Impact Health Collective India — Donor & Grant Brief (2025)

Summary

Impact Health Collective India (IHCI) runs free monthly community health camps to improve early detection, health literacy, and access to trusted referrals in underserved areas. This brief summarizes program rationale, operations, and impact targets.

Note: Synthetic numbers for training only. Replace with real metrics before sharing externally.

Problem

Many families in low-income neighborhoods delay routine health checks due to cost, distance, and lack of trusted guidance. This leads to avoidable complications and late presentation for treatable conditions.

Program approach

- Monthly free camps per city (Bengaluru, Mumbai, Kolkata, Delhi)
- Basic screening + counseling + referrals to partner clinics
- Follow-up coordination for high-risk cases
- Community outreach via WhatsApp, posters, and trusted frontline workers

Who we serve

- Women and caregivers
- Children under 5 and school-age children
- Elderly residents and people with chronic-condition risk factors

2025 impact targets (illustrative)

Total camps (annual)	240
Total beneficiaries reached (annual)	40,000
Average attendance per camp	165
Follow-up visits scheduled rate	15–25% of attendees
Referral completion target	≥ 60% of referred cases

Monitoring and evaluation (M&E)

- Track registrations vs. attendance by city and ward (drop-off analysis).
- Track referrals and follow-up visit completion rates.
- Collect beneficiary satisfaction (1–5) via quick post-camp survey (anonymous when possible).
- Monthly program review to adjust outreach channel mix and scheduling.

Budget snapshot (illustrative)

- Typical cost per camp: ₹22,000–₹35,000 depending on city and partner support.
- Major cost drivers: staff time, basic supplies, transport, printing, partner clinic fees (when applicable).

Frequently asked donor questions (FAQ)

Q: How do you ensure quality and safety?

A: IHCI partners with local clinics for referral guidance, uses trained staff and volunteers, and follows a strict escalation protocol for emergencies.

Q: What makes IHCI scalable?

A: The model is standardized (SOPs + outreach templates) and can be replicated ward-by-ward with local partners.