



# Sadhika: A Community Health Entrepreneurship Model

**Problem:** Urban low income communities face disproportionate burdens of livelihoods, ill – health and nutritional security compared to the rest of the urban population. Their vulnerabilities are further amplified due to their social identities, where women and LGBTQIAs face double marginalization due to their gender-based identities. These disparities manifest in different forms and spheres around us, including in their economic participation and livelihood generation activities. A 2022 WHO report indicated that financial burden due to ill-health pushes 55 million Indians into poverty each year. Despite overall improvements in the past decades, health outcomes and health seeking behaviours of both women and LGBTQIAs remain relatively poor.

Pan-India studies place women to be most at-risk in developing multi-morbidities. Members of the LGBTQIA communities continue to face systemic exclusions on their health front, with high prevalence of mental health and sexual health related issues, barriers to their inclusion being social and cultural stigma.

A preliminary understanding of the urban and peri-urban pockets in Lucknow, Mumbai and Pimpri Chinchwad reflect several dynamics and complexities, and varying health needs across a spectrum of vector-borne / water-borne diseases, prevalence of health conditions as a result of the working conditions such as TB, skin diseases and injuries, reproductive health needs, sexually transmitted infections, common childhood illnesses and geriatric care, screening for non-communicable diseases.

**Solution:** The home health care market in India is poised to transform the healthcare sector. Estimated to be worth \$8.8 billion in 2023, it is growing rapidly; driven by an aging population, increasing prevalence of chronic diseases and the need for better quality post-operative and primary care. As per estimates, for an average individual, 70% of their healthcare needs can be met in the home environment.

The limited economic participation and livelihood opportunities available for women and LGBTQIAs, coupled with their poor health outcomes, and that of their families and community members, requires urgent attention; given rapid urbanization, increasing health care costs and emerging health threats due to climate change and pandemics.

This project leverages the growing home healthcare industry in India, and proposes a Community Health Entrepreneurship (CHE) model that provides resilient livelihood opportunities to women/LGBTQIAs, engaging them in income generation activities, and providing a safety-net to their families.



**About the project:** This community entrepreneurship project is situated at the intersection of health and livelihoods.

As part of this project, women and LGBTQIA members from urban low-income communities and above 18 years, are identified, trained, equipped and provided a platform; to become Community Health Entrepreneurs (CHEs) or Sadhikas.

The Sadhikas undertake rapid diagnostics for key illnesses, support in facilitating teleconsultation with doctors, and support in referral and follow-ups. These services are linked to a uniform price list which serves as their income.

**Target Group:** The Sadhikas are selected from urban low-income communities so that they are familiar with the local context, problems, needs of their communities and local stakeholders and community influencers. Each Sadhika provides services to approximately 400- 500 households. They are closely supported by a program team, and a team of doctors for consultation and community outreach (camps) as well as for referrals.

### Objectives of Sadhika Programme



Providing resilient livelihood opportunities to women / LGBTQIAs by training them to become CHEs, with increased income levels.



Improving health outcomes and accessibly related challenges of urban low income communities.



Enhancing community awareness and knowledge, attitude and practices (KAP) on health, nutrition and adaptation measures for climate related health challenges.

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