizing Committee for the State Nurse Award 2024. This committee is responsible for evaluating all nominations received under the Clinical Nursing and Public Health Nursing categories based on merit.

The State-Level Award Committee will then unanimously recommend one outstanding nurse from the Clinical Nursing category and one Auxiliary Nurse and Midwife (ANM) from the Public Health Nursing category for the Best Nurse Award 2024.

Every year, on May 12, the Best Nurse Award is presented in honour to the memory of Sister Lini Puthusserry,

## Brahmapuram Fire Accident

In March 2023, a fire broke out at the Brahmapuram waste plant due to the emission of toxic smoke, an incident that is well known. Following this, SHSRC-Kerala drafted a Report and Plan of Action on the Health Impact of the Incident for the Directorate of Health. The report was prepared in the previous financial year at the request of the Kerala Health Department.

After being reviewed by health officials and other relevant departments, including the Pollution Control Board, multiple meetings were conducted to discuss the report and its findings. SHSRC-Kerala then vetted the draft with expert stakeholders

from the Health Department and incorporated their feedback before finalizing the report.

In the current financial year, SHSRC-Kerala has officially submitted the Final Report and Plan of Action on the Health Impact of the Brahmapuram Fire Incident for implementation.

## ● Kerala State Best Doctor Award

The Government of Kerala's Health and Family Welfare Department annually conducts the Best Doctor Award recognizing outstanding performers in the field. In the Previous financial year, the Directorate of Health Services tasked SHSRC Kerala with revising the award criteria, which was approved by the Director of Health and the criteria want to be constant for every year.

In the current financial year, SHSRC-Kerala conducted a thorough review of the revised award criteria, finalizing the selection guidelines for best doctor award categories through multiple discussions with the Directorate of Health Services. Based on mutual decisions from both sides, the Government approved the revised guidelines, establishing them as the final criteria for the Best Doctor Award. The finalized criteria, refined by SHSRC-Kerala, have now been issued as a Government Order and formally adopted as the official Guidelines for Selection.

## ● Health Cooperation with Cuba

As part of the bilateral collaboration initiated in the previous financial year between the Kerala Health Department and the Cuban Health Cooperation, a working group was established under the chairmanship of the Principal Secretary to coordinate activities. SHSRC-Kerala is also an active member of this group, playing a key role in facilitating the collaboration.

Through detailed discussions and multiple rounds of consultation, the working group identified four key areas for collaboration:

- Oncology
- Diabetic Foot Management
- Immunology & Vaccines

## ● Neurological Disorders

To oversee these focus areas, subcommittees were formed under the working group. Additionally, SHSRC-Kerala took the lead in preparing the concept note for the collaboration, drafting press statements, and designing informational booklets to support the initiative.

In the current financial year, the Kerala Health Department has requested a comprehensive report detailing the activities already undertaken in each focus area, along with a concept note outlining future collaborative efforts. This initiative aims to facilitate interactions with the Cuban counterparts and secure approval from the Ministry of External Affairs.

To develop this report, a meeting was chaired by the Additional Chief Secretary, bringing together the conveners of the four working groups and subgroups focused on health sector collaboration with Cuba. Following the submission of each group's proposal, multiple approvals will be required from the Union Ministry of Health and Family Welfare, the Indian Council of Medical Research (ICMR), and the Ministry of External Affairs before the state can formally engage with Cuban experts.

At the request of the Additional Chief Secretary of the Health and Family Welfare Department, SHSRC-Kerala has been designated as the coordinator for drafting and securing approval for the proposals from the four working groups and subgroups.

## ● Capacity building for elderly care in the state

At the end of the previous financial year and the beginning of the current one, SHSRC-Kerala conducted a pioneering exercise intervention aimed at enhancing the well-being of the elderly. This initiative focused on training resource persons from Local Self-Governments (LSGs), community-living older adults, ASHAs, Anganwadi workers, and volunteers. The program featured a structured exercise regimen specifically designed for elderly individuals living in the community.

In the previous financial year, the program was im

plemented at Parakkal U.P. School in Manickal, in collaboration with the Achutha Menon Centre for Health Science Studies (AMCHSS), Sree Chitra Tirunal Institute for Medical Sciences and Technology (SCTIMST), Trivandrum, Health Action by People (HAP), and Manickal Grama Panchayat, Thiruvananthapuram.

Following the success of this community engagement and training program for the elderly in Manickal Grama Panchayat, discussions were initiated to replicate a similar initiative in Nilambur Municipality, in collaboration with the NGO Health Action by People (HAP).

After ongoing discussions and communications, the Nilambur Municipal Council expressed its willingness to implement the program. Consequently, HAP organized a consultative meeting at KILA, inviting officials from various departments and SHSRC-Kerala. As a result, in the current financial year, SHSRC-Kerala conducted training for the program titled “Vayojana Souhrudha Nilambur,” which focused on fall prevention and social engagement among community-living elderly individuals.

Dr. Aravind Chandru B, Research Officer at SHSRC-Kerala, served as the resource person, providing technical and scientific support for the community engagement and training program. He highlighted the propensity of elderly individuals to experience falls, citing data from the research studies under the healthy ageing category of SHSRC-K. The training modules and practical demonstrations were designed based on SHSRC-Kerala's research insights and findings, ensuring a well-structured, evidence-based, and impactful intervention at the community level, showcasing organization's ethical implications to the population and to the State.



*Inaugural ceremony of Vayodeepam Programme*

## ● Collaboration with the Australian Government

In the current financial year, the Australian High Commissioner held a roundtable conference with Honourable Health Minister Veena George and other senior health officials to discuss collaboration research and a bilateral exchange programme between Kerala and the Australian Health Department.

Following the discussions, the Additional Chief Secretary of the Health and Family Welfare Department initiated the selection of a team to oversee research contributions, exchange programmes, and communication efforts between the two regions. The contribution and experience in research of SHSRC-Kerala has been recognized by the health department and chosen as one of the seven members selected by the Kerala Health Department to be part of this significant bilateral partnership.

This collaboration marks a crucial step in strengthening international ties and advancing healthcare research and exchange between Kerala and Australia.

## ● Modernisation of Selected Areas of Mental Health Centre

At the request of the Additional Chief Secretary of the Health and Family Welfare Department, SHSRC-Kerala drafted a report for the rebuilding and reconstruction of selected areas of Mental Health Centres in Kerala. As part of the first phase, SHSRC-Kerala selected three major mental health centres for field investigation to prepare the report for modernization. The selected centres were the Mental Health Centre, Thiruvananthapuram, Kozhikode and Thrissur.

During this financial year, the SHSRC-Kerala team visited, investigated, and evaluated the Mental Health Centres in Thiruvananthapuram and Kozhikode, and prepared a report based on the current conditions. The report primarily focused on cost-effective modifications that could be implemented within a short timeframe. It emphasized modernization and improvements to the infra-

structure of the centres, including patient living areas, among other aspects. Key recommendations included replacing vertical bar cells with toughened glass cells, increasing roof heights to reduce the risk of patient suicide, renovating recreation areas, and providing skill development opportunities for patients to enable self-sufficiency upon reintegration into society.

The detailed reports for the Mental Health Centres in Thiruvananthapuram and Kozhikode were submitted to the Additional Chief Secretary. Based on the findings and recommendations of these reports, the Thrissur Mental Health Centre will also be investigated by the SHSRC-Kerala team.

The Kerala Government has already developed a master plan to rebuild all mental health centres in the state. However, prior to the implementation of this long-term plan, short-term renovations will be carried out based on the recommendations outlined in the SHSRC-Kerala report.

### 🌐 **Study on Mass Media, Publication and Offset Press**

SHSRC-Kerala was invited by the Directorate of Health Services to conduct a comprehensive study on the Mass Media, Publication, and Offset Press wings under the Health and Family Welfare Department. The study aims to evaluate the current operational structure, identify vacant positions, and determine the essential roles required to meet the demands of modern media in the evolving healthcare communication landscape.

To achieve this, SHSRC-Kerala conducted field visits, held detailed discussions with current employees, and consulted with the State Mass Education Officer and Mass Media Officers to understand the qualifications and experience of existing personnel. Additionally, an in-depth assessment was carried out at the Directorate of Health Services to gather relevant insights.

The findings from this evaluation are now being compiled into a draft report, which will provide actionable recommendations to optimize the department's media and communication functions. This

initiative underscores SHSRC-Kerala's commitment to supporting the Health and Family Welfare Department in enhancing its public health outreach and aligning its operations with contemporary media requirements.

### 🌐 **Evaluation of the Pilot Implementation of the Integrated Health Care Delivery System in Kerala**

In alignment with the National Health Mission (NHM), the Kerala Development and Innovation Strategic Council (K-DISC) implemented a referral navigation system known as the Integrated Health Care Delivery (IHCD) System at selected healthcare facilities in the Vellarada and Perumkadavila health blocks. To assess the current status of this pilot initiative, the State Health Systems Resource Centre – Kerala (SHSRC-K) was entrusted with the responsibility of conducting a situational analysis, as directed by the NHM.

The objective of this evaluation study was to assess the effectiveness, efficiency, and overall impact of the IHCD system across all levels of care—primary, secondary, and tertiary.

For data collection, the research team visited 15 health institutions selected from the Perumkadavila and Vellarada Health Blocks. These institutions represented all three levels of the healthcare system. The study included both patients and healthcare providers, using facility assessments, in-depth interviews, and key informant interviews as primary research tools.

Both qualitative and quantitative data were analyzed, and the findings were compiled into a comprehensive report. Key results from the study were presented during a stakeholder meeting held on April 3, 2025, by Dr. Jathavedus Mohanlal, Assistant Director, SHSRC-K.

# Centre for One Health

The Government of Kerala has initiated steps to implement the One Health Programme in the State to ensure healthy living of people through a collaborative, transdisciplinary and multisectoral approach at different levels and by involving multiple stakeholders. As in many other health initiatives, Kerala is the pioneer in the country in implementing the One Health Programme.

In the previous financial year, the first phase of the One Health Programme was launched in

four Pamba basin districts—Pathanamthitta, Alappuzha, Kottayam, and Idukki—under the Rebuild Kerala Initiative (RKI).

SHSRC-Kerala plays a key role in the programme's implementation, serving as the nodal agency responsible for conducting workshops and research studies. Two major workshops—the Dissemination and Planning Workshop of One Health and the Induction Programme for District Mentors—were led by SHSRC-Kerala to strengthen the initiative.

Up until the middle of the current financial year, SHSRC-Kerala has continued to play a pivotal role in advancing and implementing the One Health Programme, laying the groundwork for its next phases.

## One Health Programme- Capacity Building & Planning Workshop

Under the leadership of the State Health Systems Resource Centre Kerala (SHSRC-K), a workshop was organized as part of the One Health Programme. The Capacity Building and Planning workshop was conducted in preparation for training the staff from the health department and related departments in the four One Health Programme implementing districts—Kottayam, Pathanamthitta, Alappuzha, and Idukki. The session was addressed



Health Department Deputy Secretary, Shikha Surendran, IAS, addressing the Capacity Building & Planning Workshop.



Dr.V.Jithesh addressing the sessions



Workshop Group Discussion

by Health Department Deputy Secretary Shikha Surendran IAS, SHSRC-K Executive Director Dr. V. Jithesh, and One Health State Nodal Officer Dr. Ajan M.J. Additionally, One Health Nodal Officers from the four districts, along with state and district-level nodal officers from various departments, actively participated in the workshop.

## Joint Outbreak Investigation Planning Workshop

A workshop was conducted under the leadership of SHSRC-Kerala for the One Health Programme to develop Standard Operating Procedures (SOPs) for Joint Outbreak Investigations. Integrated surveillance efforts involving multiple departments to detect, confirm, and control the spread of infectious diseases that pose a serious risk to humans.

Alongside the Health Department, officials from Animal Husbandry, Agriculture, Pollution Control, Food Safety, Dairy Development, Fisheries, Water Authority, Forest, and Medical Education Departments participated in the workshop. The formulation of these guidelines, based on the One Health approach, will enhance interdepartmental coordination, information exchange, and disease control measures, making outbreak response more efficient.

The SOPs will focus on the early detection, confirmation, and containment of priority diseases in Kerala, including Leptospirosis, Dengue, Chikungunya, Zika, Avian Influenza, Encephalitis, Diarrheal Diseases, Japanese Encephalitis, West Nile Fever, Monkeypox, and Nipah.

Previously, during an Avian Influenza outbreak, the Animal Husbandry Department took the lead in surveillance efforts. However, with the new SOPs in place, multiple departments including Health, Local Self-Government, Agriculture, and Food Safety will collaborate in integrated disease investigations, ensuring better coordination, data sharing, and timely interventions.



*Joint Outbreak Investigation Planning Workshop*

The two-day workshop was held at the Kerala State Institute of Health and Family Welfare, Thiruvananthapuram, and was attended by Principal Secretary,

Health & Family Welfare Department A.P.M. Mohammed Haneesh IAS, Dr. K.J. Reena Director Health Department, Dr. K.P. Reetha Health Department Additional Director (Public Health), Dr. Ruchi Jain, Regional Deputy Director, Union Ministry of Health & Family Welfare, Dr. V. Jithesh, SHSRC-Kerala Executive Director & Centre for One Health Nodal agency, Dr. M.J. Ajan, State Nodal Officer, One Health Programme.



*Joint Outbreak Investigation Planning Workshop*

In this financial year, As a preparatory step for the implementation of the One Health Programme, two Training Needs Assessment (TNA) Workshop was conducted by the State Health Systems Resource Centre Kerala (SHSRC-K). The objective was to enhance the existing knowledge and skills of various Health Department personnel and to develop a structured training curriculum for the programme.

The first workshop was held on April 19-20, 2024 at the Health & Family Welfare Training Centre, Thiruvananthapuram. Health officials from Kottayam, Idukki, Alappuzha, and Pathanamthitta the One

Health Programme-implementing districts—participated. Representatives from 10 different categories of health staff, ranging from Medical Officers to Ministerial-level employees, attended the session. The training curriculum for health department personnel under the One Health Programme was

developed through group discussions, ensuring a structured and needs-based approach.

The Second workshop was held on May 3-4, 2024 at the Kerala State Health & Family Welfare Institute Hall, conducted to evaluate the training require-

ments of personnel from various departments. The objective was to identify the necessary knowledge and skills for effective programme implementation and to develop a structured training curriculum with active participation from the employees.

The Key sessions of the workshop were led by Dr. Jithesh V Executive Director, SHSRC-K & Centre for One Health-Kerala, Dr. Ajan M.J., State Nodal Officer, One Health Programme Sateesh Chandran, World Bank Consultant Sibi Augustin, One Health Resource Person

This workshop played a crucial role in aligning training strategies with the programme's objectives, ensuring multi-sectoral collaboration and an integrated approach to addressing public health challenges



*Training Needs Assessment (TNA) Workshop*

It was inaugurated by Dr. Reetha K.P., Additional Director (Public Health), Health Department. Participants included One Health nodal officers and representatives from key departments such as Agriculture, Animal Husbandry, Food Safety, Forest, Drug Control, Fisheries, Environment & Climate Change, and Irrigation.



*Training Needs Assessment (TNA) Workshop*

# National Level Programmes

## 16th Common Review Mission (CRM) of the National Health Mission (NHM)

State Health System Resource Centre, Kerala congratulates Dr. Jathavedus Mohanlal, Dr. Manju Madhavan, Dr. Bhavya B Fernandez, Dr. Aravind Chandru B, and Ms. Vismaya Raj K (Research Officers at SHSRC Kerala) who have been selected by NHSRC (National Health Systems Resource Centre) to be a part of the team for the 16th Common Review Mission (CRM) of the National Health Mission (NHM). After the National-level briefing workshop on 18 November 2024 at Dr. Ambedkar International Centre, New Delhi, they will leave for the allotted states along with other team members from MoHFW, NHM, NHSRC and academic institutions.

- Dr. Jathavedus Mohanlal (Haryana)
- Dr. Manju Madhavan (Utharakhand)
- Dr. Bhavya B Fernandez (Madhya Pradesh)
- Dr. Aravind Chandru B (Mizoram)
- Ms. Vismaya Raj K (Odisha)



SHSRC-K Team Members at Common Review Meeting of NHM

The CRM organized annually by the Ministry of Health and Family Welfare (MoHFW) is one of the important monitoring mechanisms under NHM. The Mission visits selected States to evaluate the effectiveness of several National Programmes with the National Health Mission. The objectives of the CRM is to undertake a rapid assessment of implementation status of NHM and key strategies and priority areas, and analyse strengths and challenges with respect to health system strengthening, identify trends in progress of key indicators, particularly relating to coverage, equity, quality and affordability at state, district/ sub-district, and community level, document innovations and best practices, evaluate readiness of states to undertake implementation of new initiatives, review the progress and coordination mechanisms with various partners. Fifteen CRMs undertaken so far have provided valuable understanding of the strategies which were successful and those which warranted mid-course adjustments.

## NHM - HWC - NHSRC - Workshop cum training session on strengthening CPHC

SHSRC-K participated in a workshop cum training session in New Delhi organised by the National Health Systems Resource Centre from July 18 to 20, 2024 as part of the five-year action plan to develop and strengthen the health system under the Viksit Bharat @2024 Initiative. The workshop aimed to strengthen the Comprehensive Primary Health Care system through Ayushman Arogya Mandirs. State Nodal Officers from Kerala, Tamil Nadu, West Bengal, Andhra Pradesh, and Pondicherry attended the first phase of the workshop cum training sessions. The workshop focused on discussing the 12 services provided through Ayushman Arogya Mandhirs to enhance their development and strengthening factors, in line with achieving the Viksit Bharat @2024 Initiative. From Kerala, State Nodal Officer Sr. Consultant (Social Development) Smt. Seena KM, State Nodal Officer (CPHC & NUHM) Dr. Abey Sushan, State Nodal Officer (MH) Dr. Lipsy

Paul, Public Health Specialist (NCD) Dr. MS Manu, and Senior Research Officer SHSRC-K Dr. SR Ameena attended the workshop cum training session.



*National Level Workshop cum Training of State Nodal Officers*

### ● **National Health Systems Resource Centre's (NHSRC's) Scientific Review Committee (SRC)**

NHSRC is a national level technical support organization that provides scientific and ethical advice to the Government of India on health research. Dr. V. Jithesh, Executive Director of SHSRC Kerala, was one among the selected public health experts invited to be a part of National Health Systems Resource Centre's (NHSRC's) Scientific Review Committee (SRC). The second SRC meeting was conducted on 30 November 2024 at NIFHW campus, Delhi, was convened to review Research Proposals submitted to the Institutional Ethics Committee, NHSRC.



*NHSRC's Scientific Review Committee*

### ● **DSIR – Screening committee meeting**

In the current financial year, SHSRC-Kerala achieved a significant milestone by securing registration and approval from the Department of Scientific and Industrial Research (DSIR). This approval enables SHSRC-Kerala to avail customs duty exemptions, marking a crucial step forward in its operational capabilities. The successful registration was accomplished following a compelling presentation by the SHSRC-Kerala team at the Screening Committee meeting held on October 18 at Technology Bhavan, New Delhi. This accomplishment underscores our commitment to advancing scientific research and innovation while optimizing resource utilization. The Registration is valid up to 31.08.2027.

### ● **ICMR research training workshop in Jodhpur**

A two-day workshop was organized by the Indian Council for Medical Research (ICMR) on August 29-30 for training the multi-state research team of the project titled "Convergence and Integration of Programmes and Leveraging Technology for Enabling Healthcare Teams in the Delivery of Equitable, High-Quality Comprehensive Primary Healthcare Services through Health & Wellness Centres" (CONVERTECH-HWCs). The workshop took place at ICMR's National Institute for Implementation Research on Non-Communicable Diseases (NIIRNCD) in Jodhpur, Rajasthan and was led by Dr. Bontha V. Babu, Director in

ICMR's NIIRNCD, Jodhpur, and Scientist G and Head, Division of Socio-behavioural, Health systems & Implementation research (SHI) of ICMR New Delhi.



*ICMR Research team at research training workshop*

The workshop was primarily conducted to demonstrate data collection on digital application in particular for the Project Technical Support staff. RedCap, a secure web application, was introduced and demonstrated and is well-suited for both online and offline data capture in field settings. The workshop also discussed survey tools and methodology. Other than Kerala, Orissa, Meghalaya, Uttarakhand, and the Union Territory of Dadra and Nagar Haveli, also participated. Each research team included Principal Investigator/Co-Principal Investigators, Consultants and Project Technical Support staff.



*ICMR Research CONVERTECH-HWCs team*

The State Health Systems Resource Centre-Kerala (SHSRC-K) is the partner for the CONVERTECH-HWC study in Wayanad district of Kerala. This initiative aims to upgrade 204 Sub-Health Centers (SC-HWCs) to provide 12 essential packages of services, and wellness services. SHSRC-K, Senior Research Officer and Co-Principal Investigator Dr. S.R. Ameena, Proj-

ect Consultant- (Medical) Dr. O. Sruthi, Project Consultant- (Non-Medical) Dr. V.K Anshad and ten Project Technical Support Staffs participated in the workshop.



*ICMR Research Participants at research training workshop*

## ● National Health System Resource Centre's (NHSRC's) Research Methodology Workshop

Dr. Jathavedus Mohanlal, Assistant Director of SHSRC-Kerala, actively participated in a two-day Research Methodology Workshop organized by the National Health System Resource Centre (NHSRC) on October 25th and 26th in New Delhi. The workshop provided valuable insights into the Knowledge Management Division and advanced statistical analysis using R software. Designed to strengthen research capabilities, the event aimed to support States and Union Territories in drafting high-quality research proposals and conducting impactful research studies. The workshop saw enthusiastic participation from SHSRC team members across various States and Union Territories, fostering collaboration and knowledge exchange to enhance public health research initiatives



*NHSRC's Research Methodology Workshop*



*Dr. Jathavedus Mohanlal at NHSRC's research methodology workshop*

### ● **User Case development workshop for Nipah disease medical counter measures**

Dr. V. Jithesh, Executive Director of SHSRC-Kerala, attended a user case development workshop focused on Nipah disease countermeasures. The workshop was organized by the Indian Council of Medical Research (ICMR), the Coalition for Epidemic Preparedness Innovations (CEPI), and the International Severe Acute Respiratory and Emerging Infection Consortium (ISARIC), was held on April 23–24, 2024. The insights and knowledge gained from the workshop have made valuable contributions to the research proposals and technical documentation developed by SHSRC-Kerala for Nipah-related studies. They also play a crucial role in enhancing the state's preparedness and response strategies for Nipah and other emerging infectious diseases.

### ● **NIHR funded short course on Health Data Science and Economic Evaluation in the Context of Multiple Long-Term Conditions (MLTCs)**

Dr. Parvathy Thampy S, Research Officer at SHSRC-Kerala, on deputation, attended a four-day interactive in-person short course on Health Data Science and Economic Evaluation in the Context of Multiple Long-Term Conditions (MLTCs) at the Indian International Centre, New Delhi from 3rd – 6th March. This comprehensive program, conducted in collaboration with esteemed institutions such

as ICMR, NIIRNCD, RMRCBB, the All India Institute of Medical Association, the University of Nottingham, Brunel University, College of London, and Loughborough University, provided an in-depth introduction to health data science and the economic evaluation of healthcare interventions.

The course delved into critical areas such as basics of health economics, health data science, and strategies for integrating these in multimorbidity research. Additionally, the program featured panel discussions with key national policymakers, clinicians, and public health practitioners. These discussions explored innovative ways to enhance care integration for individuals with MLTCs and to bolster national research capacity.

### ● **Gujarat Public Healthcare Challenge: Idea for Change Invitation**

Mrs. Vismaya Raj K, Research Officer at the State Health Systems Resource Centre-Kerala (SHSRC-K), has achieved a remarkable milestone by securing the second position in the Public Healthcare Challenge: Idea for Change, organized by the State Health Systems Resource Centre-Gujarat (SHSRC-G). This prestigious competition invited innovative ideas to address pressing public health challenges in Gujarat.

Mrs. Vismaya's winning proposal, titled "Transforming Maternal Mental Health Care in Gujarat: A Community-Centered, Technology-Enhanced Approach," stood out in the RMNCH+A (Reproductive, Maternal, Newborn, Child, and Adolescent Health) category. Her visionary idea aims to address critical gaps in maternal mental health care through a multi-faceted strategy:

- **Community-Based Approach:** Empowering ASHA workers and Community Health Officers (CHOs) with specialized training in maternal mental health to conduct screenings and provide timely, on-ground support.
- **Tech-Driven Solutions:** Leveraging a web-based interface and m-health technology to streamline mental health assessments, enable real-time reporting, and facilitate telemedicine consultations through the e-Sanjeevani platform.

- **Sustainable Integration:** Seamlessly integrating the initiative with existing health programs to ensure cost-effectiveness and long-term viability.
- **Impact Goals:** Focusing on early detection and intervention to reduce maternal mortalities, raise awareness, and strengthen Gujarat's overall healthcare system.

This achievement not only highlights Mrs. Vismaya's dedication to innovative public health solutions but also underscores the potential of collaborative, technology-driven approaches to transform healthcare delivery. Her work serves as an inspiring example of how targeted interventions can create meaningful change in addressing complex health challenges.



*Referral Protocol, Final Vetting Workshop*

## Trainings & Workshops

### ● **Referral Protocol, Final Vetting Workshop**

As part of the policy of the Health & Family Welfare Department, Govt. of Kerala to strengthen the referral system in the institutions under the Directorate of Health Services (DHS) and the Directorate of Medical Education (DME), SHSRC was entrusted with the task of developing a robust and contemporary referral guideline. After a series of workshops, the developed protocol was discussed in the final Vetting Workshop conducted on 25 May 2024 at SHSRC-K hall. The main agenda of the workshop was to finalise the draft of the Referral Guidelines for final discussions with different stakeholders. The initial phase of the guideline preparation mainly focused on five major specialties namely General Medicine, Surgery, Obstetrics and Gynecology, Pediatrics, and Orthopedics. 23 senior specialists and administrators in the concerned specialties from DHS and DME participated in the final Vetting Workshop. The workshop was led by SHSRC Kerala Executive Director, Dr. V Jithesh.

### ● **ASPIRE Study: Consultative Meeting**

A consultative meeting of ASPIRE (Antenatal Salivary Progesterone to Detect Preterm Births and Improve Reproductive Endpoints) - an ICMR supported research study of SHSRC-Kerala was conducted at SHSRC-Kerala on 20 June 2024.



*Aspire Study Consultative Meeting*

The primary objective of this meeting was to discuss the institution level implementation of the study. The study is planned to be implemented at four health institutions: SAT Hospital Trivandrum, Mother and Child Hospital Trivandrum, Kalamassery Medical College, and General Hospital Ernakulam. Selected Gynecologists and Nursing offi-

cers from the concerned health institutions attended the consultative meeting to provide technical support. The consultative meeting was led by Dr. V. Jithesh, Executive Director of SHSRC-Kerala and Principal Investigator of ASPIRE, SHSRC-Kerala Senior Research officer Dr. S.R Ameena, SHSRC-Kerala Research Officer Dr. Bhavya Fernandez and Research staff of ASPIRE Project attended the meeting.



lighted the strengths of jamovi compared to other software options available in the field. The workshop was coordinated by Dr. S.R. Ameena, Senior Research Officer and Dr. Manju Madhavan, Research Officer. All Research Officers and Research Assistants of SHSRC-K, research staff under various research projects of SHSRC-K and the Centre for One Health attended the workshop.



*Aspire Study Consultative Meeting*

## 🟢 **jamovi: Free Data Analysis Software Training Workshop Conducted**

A comprehensive training workshop on data analysis and statistical testing using “jamovi” software was conducted at SHSRC Kerala on July 1 2025. Leading the workshop was Dr. V. Raman Kutty, a prominent Indian health economist and epidemiologist. jamovi is a powerful, free, and open-source computer program designed for data analysis and statistical testing. During the sessions, attendees were introduced to the fundamentals of jamovi software, learning practical techniques for data analysis and interpretation. A comparative analysis high



*Data Analysis Software Training Workshop*

## ● CONVERTECH-HWC consultant meeting

Training for Project staff under ICMR funded Multi centric study "Convergence and integration of programmes and leveraging technology for enabling healthcare teams for delivery of equitable, high-quality comprehensive primary healthcare services through Health & Wellness Centres" (CONVERTECH-HWC). This multi-centric study under the National Health Research Priority Projects of the Indian Council for Medical Research (ICMR) is undertaken in 8 states of India

In Kerala, State Health Systems Resource Centre - Kerala (SHSRC-K) is the site partner and the study is being undertaken in Wayanad district of Kerala, where we would attempt to upgrade the 204 SC-HWCs to provide the 12 package of services + Wellness services that are aimed to be provided through SC-HWCs.



*CONVERTECH-HWC Consultative Meeting*

A two day workshop was conducted by SHSRC-K on 7th & 8th of August 2024 at SHSRC, to familiarise the project staff on the service packages that are to be provided through SC-HWCs. The workshop also led to the development of a detailed action plan for August - December and a broad

roadmap for the entire project period. The workshop was facilitated by Dr. V. Jithesh, Principal Investigator of the project and Executive Director of SHSRC-K, Dr Ameena SR (Senior Research Officer, SHSRC-K & Co-PI), Dr Bhavya Fernandez and Ms. Vismaya Raj (Research Officers & Co-PIs). Dr Abey Sushan (State urban Health Manager & State Nodal Officer -HWC, NHM) and Dr Lipsy Paul (State Nodal Officer - Maternal Health, NHM), Dr Ameena SR and Dr Manju Madhavan, led the sessions on service packages.



*Team CONVERTECH-HWC*

## ● Queer Inclusive Health Systems Workshop

### ● Queer Affirmative Counselling Practices

As a precursor to the Queer Inclusive Health Systems (QIHS) project being rolled out by the Department Of Health and Family Welfare, The State Health Systems Resource Centre - Kerala (SHSRC-K), in partnership with Mariwala Health Initiative (MHI), organized a training on Queer Affirmative Counselling Practices (QACP) from 3rd to 5th October 2024 for Bhoomika counsellors and Public Relation Officers from government hospitals across the state. This training, designed to promote inclusivity and sensitivity in mental health care, was an essential step toward building a more supportive ecosystem for LGBTQIA+ individuals in the state.

MHI representatives, Pooja Nair and Sruti Chakravarti, focused on providing mental health professionals with a deep understanding of queer affirmative practices, equipping them with the knowl-

edge and skills to better serve queer individuals. Through a series of interactive workshops, expert-led sessions, and case studies, the participants gained practical tools for creating a safe, empathetic, and affirming space for their clients.



*Queer Affirmative Counselling Practices (QACP) for Bhoomika counsellors and Public Relation Officers*

- **Stakeholder Workshop for development of online grievance redressal portal for trans and intersex individuals in Kerala**

A stakeholder workshop was conducted on November 13, 2024, at the State Health Systems Resource Centre Kerala for the study titled 'Development, Implementation, and Evaluation of a State Level Interactive Online Portal for monitoring, and addressing the health issues and grievances of Transgender and Intersex communities in Kerala: An Implementation Research'. The main objective of the workshop was to present the qualitative findings from formative research and to discuss the development and implementation of the Health and Grievance Monitoring Portal for Transgender and Intersex Communities in Kerala.



*Stakeholder Workshop for development of online grievance redressal portal*

'QUEER' is an inclusive umbrella term used to represent all individuals within the LGBTIA+ community, embracing diverse sexual orientations, gender identities, and expressions. It serves as a unifying word for those who don't fit into traditional categories of gender or sexuality. The full form of LGBTQIA+ is L -Lesbian, G- Gay, B- Bisexual, T- Transgenders, Q- Queer, I - Intersex, A - Asexual and + - signifies the ever expanding and evolving areas of the very diverse gender and sexual identities. QIHS aims to promote quality, inclusive health care for members from the marginalized queer community.

The meeting brought together key stakeholders, including officials from the Directorate of Health Services (DHS), the National Health Mission (NHM), and the Digital University of Kerala (DUK), members of the Kerala Transgender Justice Board, Community Link Workers (CLWs), and Transgender and intersex community members. The meeting was helmed by Dr. V Jithesh, Executive Director, SHSRC-K along with Dr. Manju Madhavan, Research Officer, SHSRC-K, Dr. Rajasree Research SHSRC-K Assistant and Dr. Sruthi. V, Research Assistant, SHSRC-K.

The session began with a welcome speech and an introduction to the workshop by Dr. V Jithesh, Executive Director, SHSRC-K, followed by the project summary presented by Dr Manju Madhavan, Research Officer, SHSRC-K. Dr. Manju Madhavan also delivered

a presentation on formative research findings which provided valuable insights into the challenges and needs of transgender and intersex communities, setting the stage for a focused discussion on the portal's components. Mr. Umasankar, Senior Research Associate at DUK also shared the digital expertise, outlining the portal features. The group then engaged in a dynamic discussion on the portal's features, its operationalization, data protection and privacy, mandatory and non-mandatory details, roles for administrative and monitoring officers, user registration process, and ensuring gender affirmativeness.



*Stakeholder Workshop for development of online grievance redressal portal*

● **Peer Support Practices (PSP) Training for Transperson Community Link Workers in Kerala**

State Health Systems Resource Centre-Kerala (SHSRC-Kerala), in partnership with Mariwala Health Initiative (MHI) Mumbai, India, organized a three-day residential training on 'Peer Support Practices (PSP)' for building the competency of Transperson Community Link Workers (CLWs) in order to augment the functioning of Queer Inclu-

sive Health Systems (QIHS) in Kerala. Community Link Workers from various districts, including Trivandrum, Kottayam, Malappuram, Thrissur, Kozhikode, and Ernakulam, were invitees for this training.



*Peer Support Practices (PSP) Training*

Dr. V. Jithesh, Executive Director of SHSRC-Kerala, opened the session with a brief overview of the concept of Queer Inclusive Health Systems, elaborated about MHI and its role in the programme, and provided an outline to the workshop's agenda. The sessions were handled by Dr. Shruti Chakravarty, Chief Advisor, MHI and Pooja Nair, both of whom are training faculties of Queer Affirmative Counseling Practices (QACP) at MHI.



*Peer Support Practices (PSP) Training*

The workshop commenced with concepts and activities focusing on principles, history and need of peer counselling, and worked around individual self-reflection and group discussions. During these sessions, the participants echoed their personal motivations for becoming peer supporters within the community, with the one-on-one role-playing activities helping them exercise, apply, and gain insights on bettering their community level as well as health system level engagement skills.

The workshop concluded with sessions on suicide prevention and mental health training which equipped the participants with quintessential skills to support their peers effectively. Additionally, the CLWs provided feedback and suggestions on how to improve future workshops.

Smt. Seena KM, Head of Social Development, National Health Mission (NHM) addressed the participants with her encouraging and supportive words, while also extending her heartfelt gratitude to the faculty from MHI, during the valedictory session. Research Officers Dr. Manju Madhavan, Dr. Bhavya Fernandez, and Research Assistants, Dr. Rajasree S.J, Ms. Lavanya K, Dr. Shwetha Ashok and Ms. Aiswarya M.P were proactively involved in the conduct of this training workshop. Shakhiya S, Potential Consultant, from MHI provided active technical support throughout this programme.



*SHSRC-Kerala, MHI & Transperson Community Link Workers*

## ● Sensitisation Workshop for state level officials on Queer inclusivity in Healthcare

State Health Systems Resource Centre-Kerala (SHSRC-Kerala), in collaboration with Mariwala Health Initiative (MHI), Mumbai, India, organized a two-day sensitization workshop for selected district-level officials from the Department of Health Services, Kerala. Held at SHSRC-Kerala, the workshop marked the commencement of the second phase in developing a 'Queer Inclusive Health System (QIHS)' in the state. This phase follows the Peer Support Practices (PSP) Training Workshop for Community Link Workers conducted the previous week.



*Sensitisation Workshop for state level officials*

The workshop, conducted on December 16 and 17, 2024, brought together officials from the Northern and Southern regions of Kerala, respectively. Attendees included District Medical Officers (DMOs), Resident Medical Officers (RMOs), District Nursing Officers (DNOs), Junior Administrative Medical Officers (JAMOs), Reproductive and Child Health Officers (RCHOs), Superintendents, Mother and Child Health officials, and Nursing Superintendents

The workshop began with a baseline assessment to evaluate participants' understanding of queer health. Each day's proceedings were inaugurated by Dr. V. Jitesh, Executive Director of SHSRC-K, and Dr. Seena KM, Head of Social Development at the National Health Mission (NHM), by emphasizing the significance of implementation of

the State Policy for Transgender persons into the ambit of the Health Systems and providing an overview of the workshop's core themes, including the importance of working in close coordination with the Trans person Community Link Workers.



*Sensitisation Workshop for state level officials*

The subsequent sessions were facilitated by Dr. Shruti Chakravarty, Chief Advisor at MHI, and Pooja Nair, both esteemed trainers in Queer Affirmative Counselling Practices (QACP) at MHI. These sessions delved into the realities and challenges faced by the transgender community, incorporating group debates on topics such as the importance of gender-affirming surgeries and the harmful implications of misgendering and using dead names in interactions with transgender individual. The work-

shop also included a screening and discussion of the documentary film 'That's My Boy', which portrays the journey of a transman.

The training workshop was facilitated by Research Officers of SHSRC-K- Dr. Manju Madhavan and Dr. Bhavya Fernandez, along with the relentless support and hard work of Research Assistants Dr. Rajasree S.J., Ms. Lavanya K., Dr. Shwetha Ashok, Ms. and intern Ms. Shadiya Basheer KM. Support was provided throughout the programme by Shakhiya S, Potential Consultant, and Ahamed Fazariya, Consultant Training Associate from MHI.

### ● **Tribal Health Workshop by NHM and Tribal Department**

The training workshop was facilitated by Research Officers of SHSRC-K- Dr. Manju Madhavan and Dr. Bhavya Fernandez, along with the relentless support and hard work of Research Assistants Dr. Rajasree S.J., Ms. Lavanya K., Dr. Shwetha Ashok, Ms. and intern Ms. Shadiya Basheer KM. Technical support was provided throughout the programme by Shakhiya S, Potential Consultant, and Ahamed Fazariya, Consultant Training Associate from MHI.

Dr. V. Jithesh, the Executive Director of SHSRC Kerala, provided a brief introduction about the institution and the topic. The presentation consisted of two sessions, each delivered by Research officers from SHSRC-Kerala.



*SHSRC-Kerala at Tribal Health*

In the first session, Dr. Manju Madhavan presented the findings from the study "Health Systems Responsiveness to the Healthcare Needs of Tribal Communities through Family Health Centres in

Kerala.” She discussed the gaps at the health system level and shared perspectives from tribal beneficiaries on issues that hindered service utilization. In the second session, Dr. Bhavya Fernandez discussed the findings of the study on the factors affecting the hesitancy of tribal women to deliver at public health facilities. Her findings were based on in-depth interviews with tribal mothers who had recently given birth.



*SHSRC-Kerala at Tribal Health Workshop*

Dr. Vinay Goyal IAS, appreciated the efforts of SHSRC in conducting the studies and instructed that more studies into individual programmes be taken up by SHSRC so that access to each programme may be increased. The workshop was attended by State level officers of DHS, NHM District Programme Managers, RCH Officer and other officers from various districts, and representatives from the Tribal Department and the Social Justice Department.

## Workshop on Upscaling Primary Stroke Care Units in Kerala

The State Health System Resource Centre-Kerala (SHSRC-K) hosted a two-day workshop on December 10th and 11th, to develop an action plan for the research project “Upscaling of Primary Stroke Care Units in Kerala to Certified Stroke Care Centres.” This implementation research funded by the Indian Council of Medical Research (ICMR), aims to upgrade Primary Stroke Units in Kerala under the SIRAS programme to meet World Stroke Organization (WSO) certification standards.



*Workshop on Upscaling primary stroke care Units*

During Phase 1 of the study, the SHSRC-K research team investigated stroke centres in selected hospitals across various districts and the findings were presented. The workshop provided an opportunity for detailed analysis and discussions with neurologists, psychiatrists, physiotherapists, staff nurses, hospital administrators, superintendents, RMOs from the hospitals involved, and SHSRC-K project members..



*Workshop on Upscaling primary stroke care Units*

The workshop resource person, Dr. Shylaja P.N, Pro-

fessor and Head of Neurology at Sree Chitra Tirunal Institute for Medical Sciences & Technology, shared valuable insights on WSO certification and stroke unit efficiency, further enriching the discussions. Dr. V. Jithesh (Executive Director, SHSRC-K) and Dr. Jathavedus Mohanlal (Assistant Director, SHSRC-K) presented key findings on the gaps identified in the situation analysis and gave an overview of the stroke project. The two-day workshop culminated in group discussions and team presentations, which focused on strategies to overcome institutional barriers and achieve WSO certification.

health expert Dr. Dhanya R, who provided comprehensive insights into qualitative research. The sessions covered key aspects of qualitative research methodologies, including theoretical foundations and philosophical underpinnings, various qualitative research approaches, data collection methods, and data analysis techniques. Participants explored various data collection techniques such as in-depth interviews, focus group discussions, participant observation, and document analysis. The workshop provided a valuable learning experience for participants, enhancing their understanding of qualitative research methodologies and their practical applications in the field of public health



*Workshop on Upscaling primary stroke care Units*

## 🌟 Qualitative research Methodology Workshop

The State Health System Resource Centre, Kerala, conducted a one-day workshop on Qualitative Research Methodology on 18th December 2024. The workshop aimed to equip participants with a foundational understanding of qualitative research methodologies. The program commenced with a warm welcome address by Dr. Jithesh V, Executive Director, State Health System Resource Centre, Kerala. The workshop was facilitated by public



*Workshop on Qualitative research Methodology*

## CONVERTECH-HWC Sensitization Workshop

The State Health Systems Resource Centre Kerala (SHSRC-K) conducted a sensitization training and workshop for the health team of Wayanad district, including medical officers, mid-level supervisors, and Health & Wellness Centre (HWC) staff. The primary goal of the workshop was to facilitate the successful implementation of the ICMR research project CONVERTECH-HWCs in Wayanad.



CONVERTECH- HWCs Sensitization Workshop

CONVERTECH- HWCs Sensitization Workshop

The four-day sensitization program was divided into two sessions: one for block-level officials and another for district-level officials. The workshops were led by Dr. V. Jithesh, Executive Director of SHSRC-K, who introduced the ICMR CONVERTECH-HWCs project and guided discussions on finalizing the proposed implementation model. The sensitization training sessions were conducted at District Hospital Mananthavady, District Training Centre Thariyode, and the Palliative Hall of Taluk Headquarters Hospital, Sulthan Bathery. Participants were grouped by block-level health facilities, including sub-centres and HWCs, by conducting in

six training sessions. Meanwhile, the sensitization workshop for district officials and medical officers took place at the District Training Centre, Thariyode. Wayanad District Medical Officer Dr. P. Dinesh, Deputy DMO Dr. Priya Senan, added their views about the project and listened to the suggestions from the participants about the projects.

## Gender Dimensions and the POSH Act Workshop

On 6th March, the State Health System Resource Centre Kerala (SHSRC-Kerala) organized a one-day workshop focusing on Gender Dimensions and the POSH Act. The event featured two engaging sessions, packed with valuable knowledge and discussions. The First Session Gender Dimensions in Workplace & Society led by Dr. V. Jithesh, Executive Director of SHSRC-Kerala, the session dealt with Sex vs. Gender, Gender Roles and how they are shaped by parents, schools, and educational environments, The impact of gender role expectations, Gender-based violence, The role of Bhoomika Centres in addressing these issues. The second Session

POSH Act – Prevention, Prohibition, and Redressal was taken by Adv. J. Sandhya, former member of the Kerala State Commission for Protection of Child Rights. She gave insight about the Sexual Harassment of Women at Workplace (POSH) Act, The role of Internal Committees (IC) in executing the Act, SHSRC-Kerala Research Team and Administration Team actively participated and support the event.



Among Older Persons – A Randomized Control Trial in Kerala.” These participants shared their positive experiences, emphasizing enhanced physical fitness and well-being after participating in the six-month-long fall prevention interventions. District Hospital Superintendent, Dr. Rekha M. Ravindran, announced the launch of a weekly Fall Prevention Clinic at the hospital starting in November, to be held every Tuesday. This initiative reflects the hospital’s ongoing commitment to elderly care.

Distinguished speakers included: Dr. Nancy N, IMA Treasurer and Casualty Medical Officer, Dr. Hema Francis, IMA President, Dr. Anzer Suhad Seth, Oncologist, Dr. Aravind Chandru, SHSRC Research Officer, Sajitha M S, Hospital PRO, Hamisha P G, Dietician, Dr. Sajeena A.S, Junior Consultant, Sheela Paul, Nursing Superintendent, and Dr. Mohammed Thareekh Basheer, WISHS Research Associate.

The presence of ASHA workers was also noteworthy, as they play a vital role in community-based elderly care. The event successfully combined awareness, education, and interactive sessions, reaffirming SHSRC-K’s and the hospital’s dedication to improving the well-being of the elderly in Kerala.



*Gender Dimensions and the POSH Act Workshop*

### **Elderly care Workshop at World Elders Day**

State Health Systems Resource Centre - Kerala (SHSRC-K), in collaboration with IMA Nedumangad and HAP (Health Action by People), marked World Elders Day on October 1st at District Hospital Nedumangad, emphasizing the theme: "Ageing with Dignity: Strengthening Care and Support Systems for Older Persons Worldwide." Dr. Ravi Prasad Varma, Professor at AMCHSS, SCTIMST, Trivandrum, inaugurated the event, highlighting the critical role of initiatives like the Fall Prevention Clinic in improving the quality of life for the elderly. The event honored the elderly participants of SHSRC-K’s research study, “Interventions for Prevention of Falls



*Elderly care Workshop at World Elders Day*

## Good Clinical Practice Training Workshop

The State Health Systems Resource Centre Kerala (SHSRC-K), in collaboration with the Forum for Ethics Review Committees in India (FERCI), conducted a training session on “ICMR Guidelines, Good Clinical Practice, NDCT Rules and Ethics Committee Structure and Responsibility” on October 9th at SHSRC-Kerala. The session aimed to provide participants with an in-depth understanding of GCP principles and enhance knowledge regarding ethical considerations in biomedical research. The program commenced with a welcome address by Dr. V. Jithesh SHSRC-K Executive Director. The training session was led by Dr. Nandini K. Kumar, former Deputy Director General (Sr. Grade) of ICMR, President of FERCI, and distinguished Scientist Chair at the Ministry of AYUSH. Other faculty members included Dr. Reneega Gangadhar, Professor and HOD of Pharmacology at Sreemookambika Institute of Medical Sciences, Tamil Nadu and Dr. Priya Thomas, Professor of Oral Pathology at Annoor Dental College.



*Good Clinical Practice Training Workshop*

### Session Highlights:

1. Introducing FERCI: Overview of FERCI's role and objectives.
2. ICMR Guidelines:
  - Detailed discussion on the development and revisions of ICMR Guidelines from 1980 to 2017, covering 12 sections.
3. EC Structure and Responsibilities:
  - Explanation of the responsibilities and composition of Ethics Committees.
4. GCP & NDCT Rules:

- Comparison of International Council for Harmonisation (ICH) Good Clinical Practices (GCP) with Indian Good Clinical Practices (GCP).

Each topic included a question and answer session, allowing participants to clarify their doubts with the faculty.



*Good Clinical Practice Training Workshop*

The event was attended by IEC members from distinguished research institutions, postgraduate/undergraduate students from various medical colleges, SHSRC-K research team and public health professionals with scientific temper. Participants received certificates for attending the workshop and the session concluded with a reminder to foster a culture of excellence and uphold the values of ethics in biomedical research.

# Academic Collaborations

## ● T. A. Pai Management Institute, Manipal

The Executive Director of the State Health Systems Resource Centre - Kerala (SHSRC-K) was invited to the "Climate Change and Public Health Colloquium" on July 8, 2024, organised by the T. A. Pai Management Institute, Manipal, in association with The Abdul Latif Jameel Poverty Action Lab (J-PAL) South Asia.

The morning sessions started with an introduction of the T. A. Pai Management Institute and an overview of J-PAL's work in optimising scientific evidence as a tool to reduce poverty and inform policy. This was followed by a technical session on the basics of randomised control trials (RCTs) and their relevance in policymaking. Dr. V. Jithesh, Executive Director of SHSRC-K, then presented the centre's public health research activities in Kerala.

Dr. V. Jithesh elaborated on SHSRC's roles, responsibilities, and ongoing and completed research projects, inviting collaboration from interested participants.



*Climatic Change and Public Health Colloquium*

The first half of the colloquium concluded with a panel discussion featuring researchers and experts on the execution and challenges of RCTs.

A highlight of the colloquium was a closed-door session where findings from a J-PAL sponsored

study on climate-induced dengue proliferation in Kerala were presented by Dr. Remya Tressa Jacob and Dr. Vijay Victor, under the guidance of Dr. Rudra Sensarma.

Dr. V. Jithesh shared insights on these findings and discussed plans to translate them into scalable interventions.

## ● Mariwala Health Initiative MHI

SHSRC-Kerala took part in the Counter Narrative: MHI Conference held on February 7-8, 2025 at K.C. College, Churchgate, Mumbai. The two-day event, themed "Mental Health of Marginalised Communities (Transgender & Queer, Caste & Indigenous, Minority religious, Mental health & disability): Perspectives from India," was organized by Mariwala Health Initiative (MHI) in collaboration with the Sociology and Psychology Department of K.C. College and the School of Performing Arts and Liberal Studies, Mumbai.

Dr. V. Jithesh, Executive Director of SHSRC-Kerala, was an invited guest at the conference, and Dr. Manju Madhavan, Research Officer at SHSRC-Kerala, was invited as a panellist for the theme- 'Counter-Narratives to Body-Gender Binaries'.



*SHSRC-Kerala at Counter Narrative: MHI Conference*

She shared her research insights on the Mental Health needs, experiences, and perspectives of Intersex individuals in Kerala along with the viewpoints of Healthcare Providers regarding intersex health service delivery. Thereafter she proceeded with clarifying audience queries, during the interactive session.

The event featured six panel discussions, film screenings with Q&A sessions, creative workshops, and engaging plenaries. It created a space for building solidarity across different marginalizations, professions, and academic fields, encouraging important conversations on mental health.

## ● **Azim Premji University Bhopal**

SHSRC-Kerala was invited by Azim Premji University to participate in a consultative workshop held on October 16. Dr. Jathavedus Mohanlal, Assistant Director of SHSRC-Kerala, represented the organization as an official delegate at the workshop.

The workshop was designed for MPH students of the university as part of their field practice in primary health care (PHC). It aimed to provide a platform for revisiting mutual expectations, student preparedness, evaluation processes, and other challenges or concerns that organizations wished to address. The discussions also focused on fostering meaningful field engagements, aligning with the university's broader goal of building long-term, collaborative partnerships with development organizations like SHSRC-Kerala.



*Delegates of Consultative Workshop*

As an academic collaborator, SHSRC-Kerala contributed to the workshop's objectives, which included:

- ☒ Developing a shared understanding of the objectives of PHC postings within the broader context of field practice in the MPH curriculum.

- Clarifying expectations of host organizations regarding student preparedness, communication, evaluation criteria, mentor involvement, and other relevant aspects.

- Sharing insights from past experiences of student engagements—identifying successful practices, areas for improvement, and suggestions for strengthening the process.

- Collaboratively planning the modalities of field learning in PHC settings, including the nature of work, mentoring roles, and orientation inputs for students.

The participation of SHSRC-Kerala in this workshop underscores its commitment to academic collaboration and its role in shaping impactful field learning experiences for future public health professionals

## ● **iHear AffirmCare Sangath**

The State Health Systems Resource Centre (SHSRC), Kerala, shared insights on its ongoing Queer-Inclusive Health System Project during the LGBTQIA+ Affirmative Healthcare Training Workshop. The workshop, held at the Achutha Menon Centre for Health Science Studies (AMCHSS), was organized in collaboration with the iHear AffirmCare Sangath and Sree Chitra Tirunal Institute for Medical Sciences and Technology (SCTIMST), with the support off SHSRC-K.

Dr. V. Jithesh, Executive Director of SHSRC-Kerala, highlighted the evolution of the Queer-Inclusive Health System Project and outlined its planned implementation within Kerala's health system. He emphasized the

project's foundation in the Idam Campaign focusing on inclusiveness of gender and sexual minorities, the Community Link Worker (CLW) programme of NHM Kerala and the collaborative initiative of SHSRC with Mariwala Health Initiative.

The workshop focused on sensitizing medical educators to the unique needs of the LGBTQIA+ community in medical care. Participants engaged in group-based case discussions to explore real-life scenarios and enhance understanding.



*LGBTQIA+ Affirmative Healthcare Training Workshop.*

Dr. Khan Amir, introduced the handbook “Colours in Your Care”, a comprehensive guide for medical educators on LGBTQIA+ affirmative healthcare. Dr. Jaysree led a lecture on the legal aspects of LGBTQIA+ community, while Dr. Joshua and Dr. Aiswarya conducted sessions introducing basic LGBTQIA+ terminologies and concepts.

Dr. Anant Bhan, Project Lead of Sangath's Bhopal Hub and Prof. Dr. Biju Soman, Head of AMCHSS, SC-TIMST addressed various aspects of queer health during the workshop. SHSRC-K Research Officers Dr. Manju Madhavan, Dr. Bhavya Fernandez, Dr. Aravind Chandru, and Research Assistants Dr. Shwetha Ashok, and Ms. Silpa Sara Abraham, participated in the workshop



*LGBTQIA+ Affirmative Healthcare Training Workshop.*

## ● YP Foundation Training

The State Health Systems Resource Centre (SHSRC), Kerala, in collaboration with The YP Foundation, recently organized a two-day workshop aimed at developing a robust research proposal. The workshop focused on an implementation research study titled “Comprehensive Abortion Care in the Context of the Recently Amended MTP (Med-

ical Termination of Pregnancy) Act.” This initiative was driven by insights from a health facility audit conducted by The YP Foundation, which highlighted concerning behavioral attitudes among healthcare providers toward abortion patients, often lacking support and patient-centric approaches.



*Two day training workshop with YP Foundation*

In response to these findings, The YP Foundation partnered with SHSRC-Kerala to design a research study aimed at addressing these critical gaps. The initial phase of the study involves the development of research tools and sensitization workshops for gynecologists working in public health facilities. These workshops are designed to raise awareness, foster empathy, and promote positive behavioral changes among healthcare providers, ensuring a more supportive environment for patients seeking abortion care.

The proposed study will be implemented across seven districts in Kerala, with the workshop serving as a platform for participants to deliberate on key aspects such as research objectives, methodology, and strategies for effective execution. The collaborative effort underscores a shared commitment to advancing comprehensive and compassionate abortion care within the framework of the amended MTP Act.

The workshop was led by Dr. V. Jithesh, Executive Director of SHSRC-Kerala, and Jathavedus Mohanlal, Assistant Director of SHSRC-Kerala, whose leadership and expertise were instrumental in guiding the discussions. This initiative marks a significant step forward in aligning healthcare practices with the principles of dignity, respect, and patient-centered care, ultimately contributing to improved reproduc-

tive health outcomes in the state.



*Team SHSRC-Kerala with YP Foundation*

### ● **Dr Moopen's Medical College, Wayanad.**

Dr.V Jithesh Executive Director of SHSRC-Kerala, presented the topic "Surge Capacity: Creating space during disasters" at EmerGenZ 3.0, the International Emergency Medicine Conclave held at Dr Moopen's Medical College, Wayanad, Kerala from the 10th to 12th January 2025. The presentation covered the experiences from the creation of Surge capacity during the floods of 2018 & 2019, the COVID pandemic and the Wayanad landslide of 2024.



*Dr.Jithesh V Presentation at EmerGenZ*

### ● **Central university of Kerala, Kasaragod**

The SHSRC-Kerala was honored to receive an official invitation from the Central University of Kerala to participate in the one-day workshop titled "Capacity Building in Health Promotion," organized by the Department of Public Health and

Community Medicine in collaboration with Mahidol University, Thailand. The event took place on February 5 at the Central University Campus in Kasaragod.

The workshop was designed around the findings of a comprehensive situational analysis conducted by the department, aiming to bring together leading academicians and professionals from public health and allied fields. The primary focus was to evaluate the existing curriculum on health promotion and explore innovative ways to enhance it, ultimately fostering the creation of a Health Promotion Implementation Consortium.

During the workshop, health professionals from the Directorate, SHSRC, and AYUSH came together to share their insights and experiences on effective health promotion interventions. The event served as a platform for collaborative dialogue, knowledge exchange, and strategic planning, paving the way for stronger health promotion initiatives in the region. This engagement underscored the importance of interdisciplinary cooperation in advancing public health goals and building a healthier community.

### ● **SHSRC Gujarat**

The Gujarat SHSRC team visited the SHSRC-Kerala on two occasions to gain insights into their operational framework within the Kerala health system and to understand the ongoing research studies being conducted. These visits provided an excellent opportunity for knowledge exchange and collaboration, enhancing the understanding of effective health system strategies and research methodologies.

For the first time, the State Health Systems Resource Centre (SHSRC) Gujarat visited SHSRC Kerala to study its infrastructure and unique health initiatives. The three-day visit, held from October 22nd to 24th, was organized to promote knowledge exchange and provide insights into Kerala's health system and policy innovations.

The SHSRC Gujarat delegation included Dr. V. Vasuki, Officer on Special Duty, Dr. Shivangi Rajput,

Consultant for Healthcare Innovation's Best Practices and Ms. Arjavi Patel, Health Informatics Project Officer.

On day one, SHSRC Kerala's Executive Director, Dr. V. Jithesh, welcomed the Gujarat team and provided an overview of the organization's work. His presentation highlighted the key organizational activities, collaborative research efforts, Kerala's unique health system approaches, innovative aspects and policy advancements. Following this, the Gujarat team engaged with five Research Officers from SHSRC Kerala, each of whom discussed their respective research activities and provided overviews of their studies.

On the second day, the team participated in an observational field visit to Family Health Centre (FHC) Chemmaruthy in Trivandrum district, the first FHC inaugurated under Kerala's Aardram Mission and the district's first health centre to be bestowed with national recognition. Dr. Jathavedus Mohanlal, Research Officer from SHSRC Kerala, guided the Gujarat team in this visit, providing firsthand insights into the centre's operations and accomplishments.



*SHSRC-Gujarat Interacting with SHSRC-Kerala*

On the final day, the team visited the National Health Mission (NHM) to gain an insight into Maternal and Child Health interventions. In the final session, they reflected on their field visit experiences and shared feedback. During the session, SHSRC Gujarat also presented an outline of their organizational activities, innovative programmes, documentation practices and future plans. This collaborative visit marked an important step toward shared learning and potential future partnerships between the SHSRCs of the two states



*SHSRC-Gujarat team visit at Chemaruthy Ayushman Arogya Mandir*

In the second visit, State Health Systems Resource Centre Gujarat (SHSRC-G) and the Indian Institute of Public Health Gujarat (IIPH-G) visited the State Health Systems Resource Centre Kerala (SHSRC-K) on February 20th as part of the Healthcare Leadership Enhancement Program. Dr. V. Jithesh, Executive Director of SHSRC-Kerala, presented an overview of the institution and conducted an interactive session with the visiting team. Dr. Jathavedus Mohanlal, Assistant Director of SHSRC-Kerala, delivered a talk on the institution's research activities, including completed, ongoing, and upcoming studies. Dr. Parvathy Thampy S, Research Officer at SHSRC-Kerala, highlighted the institution's role in providing technical and policy support to the Health & family welfare department, Kerala. She also shared insights into involvement in national-level programs, interstate visits, outbreak responses, and the IRC & IEC committees established by SHSRC-Kerala. Research officers Dr. Manju Madhavan, Dr. Bhavya Fernandez, Dr. Aravind Chandru, Mrs. Vismaya Raj K and Dr. Nitha J.S presented their research findings in the session. The visiting members engaged in discussions, and their queries were addressed by the research officers of corresponding research projects.



*SHSRC-Gujarat Team with SHSRC-Kerala*

## ● Kerala University of Health Sciences School of Public Health

The Kerala University of Health Sciences, School of Public Health hosted a one-day workshop on gender mainstreaming in health science education on February 25, 2025. The workshop was inaugurated by Health Minister Veena George. The workshop focused on strategies to create a gender-responsive learning environment in medical and health sciences, addressing curriculum design, campus infrastructure, and inclusivity for diverse gender identities. During the event, Dr. V. Jithesh, Executive Director, SHSRC-K, conducted a session detailing SHSRC's initiative on behalf of NMH and DHS to make the health system more inclusive for all gender identities. SHSRC-Kerala Research Officers Dr. Manju Madhavan, Dr. Bhavya Fernandez participated in the session.

## ● National Institute of Mental Health and Neurosciences (NIMHANS) in Bengaluru.

SHSRC-Kerala had the privilege of participating as a panellist in the one-day event titled "Care in Practice and Policy: Dialogues in Queer-Trans Mental Health in India," held on February 20 at the National Institute of Mental Health and Neurosciences (NIMHANS) in Bengaluru. The organization was part of Panel 2, which focused on Advocacy Initiatives in Queer-Trans Mental Health. During the session, Dr. V. Jithesh, Executive Director of SHSRC-Kerala, delivered an insightful talk on State Response for Advancing Queer-Inclusive Healthcare: The Kerala Experience. His presentation highlighted the Kerala government's proactive interventions to address the mental health needs of LGBTQIA+ individuals and shared valuable early learnings from these initiatives.

The event was co-organized by prominent institutions and organizations, including the Tata Institute of Social Sciences (TISS) Mumbai, Solidarity and Action Against The HIV Infection in India (SAATHII) Chennai, the Initiative for Health Equity Advocacy and Research (iHEAR), Sangath Bhopal, and the Indian Institute of Technology (IIT) Palak-

ad. The session brought together a diverse group of participants, including members of the queer community, researchers, mental health professionals (MHPs), and policymakers, fostering meaningful discussions and collaborations on queer-trans mental health in India.

# INTERNSHIP

SHSRC-Kerala offers a unique and rewarding program for young talented MPH and MSW students & graduates seeking entry to the health system research. The SHSRC-K internship program has proven to be an ideal way to begin one's career in the health system as it provides individuals with both research experience and an inside view of the

health systems. During the program candidates will have the opportunity to work alongside experienced SHSRC-K researchers on current health system research projects. From creative conception of research proposals to research reports, trainees will be involved in the various aspects of research methods from the start.

University	No. of Students
Prasanna school of Public Health, Manipal	6
Tata Institute of Social Science (TISS), Mumbai	5
Sree Chitra Institute of Medical Sciences and Technology, Trivandrum	1
Yenepoya University, Karnataka	3
Central University Tamilnadu	3
Central University Kerala	3
JIPMER	2
B.R Ambedkar University, Delhi	1
Achutha Menon Centre for Health Science Studies	2
Indian Institute of Public Health, Bhubaneswar	1
K S Hegde Medical Academy, NITTE University	1
SRM Institute of Science and Technology, Chennai	1
Azim Premji University, Bhopal	2

Around 29 students from various universities have completed and are currently participating in the internship programme at SHSRC in this fiscal year and Additionally, we have already begun receiving internship requests from students for the upcoming year.

- 🌐 SHSRC Kerala Official website- <https://shsrc.kerala.gov.in/>
- 📘 Facebook Page- <https://www.facebook.com/shsrck/>

- 📷 Instagram Account- <https://www.instagram.com/?hl=en>

- 🌐 LinkedIn Account- <https://www.linkedin.com/company/shsrckerala/posts/?feedView=all>

- ✂️ X Account - <https://x.com/shsrckerala>

# WEBSITE & SOCIAL MEDIA

The State Health System Resource Center (SHSRC) Kerala has established a robust digital presence across multiple social media platforms to ensure the public remains well-informed and actively engaged with our initiatives. Our Facebook account and page are consistently updated with the latest events, activities, and updates, offering a dynamic and interactive platform for connecting with our audience.

In addition to Facebook, our official website serves as a comprehensive resource hub, providing detailed information about SHSRC Kerala, including event schedules, IRC & IEC materials, and various opportunities. This platform is designed to cater to those seeking in-depth knowledge about our programs and resources.

This financial year, we have revitalized our LinkedIn presence, initiating daily posts that highlight our events and introducing a new series of daily health day write-ups and posters. These materials are crafted to enhance information, education, and communication (IEC) through social media, reaching a broader audience. The content created for social media is disseminated across all our platforms, including Instagram and Twitter, ensuring widespread accessibility and engagement.

Furthermore, in response to a security audit directive from NIC, we have embarked on a comprehensive revamp of our website. This includes a security audit and a redesign to enhance user experience and security. The new website is slated for launch at the beginning of the next financial year, with the redesign and development currently underway in collaboration with Keltron.





# TEAM COMPOSITION

## RESEARCH WING

## ADMINISTRATION WING

- EXECUTIVE DIRECTOR

- ASSISTANT DIRECTOR

- RESEARCH OFFICER – 6

- CONSULTANT (C.P & DOCUMENTATION)-1

- RESEARCH ASSISTANT – 14

- FINANCE CUM ADMINISTRATIVE OFFICER- 1

- SECTION OFFICER-1

- COMPUTER ASSISTANT -2

- TECHNICAL ASSISTANT- 2

- PA to EXECUTIVE DIRECTOR- 1

- DATA ENTRY OPERATOR - 1

- OFFICE ATTENDANT-1

- HOUSE KEEPING-3

# FINANCIAL REPORT



## SHSRC -K - SNA Fund Details for the year 2024-25

SL.No	Particulars	Expenditure 2024-25
I	<b>Fund Received from NHM</b>	<b>2,24,00,000</b>
II	HR Cost	1,61,28,872
III	Other Cost	40,22,622
IV	HSS.1.1.151/Wellness activities at HWC	21,267
	<b>Total</b>	<b>2,01,72,761</b>
V	<b>SHSRC Research 2024-25</b>	
	a) CHE among stroke Survivors	1,05,050
	b) RCT on interventions for prevention for falls in elderly	1,60,000
	c) Aswasam	1,00,000
	d) Bhoomika	23,856
	e) State Palliative Care Programme	0
	f) Study on preference for Pvt Health care facilities for inst Delivery	67,600
	g) Ensuring Comprehensive quality of health care through M&E	0
	h)Development of screening tool for identifying home fall hazard of elderly	2,40,000
	l) E -Sanjeevani (Integration of teleconsultation into primary health care )	2,50,335
	J)Estimation of risk factors for type 2 DM in adolescents	6,29,037
	K)Evaluation of health care services in tribal Population through FHC	1,46,365
	L)Study on Online Monitoring tools for Health and Grievance of Transgenders and Intersex in Kerala	73,982
	M)Study on Health care needs of transgender persons	30,000
	<b>Total</b>	<b>18,26,225</b>
	<b>Total Expenditure</b>	<b>2,19,98,986</b>
	<b>Refund to NHM on 31/03/2025</b>	<b>4,01,014</b>
	<b>Balance Amount as on 31/03/2025</b>	<b>0</b>

## Expenditure details of ICMR funded Research studies 2024-25

Sl.No	Name of Study	Amount	Expenditure
1	Convergence and integration of programmes and leveraging technology for enabling healthcare teams for delivery of equitable, high-quality primary healthcare services through Health and Wellness Centres (CONVERTECH -HWCs) in Wayanad district of Kerala- An Implementation Research	12434404	5852267
2	Upscaling of Primary Stroke Care Units in Kerala to Certified Stroke Care Centres: An Implementation Research	3031735	2204463
3	The Aspire study- Antenatal Salivary progesterone to detect Pre-term births and Improve Reproductive Endpoints: A prospective observational study	5851915	5531718
4	Nurse Initiated Community health worker Empowerment (NICE) Study- Developing community-based COPD management package in Primary health care setting: Randomized Control Trial	2851713	1832136
5	Establishing an early warning system through environmental surveillance of Avian Influenza	2510400	1298682



SHSRC-KERALA

**STATE HEALTH SYSTEMS RESOURCE CENTRE- KERALA**