Endline
Report 2024

Comprehensive Telemedicine Solutions

Study Conducted and Reported by: SGS

CONTENTS

ACKNOWLEDGEMENT

The "Comprehensive Telemedicine Solutions" project required significant effort, research, and commitment. The successful completion of the endline survey was made possible by the unwavering support of all implementation partners, project beneficiaries, the survey team, and volunteers who contributed to this study. We extend our heartfelt gratitude to each of them.

We are particularly thankful to the Bayer for their guidance throughout the project implementation. We also wish to express our sincere appreciation to all participating beneficiaries and staff members who dedicated their time and expertise to the endline survey. Our thanks go out to everyone involved in this project, including both direct and indirect beneficiaries; their assistance and participation have been invaluable.

Once again, we offer our sincere thanks to the Bayer for their initiative and support in the Endline Assessment Survey for the "Comprehensive Telemedicine Solutions" project.

ETHICAL CONSIDERATION

Informed consent:

The interviews were done after the respondents gave their consent. Even after the interviews were completed, their permission was sought to proceed with their responses.

Confidentiality:

The information provided by participants has been kept private. At no point were their data or identities disclosed. The research findings have been quoted in a way that does not expose the respondents' identities.

Right to reject or withdraw:

Respondents were guaranteed safety and allowed to refuse to answer questions or withdraw during the study.

Comfort:

The interviews were performed following the respondents' preferences. In addition, the interview time was chosen in consultation with them. At each level, respondents' convenience and comfort were considered.

EXECUTIVE SUMMARY

This endline assessment of the telemedicine project, supported by Bayer and conducted by SGS using a mixed-method approach, evaluates the impact and effectiveness of telemedicine centers established across various states in India. Over 1,900 beneficiaries who accessed these services were consulted, providing valuable insights into the program's reach and effectiveness.

A structured questionnaire along with qualitative tool was deployed to gather comprehensive data, which also included perspectives from key stakeholders such as doctors, nurses, and both medical and non-medical staff. The findings indicate that the establishment of telemedicine centers has significantly enhanced access to healthcare infrastructure, particularly in underserved regions.

Key benefits reported by respondents include greater convenience, improved access to medical services, better infrastructure compared to public health facilities, and overall cost-effectiveness. Notably, 96% of beneficiaries in Bihar acknowledged positive impacts on their health management, with Chhattisgarh and Gujarat following closely with 91% and 92%, respectively. Jharkhand, Karnataka and Madhya Pradesh also reported impressive figures of 89%, 85% and 87% respectively, while Uttar Pradesh and Maharashtra recorded satisfaction rates of 86% and 81%.

Additionally, respondents reported receiving information on preventive healthcare through the telemedicine centers, demonstrating improvements in healthcare accessibility for populations facing geographic, financial, or mobility challenges. Although the helpline number initiated under the project has not been utilized to the expected extent, beneficiaries have used it to inquire about the availability of healthcare professionals, schedules for health camps, and information related to medications and screenings.

Women across the states particularly emphasized the importance of breast cancer screening, noting how it has aided in identifying risk factors and improving early detection. Respondents also noted screening for diabetes, thyroid etc. The data on NCD screening reflects significant variation across states, with Karnataka (66%) and Jharkhand (65%) leading in uptake, followed by Gujarat (58%) and Chhattisgarh (52%), indicating strong engagement in preventive healthcare.

The assessment highlights a direct link between telemedicine consultations and improved health-seeking behavior by reducing barriers to healthcare access. By eliminating constraints related to travel, time, and high costs, telemedicine centers have facilitated easier consultations with healthcare professionals. Nearly 50% of respondents across all locations availed general services through telemedicine, reflecting a positive shift in public health-seeking behavior. This utilization rate demonstrates that telemedicine has acted to bridge gaps in healthcare access and promoting proactive health management.

The establishment of telemedicine centers has led to significant financial savings for beneficiaries across various states, as the free consultation services eliminated costs they would have otherwise incurred. Respondents from Jharkhand and Uttar Pradesh reported the highest annual average savings per beneficiary at ₹6,415 and ₹6,206, respectively, primarily due to reduced travel to urban medical centers and avoided consultation fees. Gujarat and Madhya Pradesh also recorded notable savings, with annual averages of ₹6,100 and ₹5,421 per person. These figures underscore the project's success in providing cost-effective healthcare access in areas with previously limited medical infrastructure.

Conversations with staff members deployed at government healthcare facilities indicate that the project has been effective in addressing healthcare needs in their communities. They reported that the telemedicine initiative has significantly improved access to healthcare services without incurring additional costs for beneficiaries. This enhancement in access not only empowers individuals to seek timely medical assistance but also alleviates the pressure on existing healthcare infrastructure. By providing an alternative means of consultation, the project has contributed to more efficient resource utilization within the healthcare system, ultimately benefiting both patients and healthcare providers.

INTRODUCTION

India, home to over 1.4 billion people, faces persistent challenges in ensuring equitable access to healthcare, especially in rural and remote regions. Despite strides in healthcare, disparities in infrastructure and access to medical services between urban and rural areas remain significant. According to the National Health Profile (2022), approximately 70% of India's population lives in rural areas, yet nearly 75% of healthcare infrastructure, including doctors and specialists, are concentrated in urban centers. This imbalance results in long travel times, overcrowded urban hospitals, and a lack of timely medical intervention in rural regions.

India's healthcare system faces multiple challenges, particularly in rural and underserved areas where infrastructure is insufficient, and healthcare professionals are scarce. The World Health Organization (WHO) recommends a doctor-patient ratio of 1:1000, yet India lags behind with an average of 1:1404 as of 2023, according to the Ministry of Health and Family Welfare. This shortage is even more acute in rural regions, where healthcare facilities are limited, and patients are often forced to travel great distances to access basic medical services. The Public Health Foundation of India (PHFI) reports that over 65% of India's hospital beds are located in urban areas, leaving rural areas with limited access to specialized care. Additionally, a shortage of specialists and diagnostic facilities exacerbates health disparities. According to the Rural Health Statistics 2022, there is a shortfall of 80% specialists in Community Health Centers (CHCs) in rural India.

Bayer has supported a telemedicine project to bridge these critical gaps by providing remote access to healthcare services. Telemedicine offers an innovative solution to overcome the geographic and infrastructural barriers that prevent millions of Indians from accessing essential healthcare services. The project aims to deliver quality medical care to underserved populations, significantly improving access to diagnostics, treatment, and follow-up care for those who would otherwise remain excluded from modern healthcare systems.

Bayer's telemedicine project seeks to address these healthcare disparities by delivering real-time consultations and follow-up care remotely. By enabling doctors and specialists to consult with patients through digital platforms, the project extends the reach of urban healthcare expertise to rural and underserved populations, enhancing both preventive and curative care. Bayer's telemedicine initiative offers a scalable and sustainable solution to many of these challenges, allowing for real-time consultations, diagnosis, and treatment without the need for patients to physically visit healthcare centers.

APPROACH AND METHODOLOGY

A mixed-methods approach was utilized to conduct the endline survey, incorporating both quantitative and qualitative research techniques for data collection from primary and secondary sources. The aim of this data collection was to evaluate the status of the telemedicine centers and their impact on the rural population. The survey included a variety of stakeholders, such as staff members from Primary Health Centers (PHC) and telemedicine centers, as well as beneficiaries. The survey methodology comprised several steps, as illustrated in the figure below.

Sample Selection:

A purposive sampling method was used to select samples for the endline survey. This survey was carried out in specific districts across the eight target states where the program is being implemented: Bihar, Chhattisgarh, Gujarat, Jharkhand, Karnataka, Madhya Pradesh, Maharashtra, and Uttar Pradesh.

Designing Study Tools for Endline Survey

The following tools were used to conduct the surveys.

- **Questionnaire Surveys:** Questionnaires were prepared and administered to stakeholders associated with telemedicine centers in the target areas.

- **Field Notes with Observations from the Survey Visits:** The survey staff maintained their field notes with observations made by them during their visits. These field notes are a rich source of tacit information related to the status of the villages and telemedicine centers.

- **Pilot Study:** Before the actual implementation of the endline assessment survey, a pilot study was undertaken to test the study tools and their appropriateness. This survey was conducted in 8 states across with a sample size of 1926. The individuals who were supposed to conduct the survey exercise were trained in using different tools and techniques, data entry schemes and other reporting methods.

Table 1: Location wise Respondents

State	Individual Respondents Sample	Staff including Doctors, ANM etc
Bihar	326	19
Gujarat	208	4
Chhattisgarh	150	23
Maharashtra	171	6
Uttar Pradesh	278	6
Karnataka	230	15
Madhya Pradesh	192	12
Jharkhand	371	23

ANALYSIS AND FINDINGS

- COMPARISON OF INDICATORS ACROSS STATES
- STATE WISE ANALYSIS

COMPARISON OF OUTCOME/IMPACT INDICATORS ACROSS STATES

Improvement in Access to Healthcare

The establishment of telemedicine centers has significantly improved access to healthcare infrastructure across various states. Respondents highlighted several key benefits of the project, including greater convenience, easier access to medical services, improved infrastructure compared to public health facilities, and overall cost-effectiveness.

State-wise data reveals high levels of satisfaction with the infrastructure and service quality provided by the telemedicine centers:

Jharkhand reported the highest satisfaction, with 92% of respondents affirming the project's convenience and improved access to better healthcare infrastructure.

Bihar and Uttar Pradesh also saw considerable positive feedback, with 91% and 89% of respondents, respectively, highlighting the ease of access and cost savings brought about by the telemedicine initiative.

States like Chhattisgarh (87%), Madhya Pradesh (84%) and Karnataka (85%) also reflected high satisfaction levels, suggesting that the telemedicine centers have addressed key healthcare access challenges in these regions.

Gujarat recorded 83% satisfaction, reinforcing the project's effectiveness in improving healthcare infrastructure, though slightly behind some of the other states.

Maharashtra, while showing 78% satisfaction, reported the lowest percentage. This could be attributed to the presence of relatively better public healthcare infrastructure, reducing the perceived impact of telemedicine services in comparison to other states.

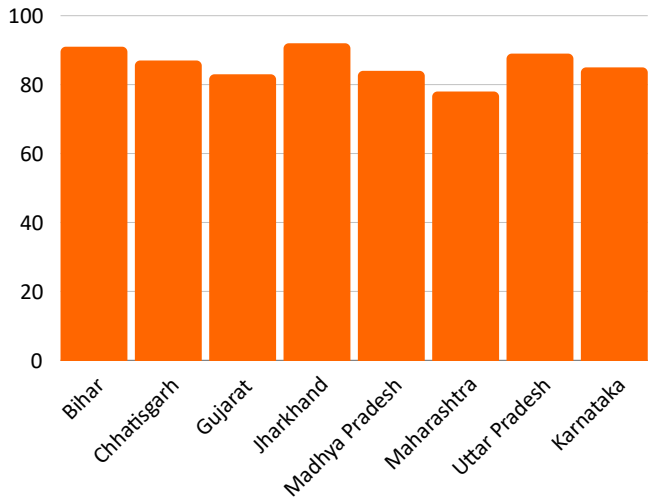


Fig 1: Improved Access to Healthcare Facility

Improvement in Health Conditions/ Management of Chronic Diseases

The telemedicine project has substantially enhanced respondents' ability to manage chronic diseases and improve overall health conditions, with 96% of beneficiaries in Bihar reporting positive impacts. Chhattisgarh (91%) and Gujarat (92%) also demonstrated remarkable improvements in health management through the initiative. Similarly, Jharkhand (89%) and Madhya Pradesh (87%) showcased significant success, highlighting the program's ability to address healthcare gaps in underserved regions. In Uttar Pradesh and Maharashtra, 86% and 81% of respondents, respectively, reported better health outcomes or improved management of chronic conditions. These findings underscore the transformative role of telemedicine in empowering individuals with accessible and effective healthcare solutions, driving better health outcomes across states.

Beneficiaries have reported improvements in their health condition and management of health issues after using telemedicine services. The availability of timely consultations with qualified doctors, access to accurate diagnoses, and prescriptions without the need for long travel have made it easier to manage chronic conditions like diabetes, hypertension, and thyroid etc.. Additionally, the convenience and affordability of these services have encouraged regular follow-ups, enabling better monitoring of health and early intervention when needed. The guidance provided on lifestyle modifications and preventive measures has further contributed to overall health improvement.

Improved Health Seeking Behaviour

The implementation of telemedicine centers has influenced health-seeking behavior among respondents across various states. In Bihar, 76% of respondents reported improvements in actively seeking healthcare, reflecting strong acceptance of telemedicine services for addressing health needs. Similarly, Gujarat (79%) and Chhattisgarh (68%) demonstrated that telemedicine has encouraged individuals to pursue timely medical consultations and interventions. States like Jharkhand (81%) and Madhya Pradesh (84%) exhibited even higher positive changes in health-seeking behavior, showcasing the initiative's success in overcoming barriers to healthcare access in underserved areas.

In contrast, Maharashtra reported the lowest improvement at 61%, possibly due to the state’s relatively better healthcare infrastructure reducing dependence on telemedicine services. However, despite the lower initial adoption, 76% of respondents from Maharashtra later expressed their willingness to continue using telemedicine services. This may indicate that while many initially did not seek teleconsultations due to the availability of other healthcare options, they have recognized its convenience and cost-effectiveness over time. The shift suggests growing acceptance of telemedicine as a complementary service rather than a necessity in areas with existing healthcare facilities.

The implementation of telemedicine centers has not only improved access to healthcare but also fostered proactive health-seeking behavior among communities. For instance, in a remote village in Bihar, where healthcare facilities were scarce and residents often avoided seeking medical advice due to the costs and time involved in traveling to urban centers, telemedicine services have brought a transformative change. A local farmer, previously hesitant to consult a doctor for his persistent symptoms of hypertension, now regularly uses telemedicine services to monitor his blood pressure and receive timely guidance. This has not only improved his condition but also encouraged his family and neighbors to seek medical advice for their health issues.

Similarly, in a rural village in Jharkhand, a young mother suffering from respiratory infections avoided seeking medical care due to the long travel distance to the nearest healthcare facility and the associated expenses, including transportation, accommodation for overnight stays, and lost wages. With the introduction of telemedicine centers, she was able to consult a doctor from her village, receive a proper diagnosis, and get prescribed medication. Encouraged by the accessibility and ease of the service, she began using the telemedicine center regularly, not only for herself but also for her children's health needs. This shift in behavior has inspired others in her community to seek medical consultations through telemedicine, fostering a newfound awareness of the importance of regular healthcare check-ups and timely intervention.

Such examples demonstrate how telemedicine has removed barriers like distance, cost, and lack of awareness, creating a culture where individuals are more inclined to prioritize their health and seek timely interventions. This ease of access has particularly influenced preventive care practices, with more people opting for regular health screenings to detect conditions early, such as diabetes or hypertension, which they might have previously ignored due to logistical challenges. Additionally, telemedicine centers have facilitated easier follow-ups for ongoing treatments and improved adherence to prescribed medications by enabling consistent consultations.

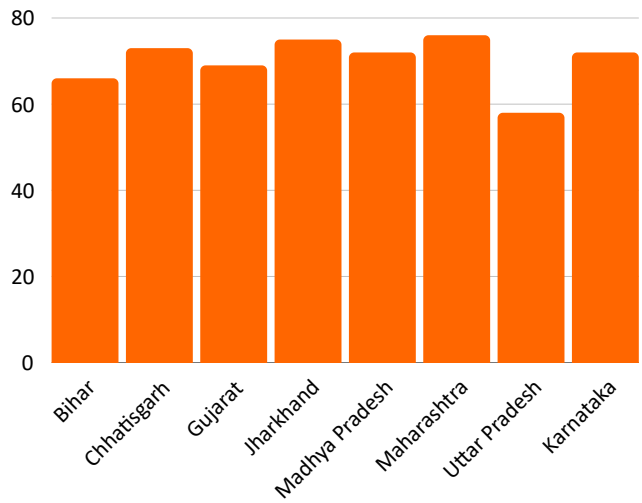


Fig 2 : Prioritize health and continue availing healthcare services

The data indicates that a significant number of individuals across various states have started seeking medical services they would have otherwise avoided. In states like Maharashtra (76%), Jharkhand (75%), and Chhattisgarh (73%), a large proportion of respondents expressed their intention to continue using healthcare services, suggesting that telemedicine has encouraged them to seek care they previously may not have due to factors like distance, cost, or convenience. Similarly, Gujarat (69%), Madhya Pradesh (72%), and Karnataka (72%) also demonstrated a strong willingness to utilize medical services they might have otherwise overlooked. While Uttar Pradesh (58%) showed a lower percentage, it still reflects a notable shift in health-seeking behavior. This indicates that telemedicine has effectively expanded access to healthcare, motivating individuals to seek medical attention they might have previously neglected.

Consultation through telemedicine is directly linked to improved health-seeking behavior by reducing barriers to healthcare access. Telemedicine allows individuals to seek medical advice without the constraints of travel, time, or high costs, making it easier for them to consult healthcare professionals. Nearly 50% of respondents across all locations availed general services through telemedicine, reflecting a positive shift in public health-seeking behavior. This utilization rate demonstrates that telemedicine is helping bridge gaps in healthcare access, enabling individuals to seek medical consultations more conveniently. The increased engagement with these services across diverse regions, from Madhya Pradesh to Uttar Pradesh, indicates growing awareness and acceptance of digital healthcare solutions.

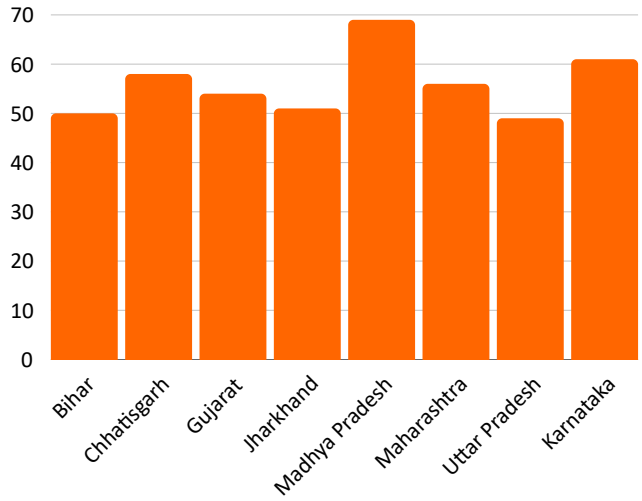


Fig 2: Beneficiaries availed General Services at the Telemedicine Center

As people turn to telemedicine for their general health concerns, it signifies a shift towards more proactive health-seeking behavior, where individuals are prioritizing timely medical advice, ultimately contributing to better health outcomes. 75% of respondents indicated that they received information on preventive healthcare through telemedicine centers. This accessibility to preventive healthcare information highlights improvements in healthcare availability, particularly for populations that might have difficulty accessing traditional healthcare services due to geographic, financial, or mobility constraints.

Improved Communication through Help Line

The helpline numbers initiated by Bayer in Karnataka, Gujarat, Madhya Pradesh, and Maharashtra have been instrumental in facilitating telemedicine consultations and providing information on service availability. However, the data reveals that awareness about these helplines remains low among beneficiaries. Karnataka saw 52% beneficiaries, while Madhya Pradesh and Maharashtra showed slightly better engagement with 62 and 64%, respectively. Gujarat, however, lagged with only 48%. This indicates that despite the valuable services offered through the helplines, there is a need for stronger awareness campaigns and outreach efforts to ensure more beneficiaries are informed and can fully utilize the helplines for improved healthcare access. Enhanced communication strategies and localized promotion could further amplify the reach of these services and bridge the awareness gap.

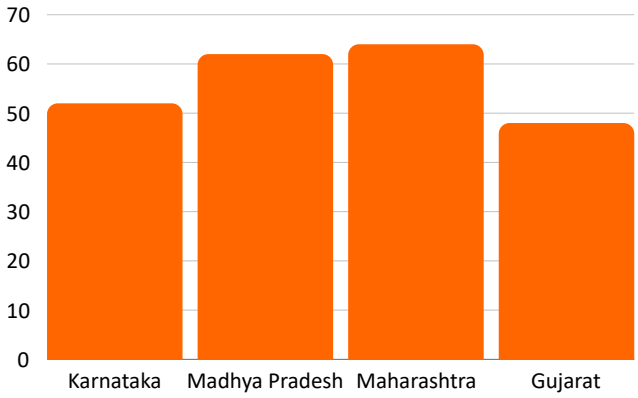


Fig 3: Aware about Helpline Number

Screening of Non-Communicable Diseases

The data on non-communicable disease (NCD) screening across various states reveals a diverse uptake of services, with respondents benefiting from early detection of conditions such as diabetes, thyroid disorders, and breast cancer. Karnataka leads with 66% of respondents availing screening services, followed closely by Jharkhand at 65%, suggesting a strong engagement in preventive healthcare in these regions. Gujarat (58%) and Chhattisgarh (52%) also show promising participation in NCD screenings. In contrast, states like Madhya Pradesh (36%) and Bihar (40%) exhibit lower screening rates, indicating potential gaps in awareness or accessibility to these services. Non-communicable disease (NCD) screening is a vital component of any telemedicine project, as it plays a critical role in early detection and management of chronic conditions such as diabetes, hypertension, and cardiovascular diseases. Regular NCD screening helps identify at-risk individuals and provides them with timely interventions, preventing disease progression and reducing long-term healthcare costs.

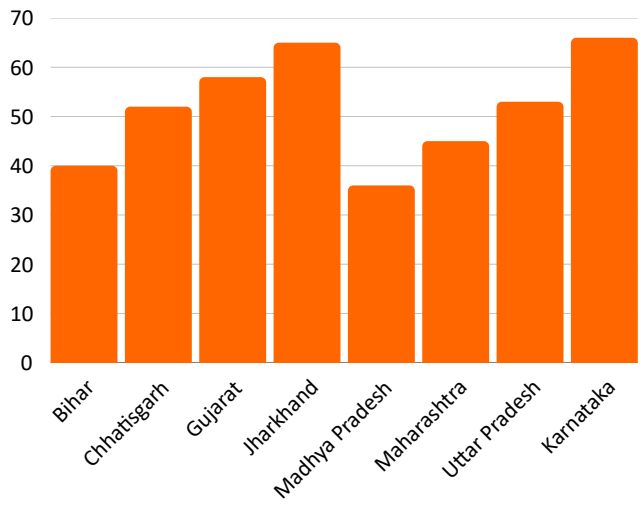


Fig 4: Availed Non Communicable Disease Screening

Several women across states emphasized the importance of availing breast cancer screenings, noting how it empowered them with critical information about their health. They highlighted that early detection through these screenings not only helped in identifying potential risks but also provided peace of mind, allowing for timely intervention if needed. The availability of breast cancer screening through the telemedicine project has been especially valuable in promoting proactive health management among women in underserved areas.

Many of the respondents reported undergoing health screenings for the very first time through Bayer's Telemedicine Project, highlighting one of the key benefits of the initiative. These screenings, have allowed individuals to identify potential health risks early on. For many, the lack of regular access to healthcare services meant that underlying conditions, such as hypertension or diabetes, went undiagnosed and untreated. During discussions, several women highlighted that they discovered they had thyroid conditions for the first time through the screenings provided as part of the Telemedicine Project. This exhibit the importance of these screenings, particularly for women in underserved communities who may not have regular access to healthcare. Respondents, both men and women, highlighted the significance of eye health screening as a crucial component of their overall health management. They expressed that regular screenings enable early detection of vision-related issues and eye diseases, which is vital for preventing potential complications.

Economic Impact

The establishment of telemedicine centers has led to notable financial savings for beneficiaries in various states. The recorded annual average savings across different regions provide valuable insights into the economic benefits of this initiative:

Highest Savings: Jharkhand and Uttar Pradesh showed the highest annual average savings per beneficiary, with amounts of ₹6415 and ₹6206, respectively. This highlights the significant financial advantages of telemedicine in these areas. The large savings primarily result from reduced travel to urban medical centers and associated expenses (Food, loss of daily wage etc).

Moderate Savings: Gujarat and Madhya Pradesh also reported substantial savings, with annual averages of ₹6100 and ₹5421 per family. These figures demonstrate the project's effective reach in areas where healthcare access was previously limited. The initiative not only cuts travel and out-of-pocket expenses but also improves the overall efficiency of healthcare access.

Lower but Meaningful Savings: Bihar and Chhattisgarh recorded annual average savings of ₹4278 and ₹4025, respectively. While these numbers are lower compared to other states, they still represent a significant reduction in healthcare-related costs for families who previously struggled to afford medical services.

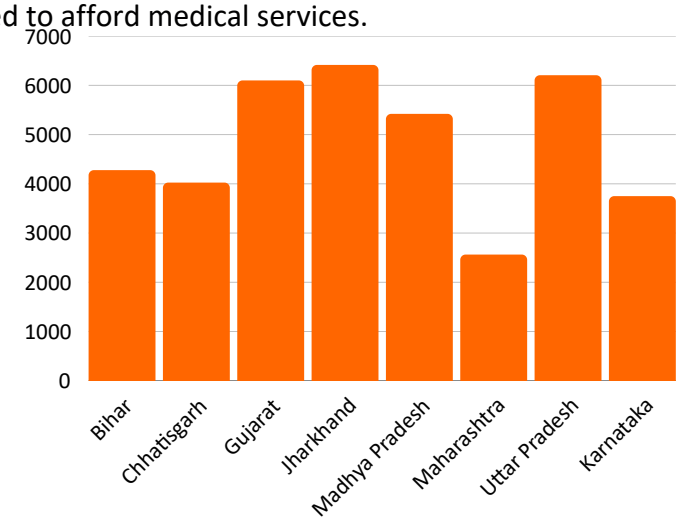


Fig 5: Savings due to Telemedicine Center

Least Savings: Maharashtra reported the lowest average savings at ₹2563 per beneficiary per annum. This could be due to the state's relatively better healthcare infrastructure in urban and semi-urban areas, leading to lower financial burdens when compared to more remote states.

The data shows that telemedicine services have positively impacted the economy, with rural and underserved populations seeing considerable reductions in travel and healthcare expenses. The variation in savings between states may be due to differences in pre-existing healthcare access, geographical factors, and the extent of telemedicine usage. States like Jharkhand, Uttar Pradesh, Gujarat, and Madhya Pradesh, where healthcare access has traditionally been limited, have gained the most from this initiative.

It is crucial to highlight that an impressive 91% of respondents reported that the telemedicine initiative has significantly reduced their out-of-pocket healthcare expenses. This high percentage underscores the initiative's tangible financial impact on individuals, especially in rural and underserved areas where access to affordable healthcare is often limited.

The reduction in out-of-pocket spending is likely attributed to several factors:

- Elimination of Travel Costs: Telemedicine eliminated the need for patients to travel long distances to reach healthcare facilities in urban or semi-urban centers. For many, transportation to healthcare centers, particularly in remote areas, represented a significant financial burden, especially when multiple visits were required for treatment or follow-up consultations.

- Reduction in out-of-pocket expenditure: The initiative effectively reduced out-of-pocket expenditure for beneficiaries by addressing key healthcare costs. Out-of-pocket expenses typically include direct payments for consultations, medicines, and treatments, which can be a significant financial burden, especially for economically disadvantaged communities. By offering free consultations through telemedicine centers and providing medicines at no cost, the project eliminated two major expense components. This reduction played a crucial role in making healthcare more accessible and affordable for the beneficiaries throughout the project duration.

- No Cost Diagnostic Tests and Medication: In majority of the cases, beneficiaries availed diagnostic and consultation without any cost. In addition to visiting Primary Health Centers (PHCs), many beneficiaries also sought consultations with private practitioners. However, through the telemedicine initiative, they were able to avail diagnostic tests and consultations without any cost, which significantly reduced their reliance on private practitioners. This access to free healthcare services has made it easier for individuals to manage their health needs without incurring out-of-pocket expenses, allowing them to receive timely medical attention and diagnostic services they may have otherwise sought from private practitioners at a higher cost.

Accessibility to Telemedicine Centers

Table 1: Respondents View on Accesibility of Telemedicine Center

State	Response in %
Bihar	91
Gujarat	83
Chhattisgarh	89
Maharashtra	86
Uttar Pradesh	85
Karnataka	78
Madhya Pradesh	85
Jharkhand	92

The data on respondents' perceptions regarding the accessibility of the telemedicine center reveals high levels of satisfaction across various states. Bihar leads with 91% of respondents indicating ease of usage and access, followed closely by Jharkhand at 92%, highlighting a strong positive reception in these areas. Other states, including Chhattisgarh (89%), Maharashtra (86%), and Uttar Pradesh (85%), also demonstrate significant improvement, suggesting that the majority of beneficiaries find the telemedicine services accessible and user-friendly. In contrast, Karnataka has the lowest percentage at 78%, indicating a potential area for improvement in enhancing accessibility or user experience. Overall, the data reflects a generally favorable view of telemedicine accessibility, which is crucial for promoting continued engagement and utilization of healthcare services.

Quality of Health Care Professionals - Technical Skills and Soft Skills

The data on the quality of healthcare professionals, as rated by respondents, reflects a generally positive perception across all states. Bihar shows the highest percentage of respondents rating healthcare professionals as "Good" at 76%, indicating strong approval of the quality of care provided. Chhattisgarh follows with a notable 68% rating, and Gujarat also demonstrates solid approval at 71%.

While the ratings for "Average" and "Bad" remain low across all states, with the highest percentage of negative ratings at only 8% in Uttar Pradesh, this suggests that most beneficiaries have a favorable view of the healthcare professionals' quality. Karnataka has the lowest percentage of "Good" ratings at 61%, indicating a potential area for improvement in the quality of care or patient satisfaction. Overall, the data highlights a positive assessment of healthcare professionals, suggesting that the telemedicine project has successfully delivered quality services, but also points to opportunities for further enhancement, particularly in states like Karnataka.

Table 2: Respondents View on Quality of Healthcare Professionals

State	Good	Average	Excellent	Bad
Bihar	76%	6%	14%	4%
Gujarat	71%	9%	18%	2%
Chhattisgarh	68%	12%	27%	3%
Maharashtra	65%	14%	19%	2%
Uttar Pradesh	72%	5%	15%	8%
Karnataka	61%	19%	17%	3%
Madhya Pradesh	67%	11%	20%	2%
Jharkhand	75%	6%	18%	1%

Availability of medicines at Telemedicine Center

Madhya Pradesh leads with 91% of respondents confirming that prescribed medicines were available either at the center or at the nearest pharmacy, suggesting strong accessibility in that region. Uttar Pradesh follows closely with 90%, reinforcing the effectiveness of the telemedicine project in ensuring essential medications are within reach. Other states, such as Gujarat (88%) and Bihar (84%), also report high levels of satisfaction regarding the availability of medicines, highlighting a consistent trend in accessibility. Chhattisgarh, while lower at 78%, still reflects a favorable view of medicine availability. Overall, the data underscores the importance of ensuring that patients can access prescribed medications promptly, which is crucial for effective treatment and health outcomes.

Table 3: Respondents View on availability of medicines

State	Availability of medicines
Bihar	84%
Gujarat	88%
Chhattisgarh	78%
Maharashtra	81%
Uttar Pradesh	90%
Karnataka	85%
Madhya Pradesh	91%
Jharkhand	82%

Awareness on Health Scheme

The data shows that beneficiaries were generally well-informed about various state and central health-related schemes. Karnataka has the highest awareness rate at 90%, indicating effective outreach efforts. Gujarat follows closely with 89%, while Madhya Pradesh and Jharkhand both have strong awareness levels at 88% and 87%, respectively.

Bihar (84%) and Uttar Pradesh (86%) also show positive awareness, suggesting that telemedicine centers are effectively educating beneficiaries about important health resources. Although Chhattisgarh has a slightly lower awareness rate at 78%, it still reflects a good understanding of health schemes. Overall, these results highlight the important role telemedicine centers played in providing healthcare services and informing beneficiaries about health-related programs, helping them access valuable resources for better health.

Table 4: Awareness on Health Schemes

State	Awareness on Health Schemes	Government Schemes
Bihar	84%	Ayushman Bharat, Jan Arogya Yojana
Gujarat	89%	Ayushman Bharat Yojana, Mamata Taruni Scheme, Amrutam Yojana. Kasturba Poshan Sahay Yojana
Chhattisgarh	78%	Ayushman Bharat Yojana, Beem Yojana (DKBSSY)
Maharashtra	82%	Ayushman Bharat Yojana, Jan Arogya Yojana
Uttar Pradesh	86%	Ayushman Bharat Yojana, eSanjeevani
Karnataka	90%	Ayushman Bharat, eSanjeevani
Madhya Pradesh	88%	Ayushman Bharat Yojana, Janani Suraksha Yojana
Jharkhand	87%	Ayushman Bharat Yojana, eSanjeevani, Beema (Insurance) Yojana

Improved Understanding on Early Detection, health habits and Vaccinations

Since utilizing the services at the telemedicine center, respondents have reported improvement in their understanding of healthy habits, early disease detection, mother and child care and the importance of vaccinations. Many individuals have gained insights into essential components of maintaining a healthy lifestyle, including proper nutrition.

Additionally, the telemedicine center has highlighted the value of early disease detection, making respondents more aware of how regular screenings and check-ups can help identify potential health issues before they escalate. The emphasis on vaccinations has also resonated strongly, with many recognizing their critical role in preventing diseases and protecting both personal and community health. Overall, the guidance and information provided by healthcare professionals at the telemedicine center have empowered respondents to make informed decisions about their health and well-being, fostering a more proactive approach to managing their health.

Table 5: Improved Understanding on various health related Habits

State	Awareness on Health Schemes
Bihar	71%
Gujarat	61%
Chhattisgarh	52%
Maharashtra	67%
Uttar Pradesh	56%
Karnataka	62%
Madhya Pradesh	78%
Jharkhand	69%

Telemedicine Center - An Alternative to Traditional Health Care Infrastructure

The table below highlights the respondents view on accessing services at the telemedicine center that are not typically offered through government healthcare infrastructure. This highlights a significant gap in available services within traditional healthcare settings, underscoring the critical role of telemedicine in filling these voids. Additionally, the respondents indicated that, without the telemedicine center, they would need to incur out-of-pocket expenses to access similar services elsewhere. This not only emphasizes the cost-effectiveness of utilizing telemedicine but also illustrates its importance in making essential healthcare services more accessible to individuals who might otherwise face financial barriers. Overall, these findings underscore the value of telemedicine in enhancing healthcare access and affordability for the community.

Table 6: Respondents view on telemedicine center as an effective alternative to traditional health care infrastructure

State	Response in %
Bihar	94%
Gujarat	88%
Chhattisgarh	90%
Maharashtra	85%
Uttar Pradesh	92%
Karnataka	82%
Madhya Pradesh	86%
Jharkhand	89%

BIHAR

A total of 326 individual respondents, along with 19 additional stakeholders, were interviewed. This included staff members deployed at the PHC center, such as doctors, Auxiliary Nurse Midwives (ANMs), General Nurse Midwives (GNMs), Asha Workers and non-medical personnel.

INDIVIDUAL RESPONDENTS

The demographic profile of reveals a balanced gender distribution, with 55% of respondents identifying as male and 45% as female. In terms of age representation, the data indicates a diverse range of participants: 42% individuals are aged between 18 and 35 years, suggesting a strong engagement from younger adults. The age group of 36 to 45 years comprises 25% individuals, while those aged 46 to 60 years account for 22%. Notably, the oldest age group, comprising individuals aged 61 and above, includes 11% participants.

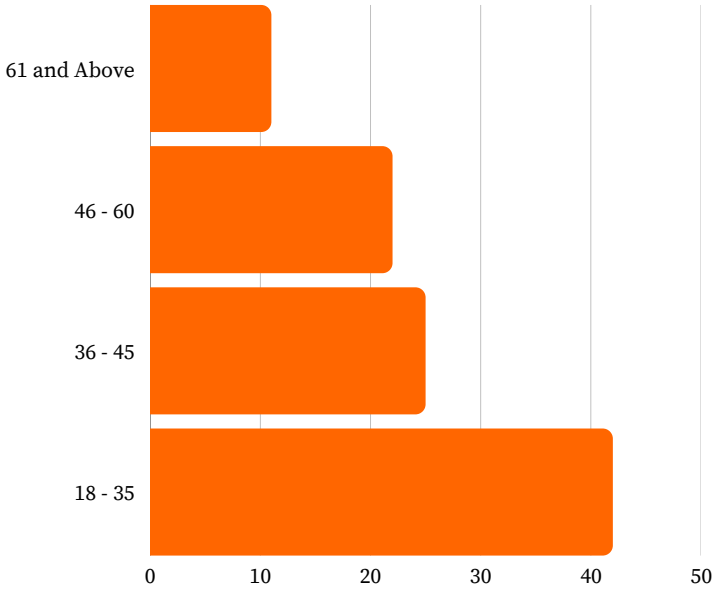


Fig 6: Age Representation

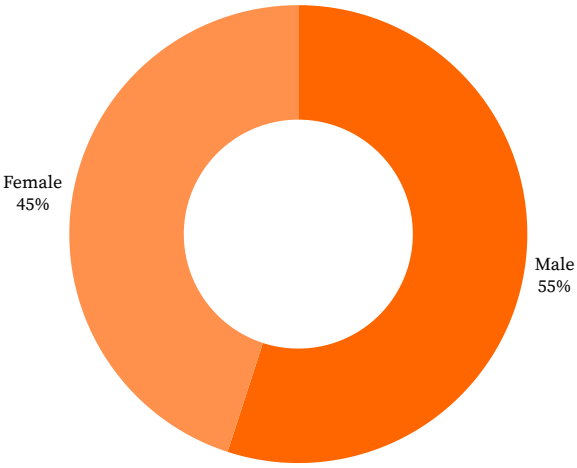


Fig 7 : Gender Representation

The data indicates that 91% of respondents were aware of the services offered at the telemedicine center, reflecting a high level of awareness regarding the available healthcare resources. This suggests that the telemedicine project has successfully reached a significant portion of the community, promoting understanding of the services provided. However, the remaining respondents, who were aware of the existence of telemedicine but lacked comprehensive knowledge of the specific services, highlight a potential gap in information dissemination.

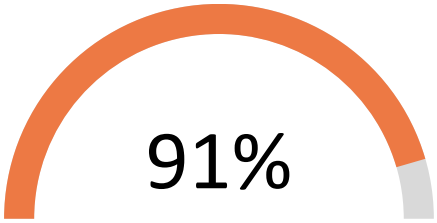


Fig 8: Aware about the telemedicine center

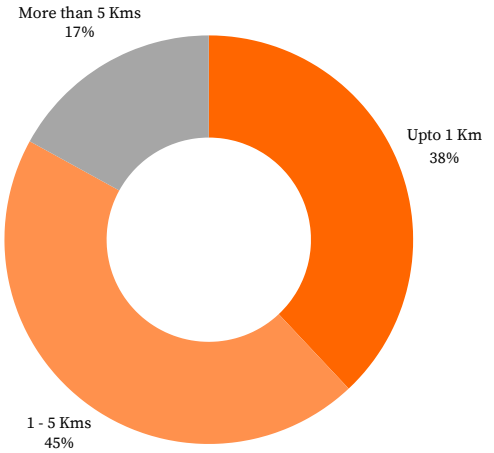


Fig 9: Distance to telemedicine center

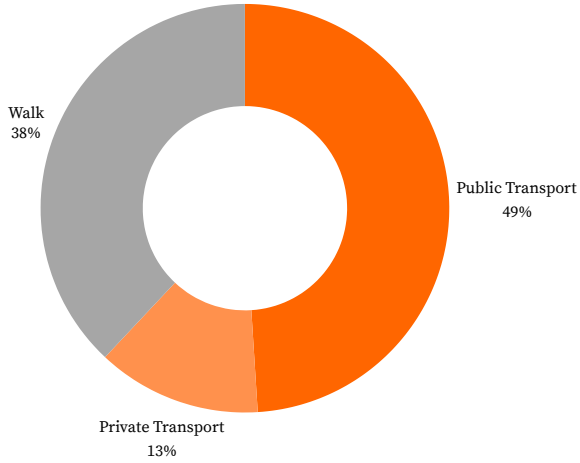


Fig 10: Mode of Transportation

The data regarding the distance to the telemedicine center shows that 38% of the population lives within 1 kilometer of the center, while 45% are situated between 1 and 5 kilometers away. This means that a significant majority—83%—are within a 5-kilometer radius of the telemedicine center, indicating relatively easy access for most community members. Conversely, 17% of the population resides more than 5 kilometers away, which could create a barrier to accessing telemedicine services for these individuals. 49% of respondents rely on public transport, making it the most commonly used option. In contrast, 38% of the population prefers to walk to the center, indicating a significant level of accessibility for those living nearby. Meanwhile, only 13% use private transport, suggesting that fewer individuals opt for this mode.

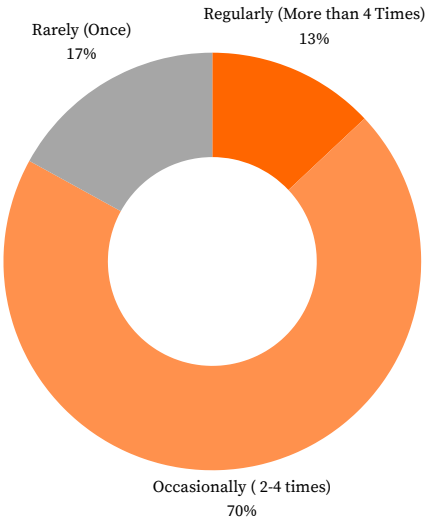


Fig 11: Frequency of Visits

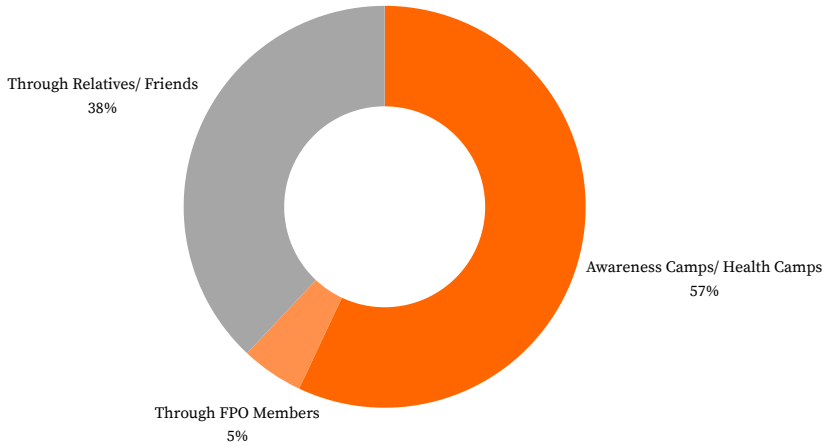


Fig 12: Awareness about Telemedicine Center

The data on respondents who accessed services from the telemedicine center reveals that 52% used general services, highlighting a strong demand for basic healthcare. This suggests that many individuals are prioritizing routine health consultations, essential for maintaining overall well-being. Specialist services were utilized by 46% of respondents, showing a notable interest in specialized care, though slightly lower than general services. This may indicate that while general health concerns are more common, there is still a significant need for expert consultations in specific medical areas. Only 2% of respondents accessed emergency services.

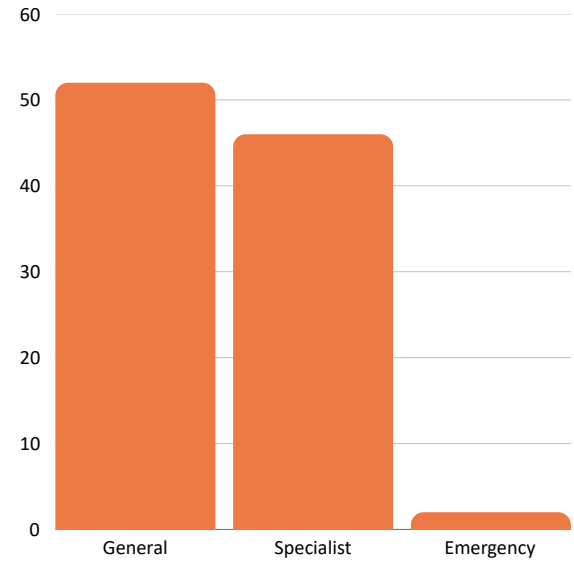


Fig 13 :Type of Services Availed at Telemedicine Center

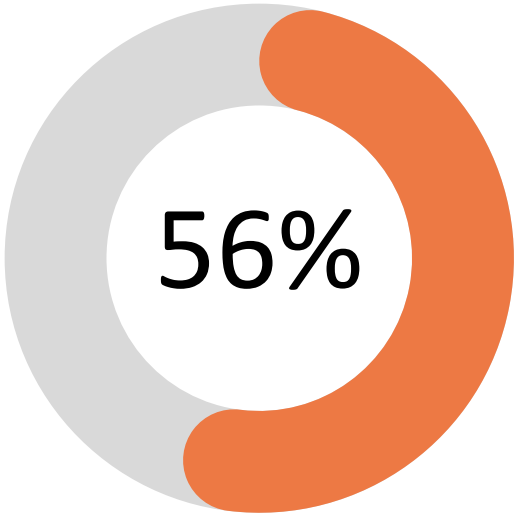


Fig 14 :NCD Screening was helpful

Non-communicable disease screenings were provided to beneficiaries, with 56% stating that the screenings were beneficial. This high percentage suggests that the services were valuable, likely aiding in the early detection and management of health issues. Some respondents noted that the screening helped them become aware of existing health conditions that may require proper attention. Additionally, the majority of beneficiaries reported that it was their first time undergoing such a screening.

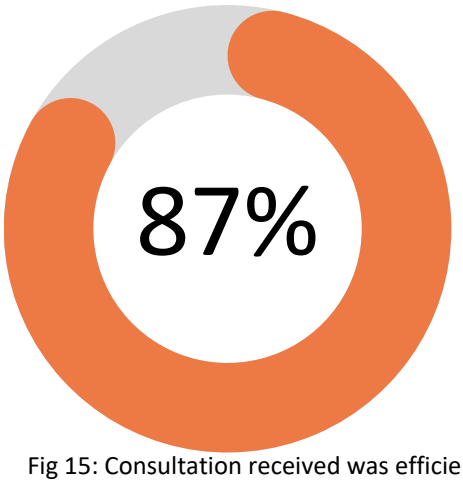


Fig 15: Consultation received was efficient

87% of the respondents stated that the consultation they received was smooth and efficient and without any technical glitch.

93% of the respondents were aware of the health camps organized by the telemedicine centers in their villages. Respondents affirmed on receiving medicine during the health camps organized by the partner.

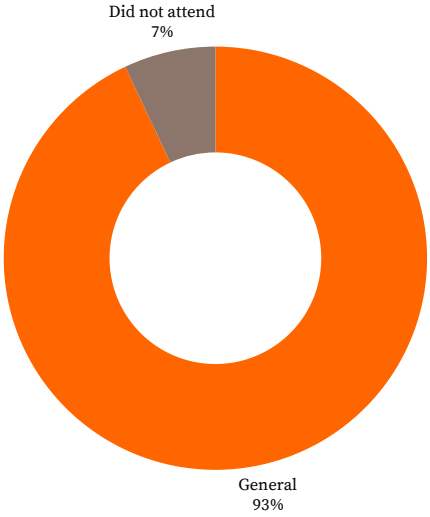


Fig 16 : Type of Health Camp Attended

Ninety-one percent of respondents reported that access to the telemedicine center was advantageous. Some attributed this to the prompt services they received, while others noted that these services allowed them to avoid relying on private practitioners. Additionally, these respondents mentioned that they have recommended the telemedicine center to their peers, including friends and relatives.

"At the PHC, we only have access to general physicians, but through telemedicine, we can consult with all types of specialist doctors. This makes it easier to get the expert care we need without having to travel long distances."

-Suresh Prajapati

Challenges

The challenges reported by beneficiaries in Bihar include:

Language Barrier: Beneficiaries faced difficulties in communication due to the absence of healthcare providers who spoke the local dialects, affecting the quality of consultations and understanding of medical advice.

Unavailability of Medicines: Several prescribed medicines were not available at nearby pharmacies, causing delays in treatment and leading to frustration among beneficiaries.

Insufficient Diagnostic Kits: There was a shortage of diagnostic kits at telemedicine centers, which impacted the ability to conduct necessary tests and hindered the accuracy of diagnoses.

Recommendations

Recruitment of Local Language-Speaking Healthcare Providers: To address the language barrier, it is recommended to hire healthcare providers who are fluent in the local dialects. This would improve communication, ensure better understanding of medical advice, and enhance the overall consultation experience for beneficiaries.

Establishing Reliable Medicine Supply Chains: To address the issue of unavailable medicines, telemedicine centers should establish partnerships with local pharmacies or set up a direct supply chain for essential medications. This would ensure that prescribed medicines are easily accessible to beneficiaries without delays.

GUJARAT

As part of the endline assessment, a total of 150 beneficiaries from Gujarat were consulted. This diverse sample provided valuable insights into the impact and effectiveness of the telemedicine services offered in the region.

INDIVIDUAL RESPONDENTS

The data reveals that 62% of the beneficiaries are aged 18 to 35, making younger adults the largest demographic engaging with telemedicine services. This suggests that younger individuals are more comfortable or familiar with using digital healthcare platforms. The 36-45 years age group accounts for 22% of the beneficiaries, while the 46-60 years group makes up 12%. These figures indicate that middle-aged adults are also benefiting from telemedicine, but the adoption rate is lower compared to younger individuals. Only 4% of the beneficiaries are from the 61 and above age group, highlighting a significantly lower adoption rate among older adults.

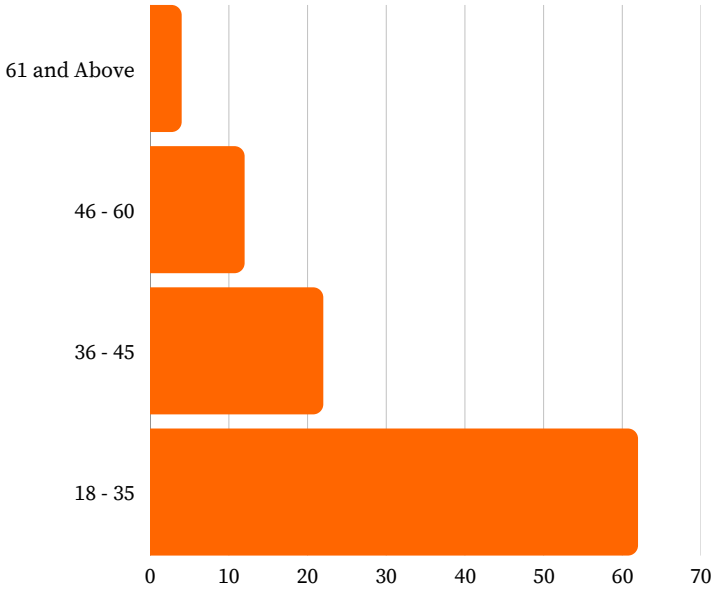


Fig 17: Age Representation

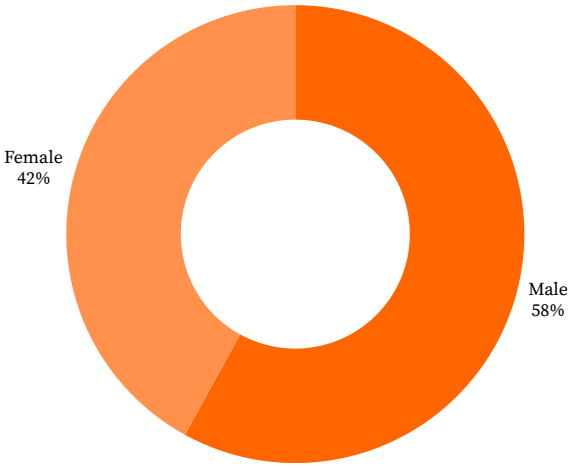


Fig 18 : Gender Representation

The data shows that 94% of respondents were aware of the services offered at the telemedicine center, demonstrating a strong level of awareness about the healthcare resources available. This suggests that the telemedicine project has effectively reached a large part of the community, raising awareness about its services. However, the remaining respondents, though familiar with the concept of telemedicine, lacked detailed knowledge about the specific services, indicating a potential gap in the communication of information.

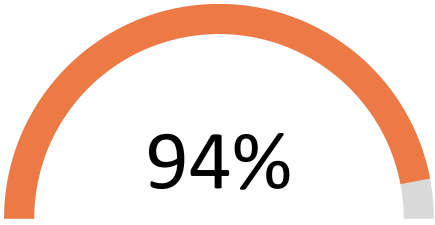


Fig 19: Aware about the telemedicine center

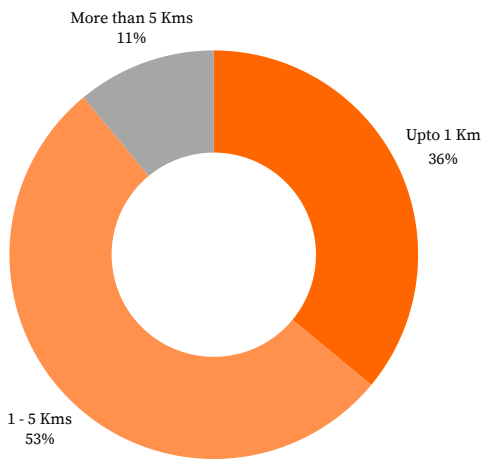


Fig 20: Distance to telemedicine center

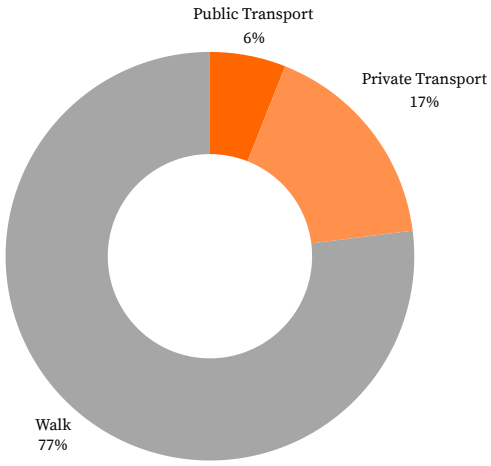


Fig 21: Mode of Transportation

The data on the distance to the telemedicine center reveals that 36% of the population lives within 1 kilometer, and 53% are located between 1 and 5 kilometers away. This indicates that a substantial majority—89%—resides within a 5-kilometer radius, suggesting relatively convenient access for most community members. However, 11% of the population lives more than 5 kilometers away, which may pose a challenge in accessing telemedicine services. Notably, 77% of respondents reported that they could easily reach the center on foot.

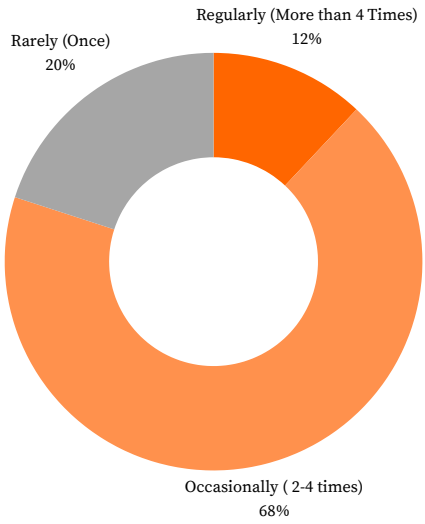


Fig 22: Frequency of Visits

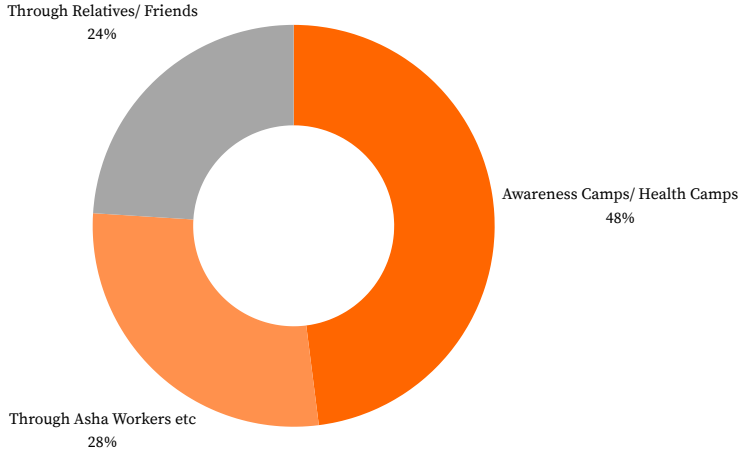


Fig 23: Awareness about Telemedicine Center

The data on the percentage of respondents who availed services from the telemedicine center shows that 50% utilized general services, indicating a strong demand for basic healthcare needs. This suggests that many individuals are actively seeking routine health consultations, which is crucial for maintaining overall wellness. Specialist services were accessed by 35% of respondents, reflecting a significant interest in specialized care, though it is lower than general services. This could imply that while general health issues are more prevalent, there is still a considerable need for expert consultations in specific medical fields. 15% of respondents utilized emergency services.

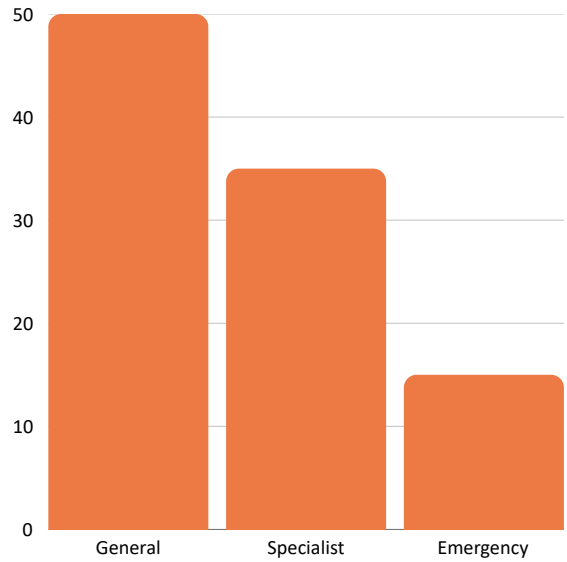


Fig 24 :Type of Services Availed at Telemedicine Center

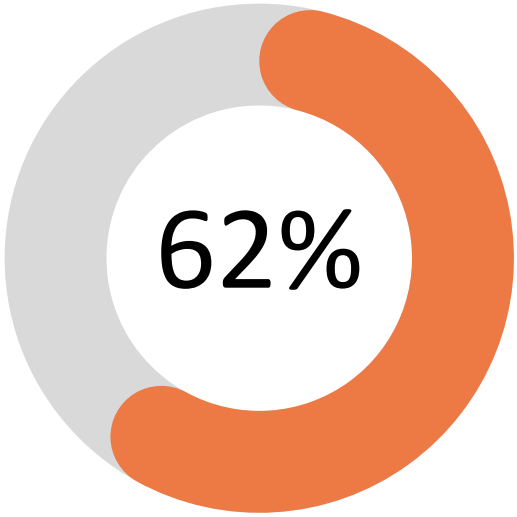


Fig 25:NCD Screening was helpful

As part of the telemedicine project, non-communicable disease screening was offered to beneficiaries, with 62% reporting that the screening was helpful. This high percentage indicates that beneficiaries found value in the screening services, which likely contributed to early detection and management of potential health issues.

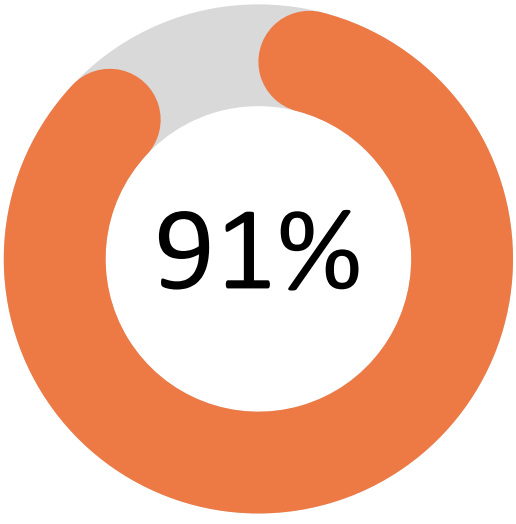


Fig 26: No technical difficulties during consultation

91% of the respondents stated that they did not face any technical difficulties during consultation. On contrary, 9% of the respondents raised an issue of interrupted connectivity and failure to connect during the consultation.

92% of the respondents were aware of the health camps organized by the telemedicine centers in their villages. This high level of awareness suggests that the telemedicine centers have successfully communicated their initiatives and services to the community, effectively promoting health education and outreach.

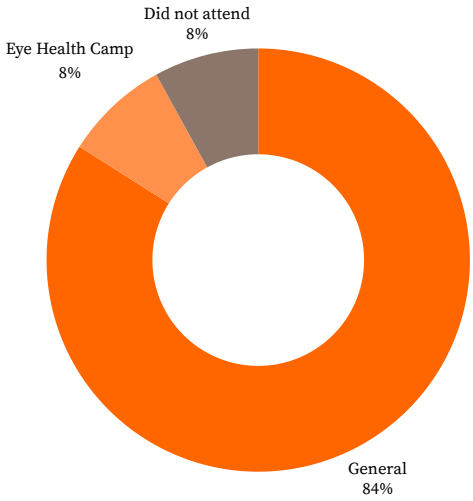


Fig 27 :Type of Health Camp Attended

95% of the respondents mentioned that access to the telemedicine center was beneficial. Some credited this to the timely services they received, while others emphasized that the services provided saved them from having to rely on private practitioners. These respondents also mentioned that they have recommended access to telemedicine center among their peer including friends and relative.

Challenges

Few of the respondents highlighted the wait time at the telemedicine center as a challenge. No major concern from beneficiary was observed otherwise.

CHHATISGARH

As part of the endline evaluation, a total of 242 individuals, encompassing both men and women who have utilized telemedicine services, were consulted to gather insights and assess the program's impact.

INDIVIDUAL RESPONDENTS

The gender-wise representation of respondents who have availed services indicates a balanced utilization of telemedicine, with 51% of the users being male and 49% being female. The nearly equal percentage of male and female respondents suggests that both genders have relatively equal access to telemedicine services, highlighting the initiative's effectiveness in reaching a broad audience. It is also visible from the below figure that people from age group 46 - 60 and 61 and above has accessed the telemedicine center services the most.

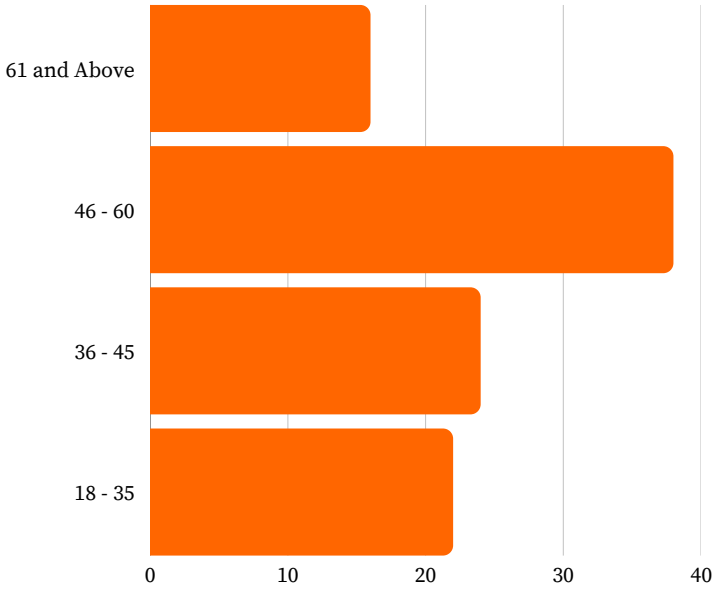


Fig 28: Age Representation

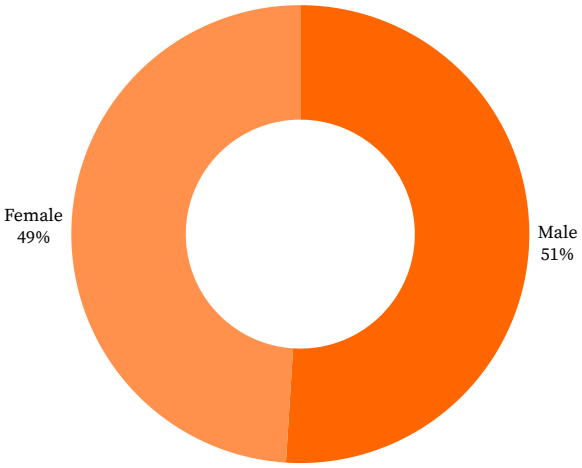


Fig 29 : Gender Representation

High awareness levels are essential for ensuring that individuals know where to seek help and the types of services available, which can lead to better health outcomes. 96% of respondents were aware of the services provided at the telemedicine center, demonstrating a strong level of awareness about the healthcare resources accessible to them.

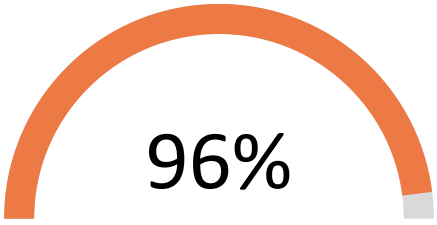


Fig 30: Aware about the telemedicine center

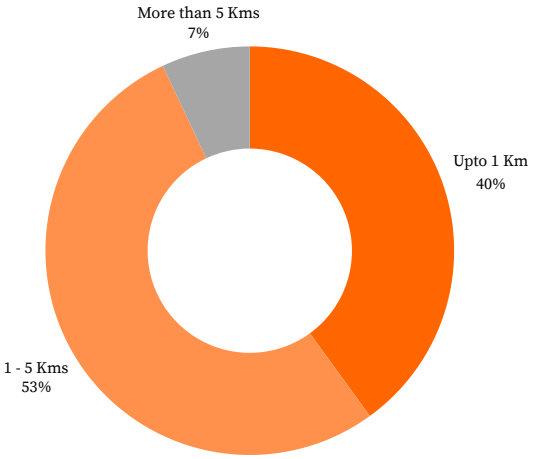


Fig 31: Distance to telemedicine center

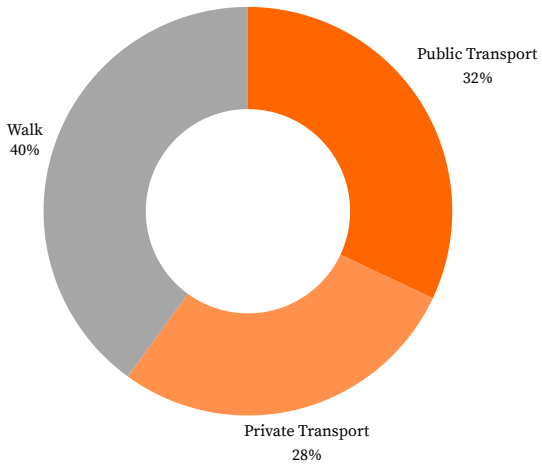


Fig 32: Mode of Transportation

The data on the distance to the telemedicine center indicates that 40% of the population resides within 1 kilometer of the center, and these individuals are also the ones who can conveniently access the center on foot. 32% of the respondents mentioned that they have to use public transport to access the center, however affirmed that it is convenient to access the center.

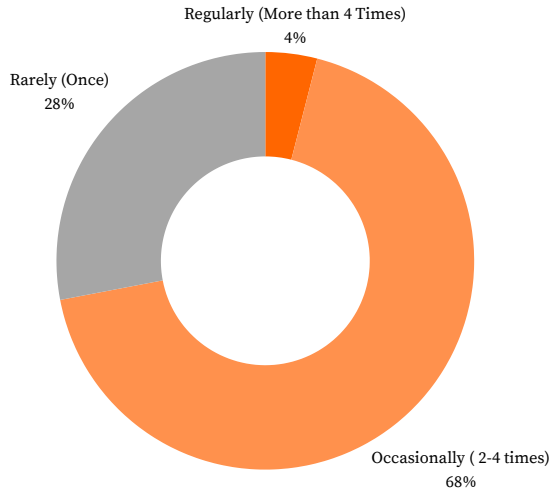


Fig 33: Frequency of Visits

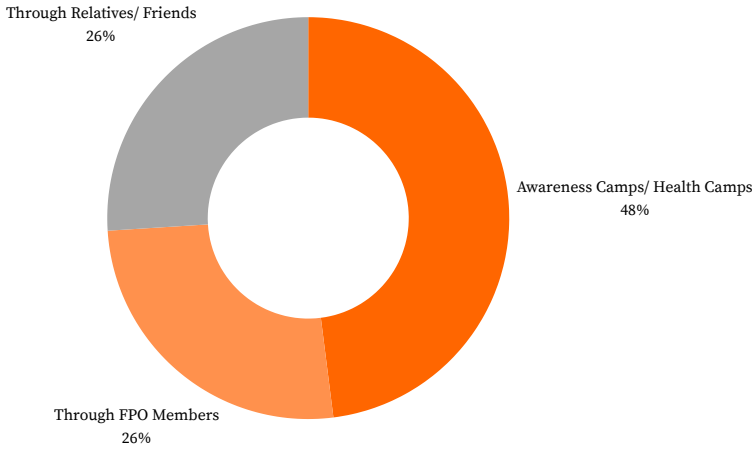


Fig 34: Awareness about Telemedicine Center

The data regarding the percentage of respondents who used services from the telemedicine center reveals that 58% accessed general services, highlighting a strong demand for essential healthcare. This indicates that a considerable number of individuals are proactively seeking routine health consultations, which are vital for overall well-being. In contrast, 36% of respondents utilized specialist services, demonstrating notable interest in specialized care, although this figure is lower than that for general services.

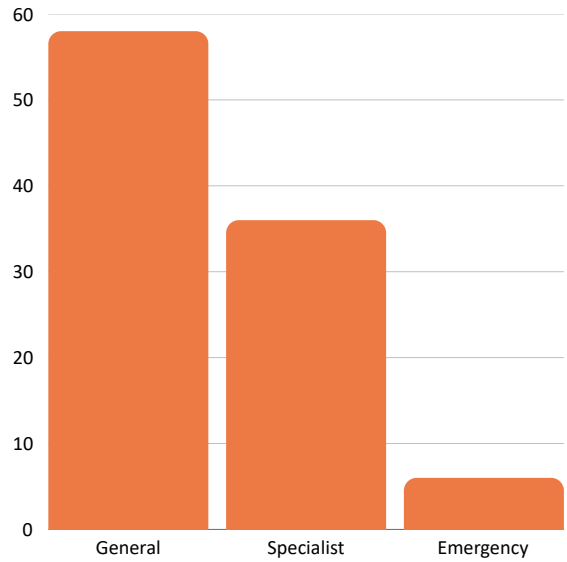


Fig 35 :Type of Services Availed at Telemedicine Center

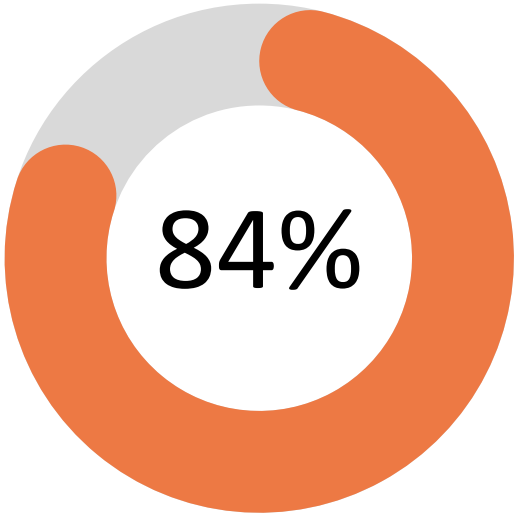


Fig 36:NCD Screening was helpful

As part of the telemedicine project, non-communicable disease screening was offered to beneficiaries, with 84% reporting that the screening was helpful. This high percentage indicates that beneficiaries found value in the screening services, which likely contributed to early detection and management of potential health issues. Respondents affirmed that screening of diabetes, thyroid, anemia was undertaken. Out of the total respondents who availed screening, more than 90% of them rated “satisfied” with the service.

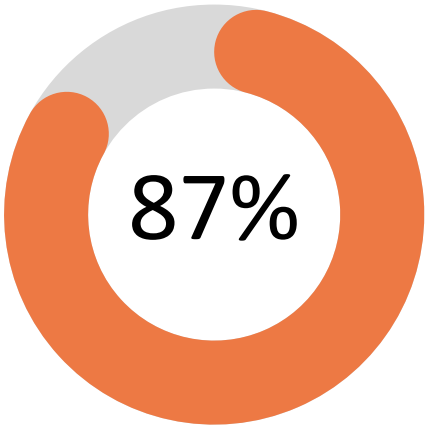


Fig 37: No technical difficulties during consultation

87% of the respondents stated that they did not face any technical difficulties during consultation. On contrary, 11% of the respondents raised an issue of interrupted connectivity and failure to connect during the consultation.

Seventy-eight percent of respondents were aware of the health camps organized by the telemedicine centers in their villages. This high degree of awareness indicates that the telemedicine centers have effectively communicated their initiatives and services to the community, successfully promoting health education and outreach.

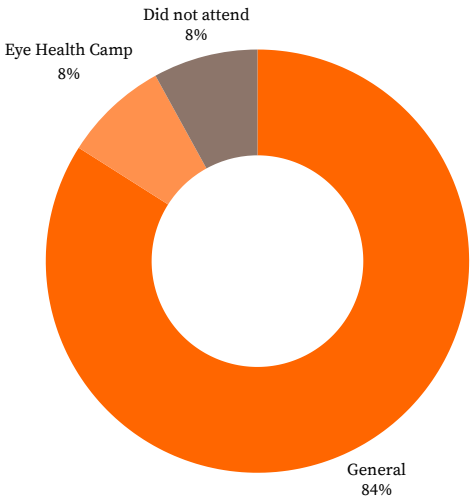


Fig 38:Type of Health Camp Attended

Eighty-six percent of respondents stated that access to the telemedicine center was advantageous. Some attributed this benefit to the prompt services they received, while others highlighted that these services allowed them to avoid depending on private practitioners. Additionally, these respondents indicated that they have recommended the telemedicine center to their peers, including friends and family.

Challenges

Some respondents highlighted the lack of local language-speaking healthcare staff as a significant challenge. In remote areas, especially where dialects vary from the standard language spoken in urban centers, communication can become a barrier. Many beneficiaries in these regions struggled to understand medical advice or instructions given in a language they were not comfortable with, which could affect the quality of consultations and patient satisfaction.

Recommendations

Onboarding Healthcare Providers Fluent in Local Languages: To overcome the language barrier, it is recommended to recruit healthcare providers who are proficient in the local dialects. This would facilitate clearer communication, ensure a better understanding of medical guidance, and improve the overall consultation experience for beneficiaries.

Patient Education and Guidance: To reduce confusion, beneficiaries should be provided with clear, easy-to-understand materials or sessions on how to access medications, use diagnostic services, and navigate telemedicine consultations. This would help increase confidence in the system and improve service utilization.

MAHARASHTRA

In the endline evaluation, 171 individuals, including both men and women who have used telemedicine services, were consulted to obtain insights and evaluate the program's effectiveness.

INDIVIDUAL RESPONDENTS

The gender distribution among the total respondents surveyed shows that 61% were female and 39% were male, indicating a predominance of female participants in the study. The higher percentage of female respondents suggests that women are more actively utilizing the telemedicine services compared to men. Also, it can be inferred that women were more open to participate in the survey. This could be attributed to various factors, including greater health-seeking behavior among women or more health concerns prevalent in this demographic.

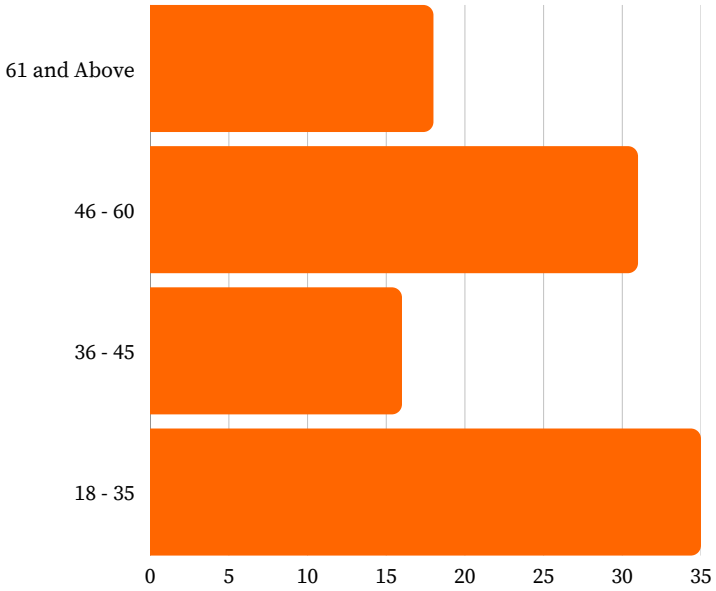


Fig 39: Age Representation

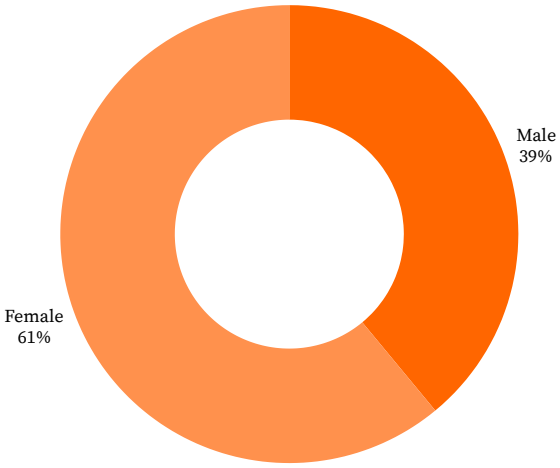


Fig 40: Gender Representation

The data shows that 94% of respondents were aware of the services provided at the telemedicine center, indicating a strong level of awareness about the healthcare resources available to them.

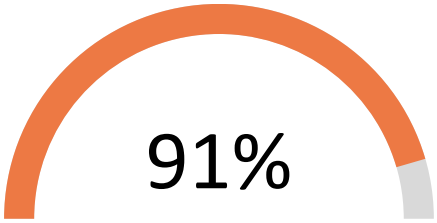


Fig 41: Aware about the telemedicine center

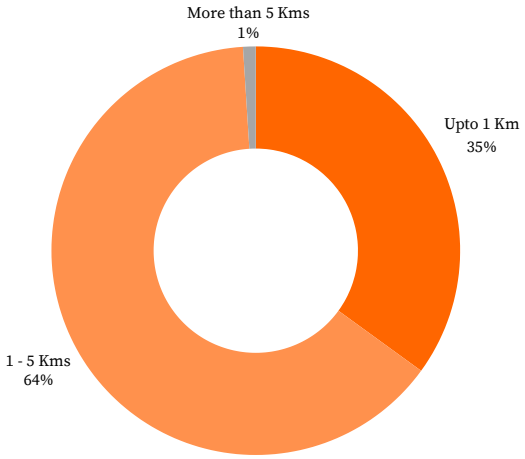


Fig 42: Distance to telemedicine center

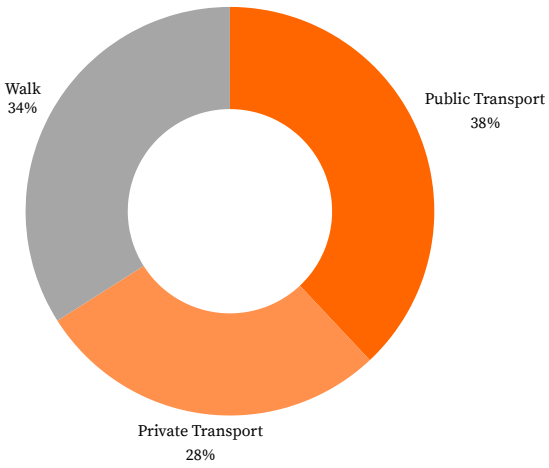


Fig 43: Mode of Transportation

A significant majority of respondents, 64%, live between 1 and 5 kilometers from the telemedicine center. This suggests that a large portion of the population can access the services relatively easily, making it convenient for them to seek healthcare. Additionally, 35% of individuals reside within 1 kilometer of the center. This proximity further enhances accessibility, indicating that a substantial number of community members can reach the telemedicine services on foot or with minimal travel.

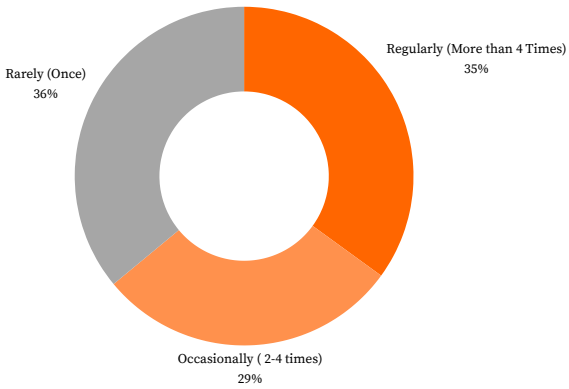


Fig 44: Frequency of Visits

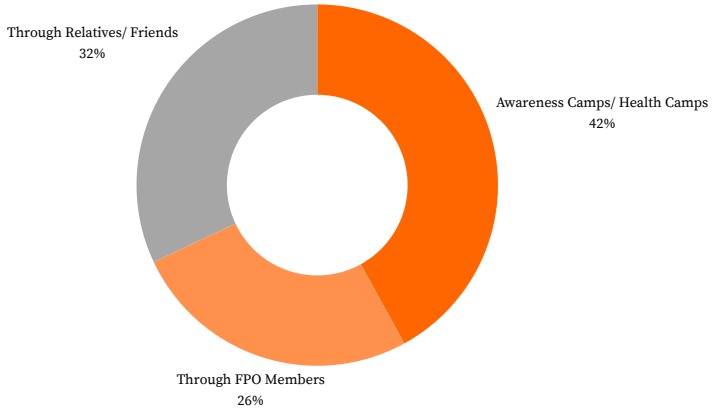


Fig 45: Awareness about Telemedicine Center

56% of respondents accessed general services, indicating a robust demand for basic healthcare needs. This suggests that many individuals are seeking routine health consultations, which are vital for maintaining overall health. 40% of respondents utilized specialist services, reflecting a significant interest in more focused, expert care. While this figure is lower than that for general services, it still demonstrates a considerable need for specialized healthcare within the community.

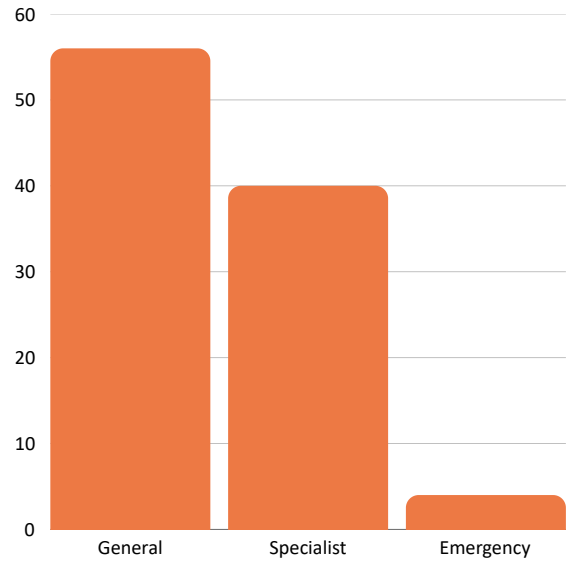


Fig 46:Type of Services Availed at Telemedicine Center

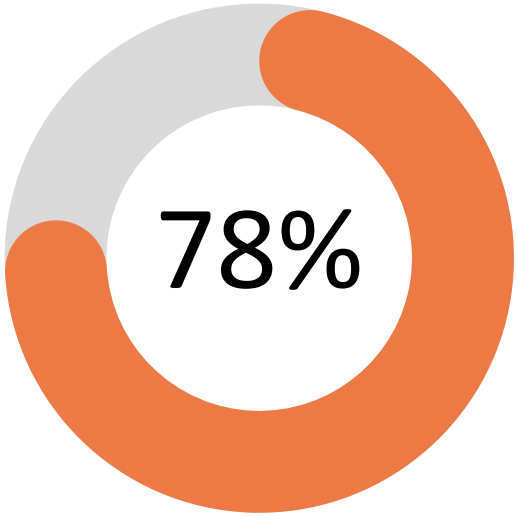


Fig 47:NCD Screening was helpful

As part of the telemedicine project, non-communicable disease screening was offered to beneficiaries, with 78% reporting that the screening was helpful. This high percentage indicates that beneficiaries found value in the screening services, which likely contributed to early detection and management of potential health issues. Approximately 21% of the respondents affirmed on undergoing breast cancer screening previously. Out of this women, most of them had undergone screening for the first time. 36% of the respondents mentioned that they were screened for diabetes.

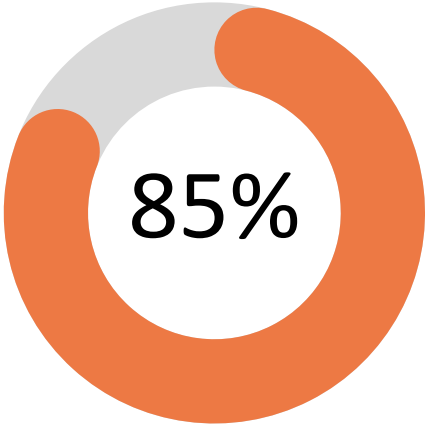


Fig 48: No technical difficulties during consultation

85% of the respondents stated that they did not face any technical difficulties during consultation. Few of the respondents mentioned on issues like wait time, unavailability of the professional during the need.

82% of the respondents were aware of the health camps organized by the telemedicine centers in their villages. Respondents mentioned that they have received screening facility, medicines and diagnosis during the health camps.

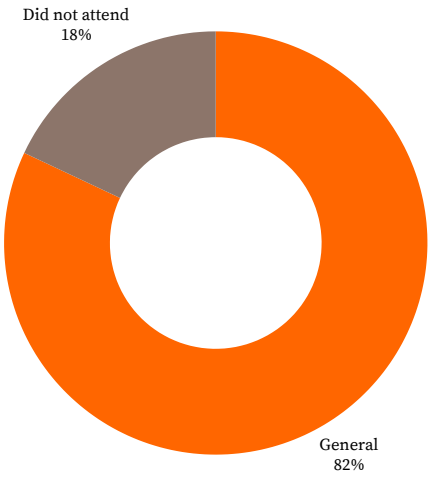


Fig 49 :Type of Health Camp Attended

91% of the respondents mentioned that access to the telemedicine center was beneficial. Some credited this to the timely services they received, while others emphasized that the services provided saved them from having to rely on private practitioners. These respondents also mentioned that they have recommended access to telemedicine center among their peer including friends and relative.

UTTAR PRADESH

A total of 278 individuals participated in the endline assessment survey, providing valuable insights to evaluate the effectiveness of the program. The involvement of 278 individuals in the survey represents a robust sample size, allowing for a diverse range of perspectives and experiences. This diversity enhances the reliability of the findings and ensures that various demographics within the community are represented.

A. INDIVIDUAL RESPONDENTS

The gender distribution of respondents in the endline survey indicates that 58% were female and 42% were male, suggesting a greater engagement from female participants in the study. The 58% representation of female respondents reflects a strong interest among women in the telemedicine services provided. This may suggest that women are more likely to seek healthcare and participate in surveys related to health services. Approximately 85% of the respondents belong to the age group of 36-45 and 46 - 60.

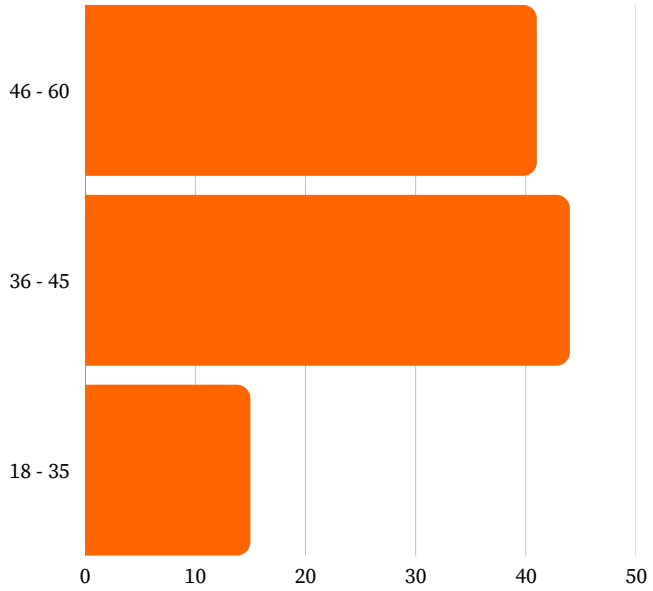


Fig 50: Age Representation

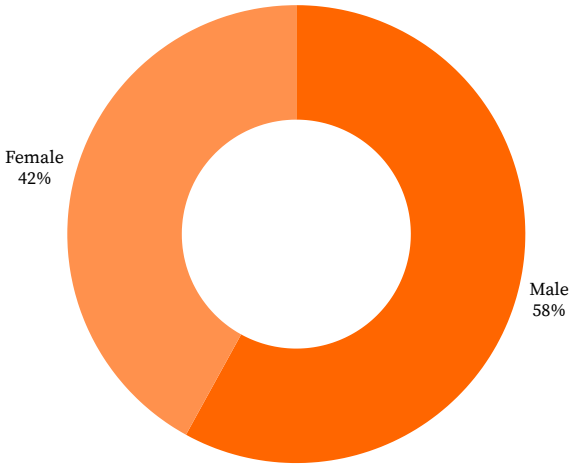


Fig 51: Gender Representation

The substantial percentage of 84% suggests that the telemedicine center has effectively communicated its services to the community. This high level of awareness is crucial for encouraging individuals to utilize these resources for their healthcare needs. The remaining 16% of respondents expressed limited understanding of the services provided. This indicates that there may still be gaps in information dissemination that need to be addressed.

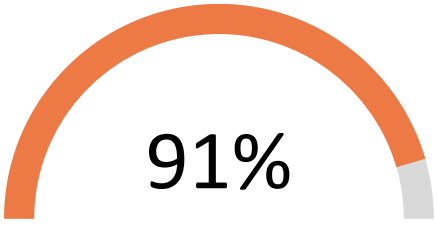


Fig 52: Aware about the telemedicine center

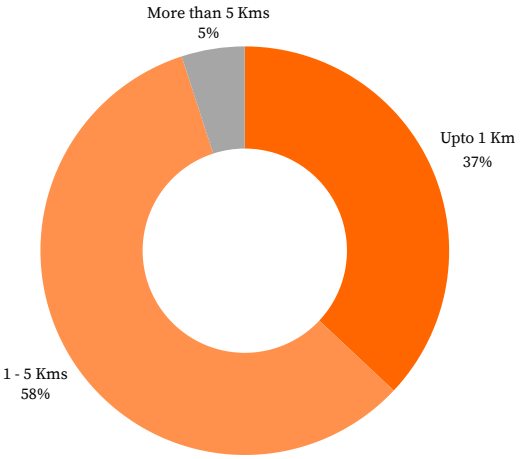


Fig 53: Distance to telemedicine center

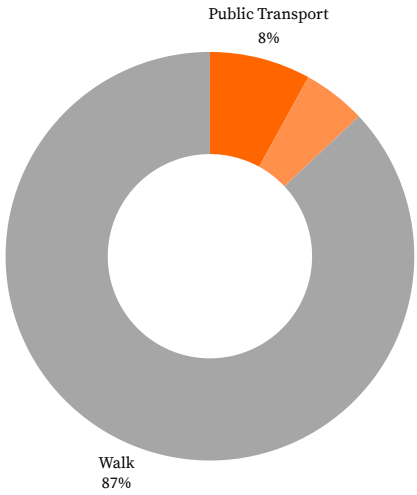


Fig 54: Mode of Transportation

The data indicates that 37% of respondents live within 1 kilometer of the telemedicine center, while 58% reside between 2 to 5 kilometers away. Additionally, 87% of respondents reported that they can access the center without relying on any public or private transport. The fact that 87% of respondents can access the center without using any form of transportation indicates a high level of accessibility. This suggests that the telemedicine center is well-positioned within the community, allowing individuals to reach it on foot, which can promote higher utilization of services.

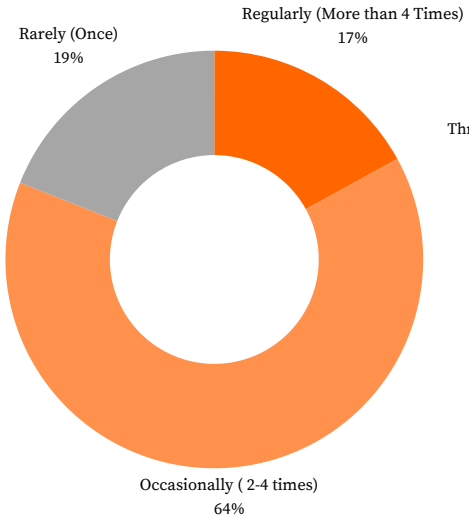


Fig 55: Frequency of Visits

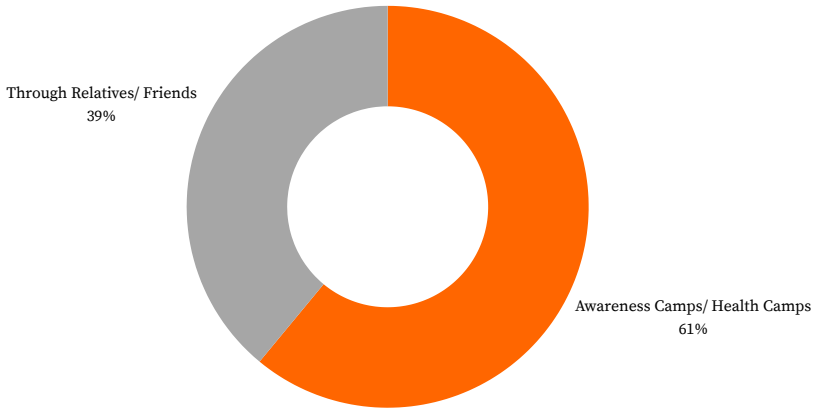


Fig 56: Awareness about Telemedicine Center

The data on the percentage of respondents who availed services from the telemedicine center shows that 49% utilized general services, indicating a strong demand for basic healthcare needs. This suggests that many individuals are actively seeking routine health consultations, which is crucial for maintaining overall wellness. Specialist services were accessed by 45% of respondents, reflecting a significant interest in specialized care, though it is lower than general services.

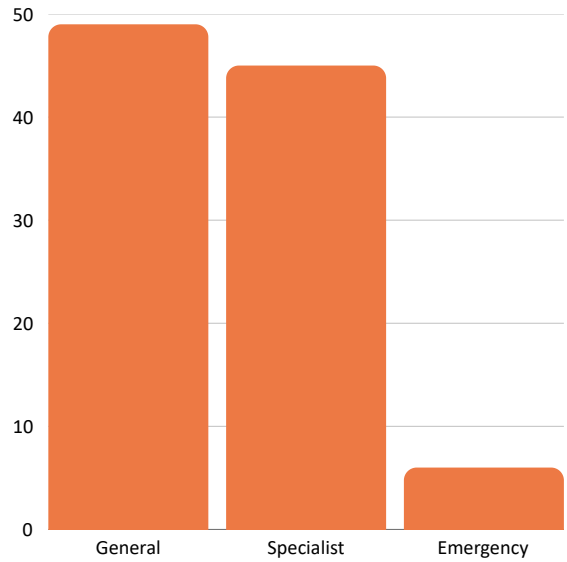


Fig 57:Type of Services Availed at Telemedicine Center

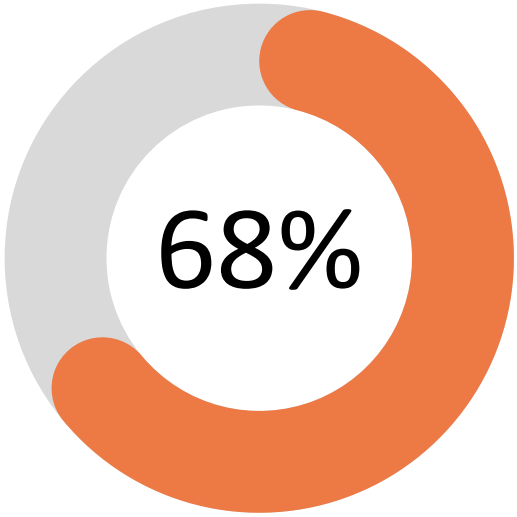


Fig 58 :NCD Screening was helpful

As part of the telemedicine project, beneficiaries were provided with non-communicable disease screening, and 68% reported that the screening was beneficial. This significant percentage suggests that beneficiaries recognized the value of these screening services, which likely aided in the early detection and management of potential health concerns. Nearly 30% of respondents indicated that they had participated in breast cancer screening, while over 50% had accessed screening for diabetes and thyroid conditions.

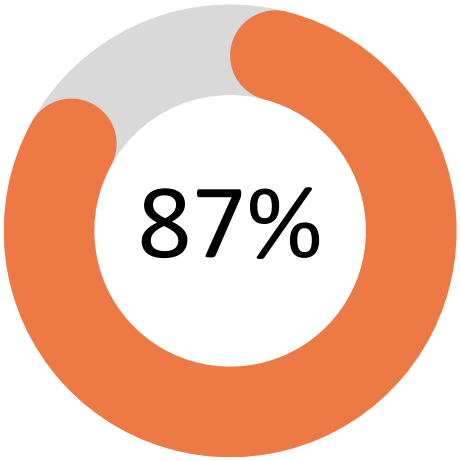


Fig 59: No technical difficulties during consultation

87% of the respondents stated that they did not face any technical difficulties during consultation. On contrary, 13% of the respondents raised an issue of interrupted connectivity and failure to connect during the consultation.

78% of respondents were aware of the health camps held by the telemedicine centers in their villages. This substantial level of awareness indicates that the telemedicine centers have effectively conveyed their initiatives and services to the community, successfully promoting health education and outreach. Participants reported receiving diagnostic services and medication support through these health camps.

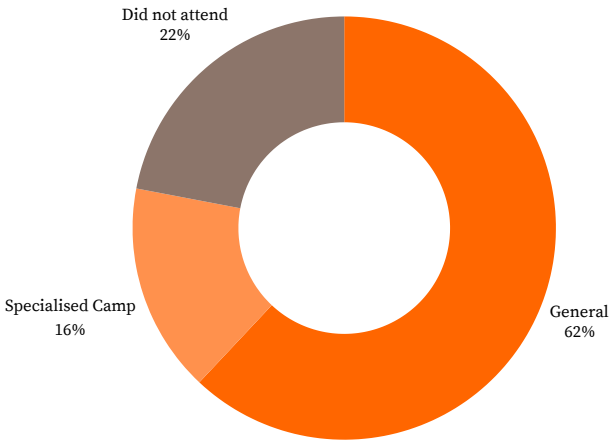


Fig 60 :Type of Health Camp Attended

86% of respondents indicated that access to the telemedicine center was advantageous. Some attributed this to the prompt services they received, while others noted that these services allowed them to avoid depending on private practitioners. Additionally, these respondents mentioned that they have recommended the telemedicine center to their peers, including friends and family.

KARNATAKA

A total of 238 beneficiaries were consulted who received consultations across three telemedicine centers—Idanpur, Galag, and Nagarhal—located in Raichur, Karnataka.

A. INDIVIDUAL RESPONDENTS

The highest percentage of respondents (50%) falls within the 36-45 age group. This suggests that middle-aged individuals are the primary users of telemedicine services. This could be attributed to their growing healthcare needs as they enter middle age, dealing with conditions like hypertension, diabetes, or joint pain. The second largest group (35%) comprises individuals aged 46-60. This age group often experiences more chronic health conditions, which could explain their significant usage of telemedicine services. There has been a stark difference in gender representation with 70% male representation.

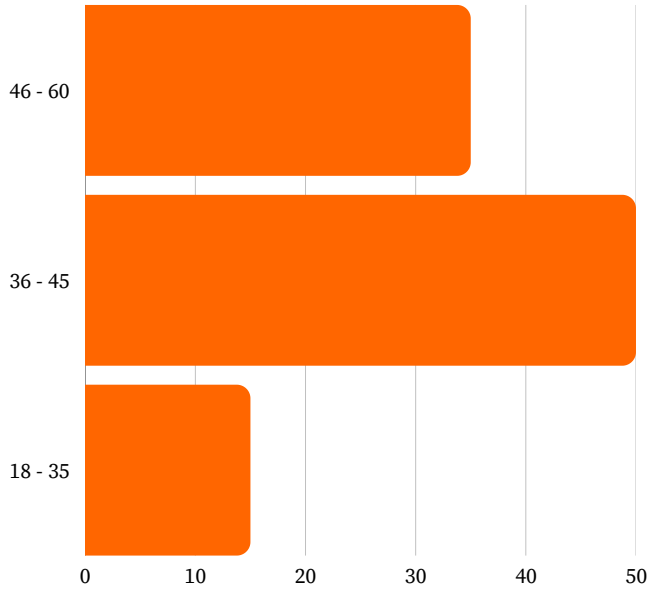


Fig 61: Age Representation

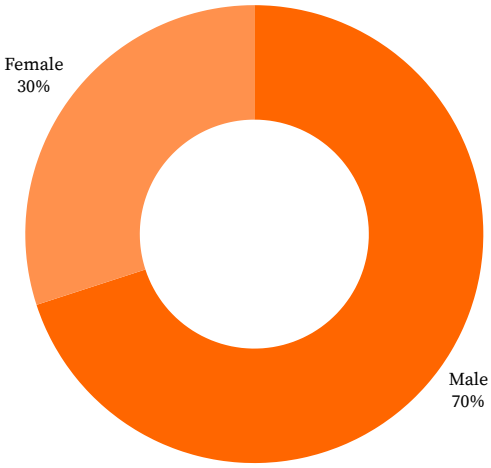


Fig 62 : Gender Representation

While 86% respondents were aware about the services provided at the telemedicine center, 14% of respondents had limited understanding of the services. Targeted awareness campaigns could be developed to reach this remaining segment, predominantly in higher age groups, potentially focusing on marginalized groups or areas where information dissemination may have been less effective.

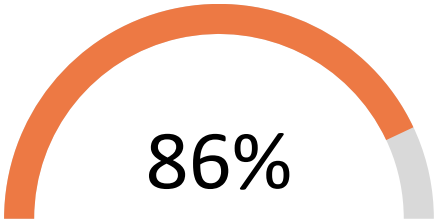


Fig 63: Aware about the telemedicine center

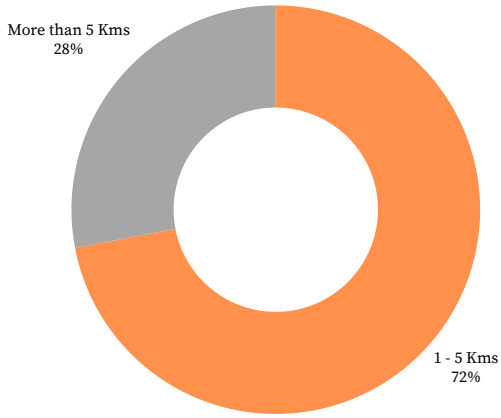


Fig 64: Distance to telemedicine center

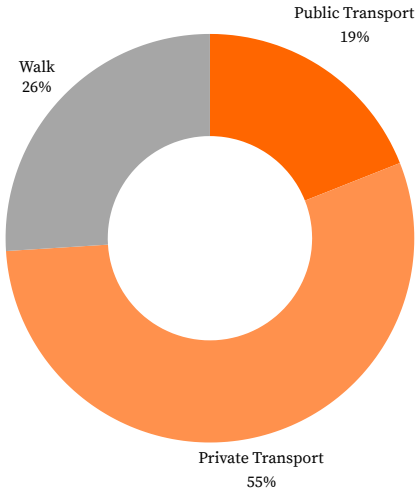


Fig 65: Mode of Transportation

A notable 26% of respondents walk to the telemedicine center. This implies that a substantial number of beneficiaries live nearby, indicating good proximity between the center and a significant portion of its target population. It also suggests that these centers are located in areas with pedestrian-friendly access or are serving communities where walking is a practical option. The data shows that most beneficiaries rely on private transport, with a significant portion walking, and fewer using public transport. This indicates that accessibility to the telemedicine center may not be heavily reliant on public transport, but proximity and private vehicle access play a key role in how beneficiaries reach the center.

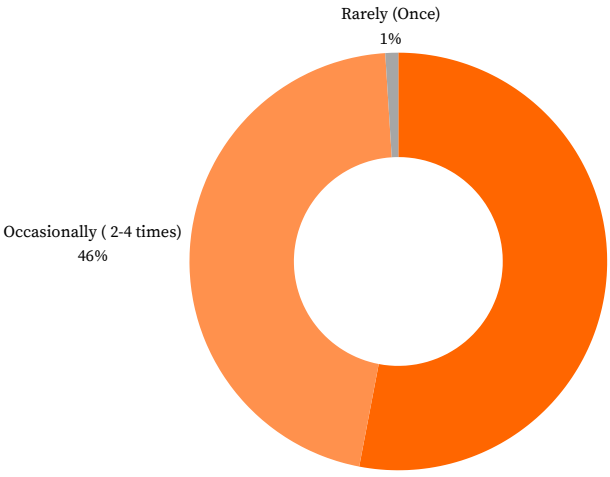


Fig 66: Frequency of Visits

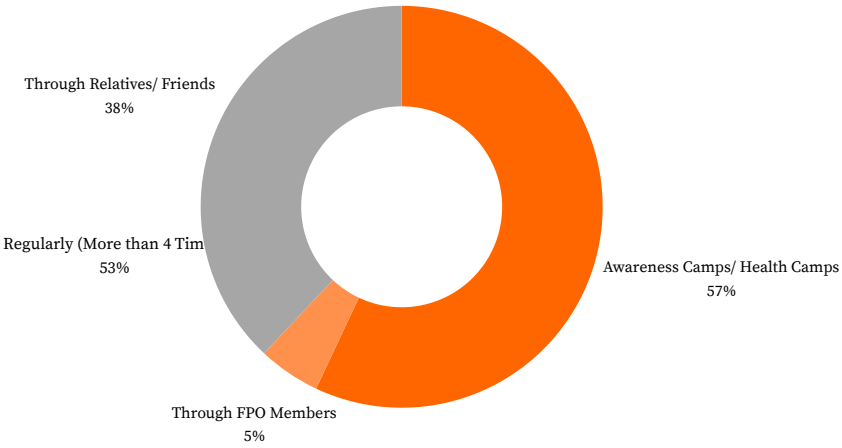


Fig 67: Awareness about Telemedicine Center

A significant portion of the population (53%) visits the telemedicine center regularly, more than four times. This indicates a strong reliance on the services offered at the center, particularly among patients with chronic conditions or recurring healthcare needs. The high regular usage suggests that the telemedicine center is perceived as a dependable and accessible source of healthcare. Nearly half of the respondents (46%) visit the center occasionally, between two and four times. This indicates that a substantial number of people use the services as needed but don't require frequent consultations.

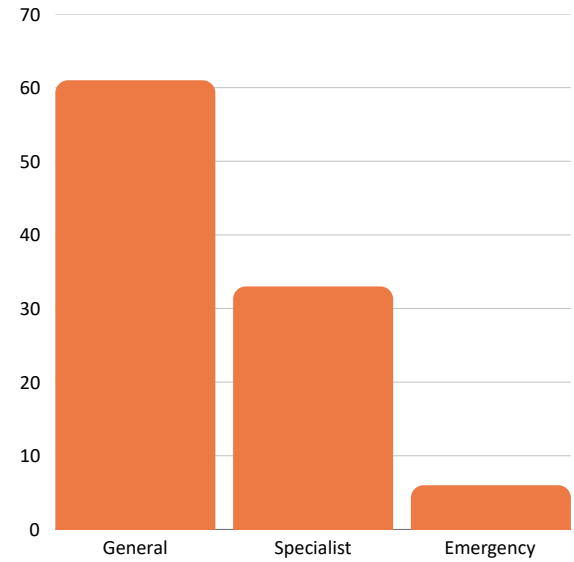


Fig 68 :Type of Services Availed at Telemedicine Center

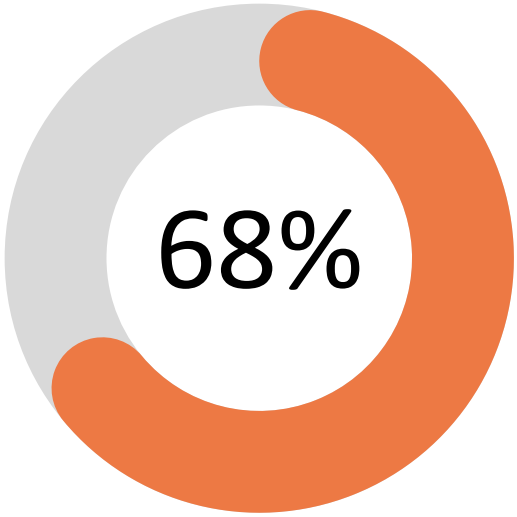


Fig 69:NCD Screening was helpful

As part of the telemedicine project, beneficiaries were provided with screening for non-communicable diseases, and 68% reported finding it helpful. This high percentage suggests that the screening services were valuable to the beneficiaries, likely aiding in the early detection and management of potential health concerns.

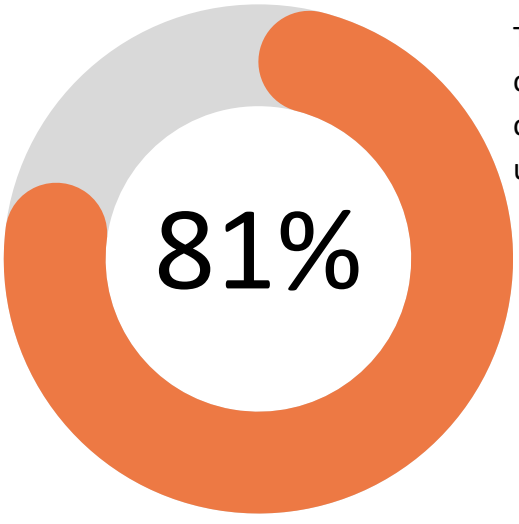


Fig 70: No technical difficulties during consultation

The fact that 81% of beneficiaries reported facing technical challenges or difficulties while accessing the telemedicine center highlights several issues like internet connectivity, unavailability of professionals, limited digital literacy etc.

With only 58% of respondents having participated in health camps, this indicates a relatively low level of engagement in these community health initiatives. The low participation rate suggests that many beneficiaries were not be fully aware of the health camps or the benefits they offer. There may be gaps in communication or outreach efforts, which could have resulted in many people missing out on the opportunity to attend.

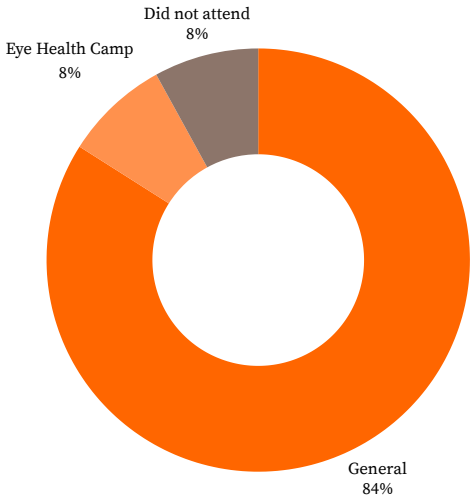


Fig 71:Type of Health Camp Attended

The fact that 83% of respondents found the telemedicine center beneficial suggests that the services provided are meeting the healthcare needs of a significant majority of the population. This reflects the effectiveness and relevance of telemedicine in addressing health concerns, particularly in areas where traditional healthcare access may be limited. Beneficiaries see the telemedicine center as an important resource that improves access to healthcare, especially for those in remote areas. The convenience and availability of virtual consultations could be reducing barriers such as travel time and costs, making healthcare more accessible.

Challenges and Recommendations

Some respondents mentioned that prescribed medicines were unavailable. However, this does not seem to be a major issue. It is recommended that commonly prescribed medicines be stocked at the center to prevent beneficiaries from having to go out to purchase them.

MADHYA PRADESH

A total of 192 beneficiaries were consulted to conclude the endline assessment in Madhya Pradesh. This included representation from gender, age groups and different socio-economic background.

INDIVIDUAL RESPONDENTS

The 46-60 age group has the highest number of beneficiaries (38%), indicating that middle-aged individuals are the primary users of telemedicine services. The age group of 36-45 also shows significant utilization (32%), indicating that telemedicine is appealing to those in their prime working years, who may appreciate the convenience. It can be inferred from that data the gender wise respondents are almost similar.

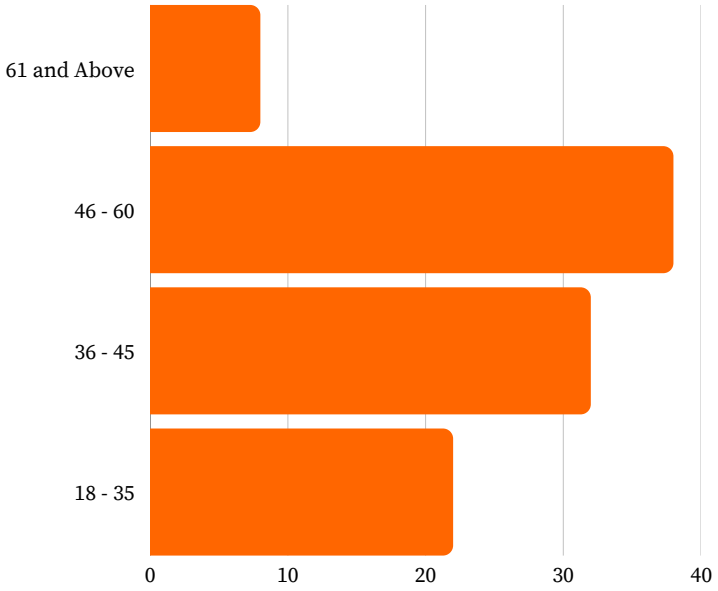


Fig 72: Age Representation

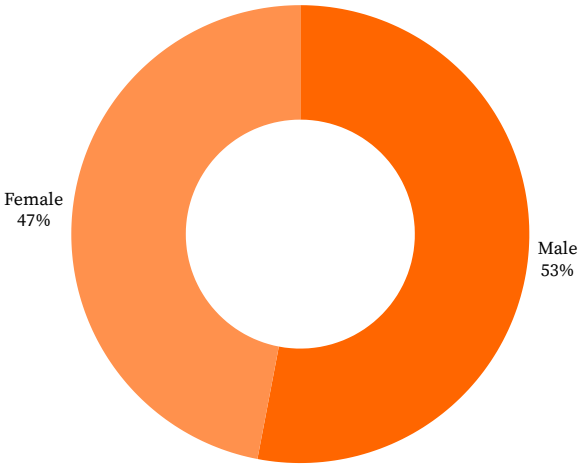


Fig 73 : Gender Representation

The high awareness level of 94% among respondents regarding the services offered at telemedicine centers indicates a strong understanding of telemedicine options within the community. This suggests effective outreach and communication efforts by the centers, which may lead to increased utilization of these services. However, with 6% of respondents had limited understanding and remains an opportunity to further enhance awareness and engagement, particularly targeting those who may benefit from telemedicine but are not yet informed fully about its availability.

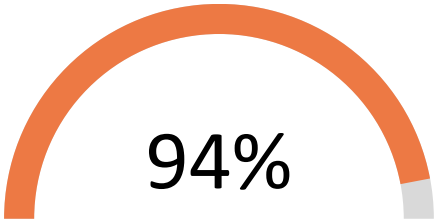


Fig 74: Aware about the telemedicine center

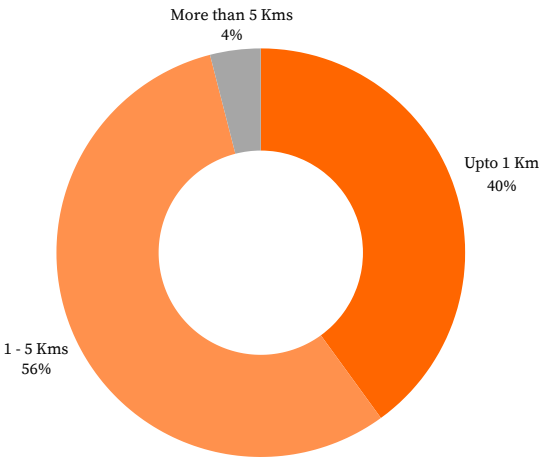


Fig 75: Distance to telemedicine center

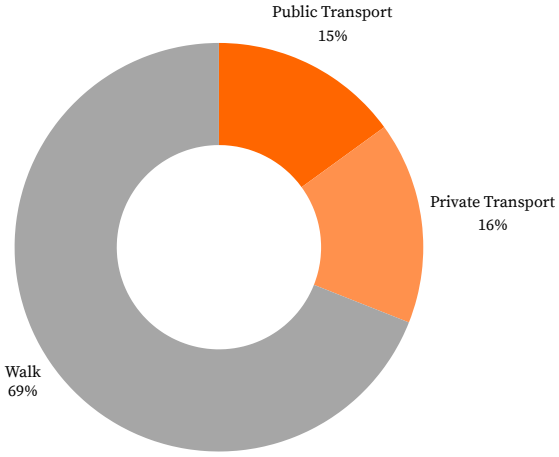


Fig 76: Mode of Transportation

A substantial majority of the population (69%) relies on walking as their primary mode of transportation. This suggests that many individuals may live within a reasonable distance from essential services, including the telemedicine center. With only 15% using public transport and 16% using private transport, it appears that reliance on motorized transportation is relatively low. The majority of respondents (46%) visit the telemedicine center occasionally, indicating that while they utilize the services, they may not be regular users. This could suggest that their healthcare needs are being met with fewer visits, or they may rely on telemedicine for specific conditions rather than ongoing care. A notable 30% of respondents visit the center regularly (more than four times), reflecting a solid base of engaged patients who likely value the services provided. This group may be dealing with chronic conditions or require ongoing consultations.

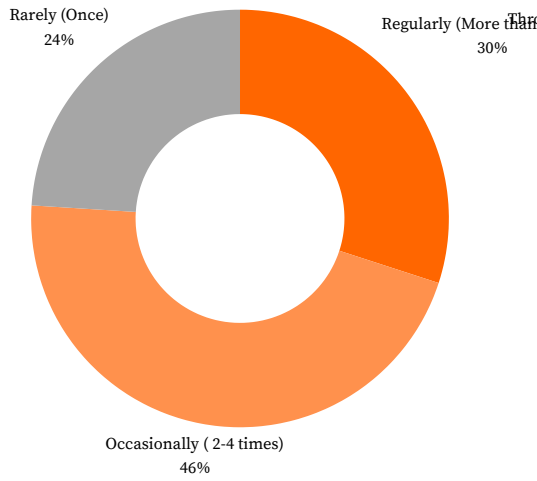


Fig 77: Frequency of Visits

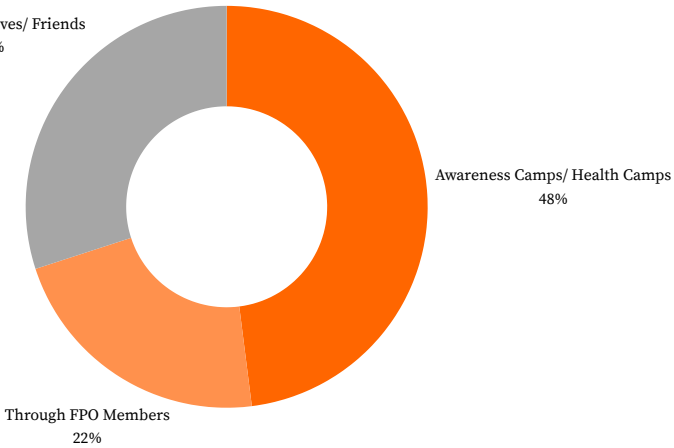


Fig 78: Awareness about Telemedicine Center

The majority of the population (68%) utilized general services, indicating a strong reliance on telemedicine for routine healthcare needs. This suggests that telemedicine is effectively addressing common health concerns and preventive care. A significant portion of respondents (30%) access specialist services, reflecting the effectiveness of telemedicine in providing specialized care. This indicates that patients are comfortable using telemedicine for consultations that require expertise, though there may still be barriers to greater utilization.

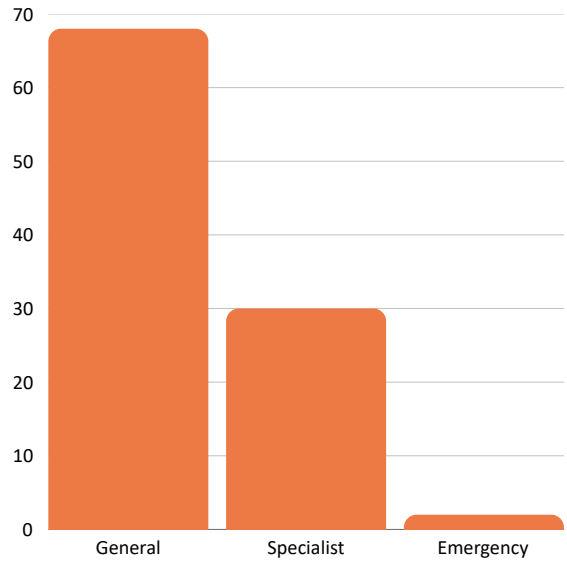


Fig 79 :Type of Services Availed at Telemedicine Center

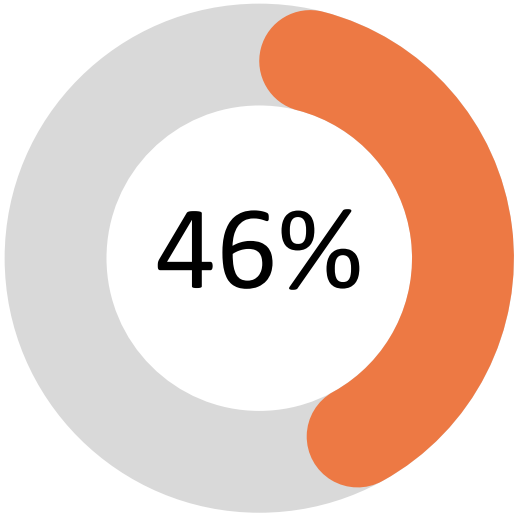


Fig 80:NCD Screening was helpful

As part of the telemedicine initiative, non-communicable disease screening was provided to beneficiaries, with 64% reporting that the screening was beneficial. This figure suggests that beneficiaries recognized the value of the screening services, likely aiding in the early detection and management of potential health concerns.

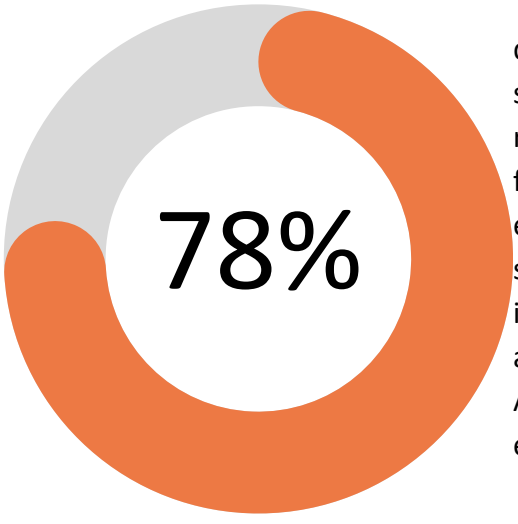


Fig 81: No technical difficulties during consultation

The finding that 78% of respondents reported no technical difficulties during consultations indicates a high level of satisfaction with the telemedicine platform's usability and reliability. This suggests that the technology was effective for most users, which likely contributes to a positive experience and encourages continued use of telemedicine services. However, the 22% who did encounter technical issues may represent a group that could benefit from additional support or improvements in the system. Addressing these challenges could further enhance user experience and accessibility.

86% of the respondents mentioned that either themselves or someone from the family members could access the health camps organized by the team. Respondents also stated that they recived screening, diagnosis, BP check and medicine at the health camps.

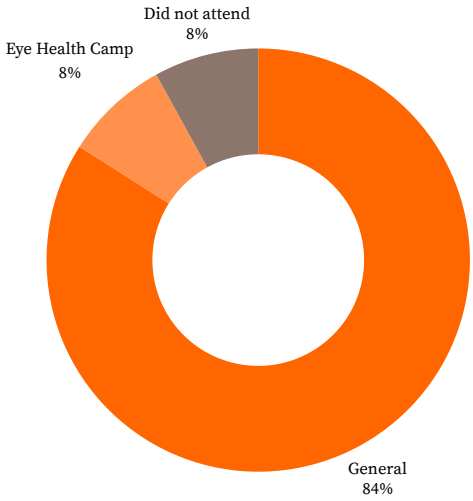


Fig 81 :Type of Health Camp Attended

Ninety percent of beneficiaries confirmed that the services provided by the telemedicine center, including screening, diagnosis, and non-communicable disease (NCD) screening, were helpful. This high percentage suggests that the beneficiaries found significant value in the comprehensive range of services offered, including access to necessary medications.

JHARKHAND

A total of 371 individuals were surveyed, comprising a diverse group that included women, men, elderly individuals, and youth from Jharkhand. This comprehensive approach was taken to evaluate the impact of the project across different demographics, ensuring that a wide range of perspectives and experiences were considered.

INDIVIDUAL RESPONDENTS

The 46-60 age group represents the largest percentage of users (47%), indicating that middle-aged individuals are the primary beneficiaries of telemedicine services. This may reflect their greater healthcare needs or a higher likelihood of seeking medical consultations. The 36-45 age group also has a significant representation (43%), suggesting that this demographic is actively engaging with telemedicine services as well. This may be linked to their responsibilities in managing both their health and that of their families.

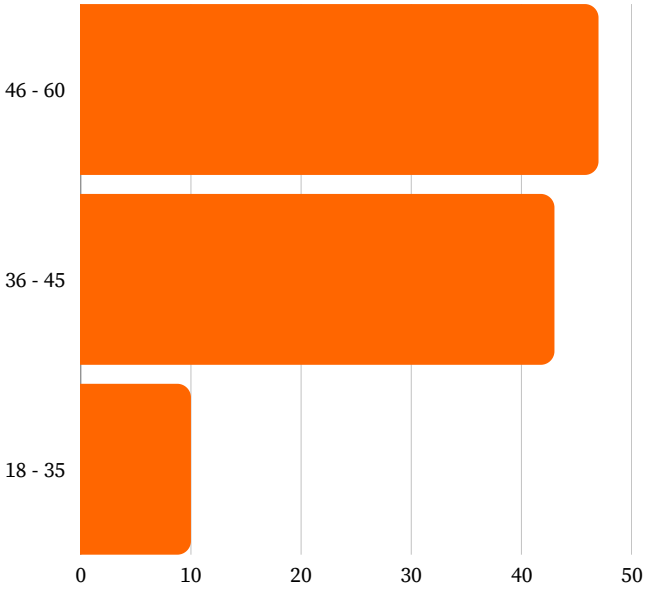


Fig 82: Age Representation

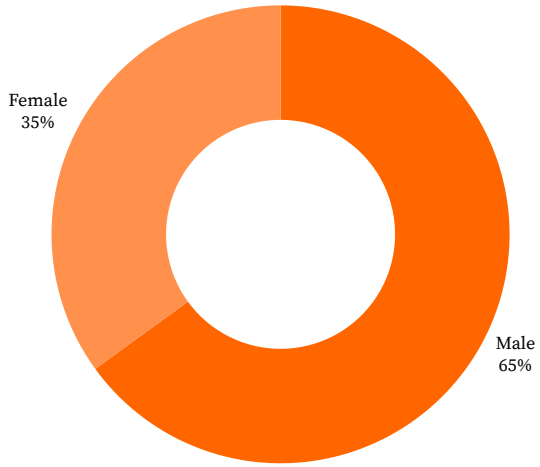


Fig 83 : Gender Representation

Eighty-eight percent of beneficiaries reported being well aware of the services provided at the telemedicine center, indicating a high level of awareness within the community. This strong familiarity suggests that effective outreach and communication strategies have been implemented, helping to inform individuals about the various services available, such as consultations, screenings, and follow-up care.

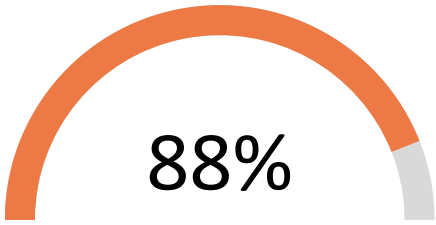


Fig 84: Aware about the telemedicine center

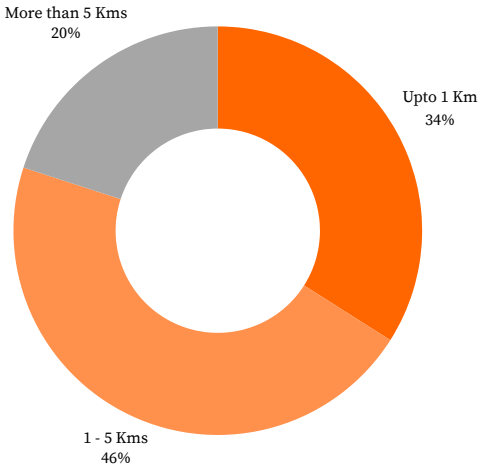


Fig 85: Distance to telemedicine center

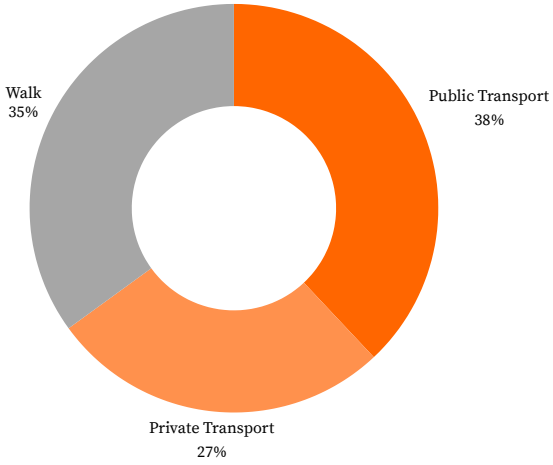


Fig 86: Mode of Transportation

A significant portion of beneficiaries (34%) lives within 1 kilometer of the telemedicine center, indicating that these services are easily accessible for a substantial number of users. This proximity facilitated regular visits and promoted the utilization of telemedicine. The largest group (46%) resides between 1 to 5 kilometers from the center. While this distance may still be manageable for many, it suggests that the center serves a broader area, reaching individuals who may need to make a more considerable effort to access services. This may have impacted the frequency of visits for this group compared to those who live closer.

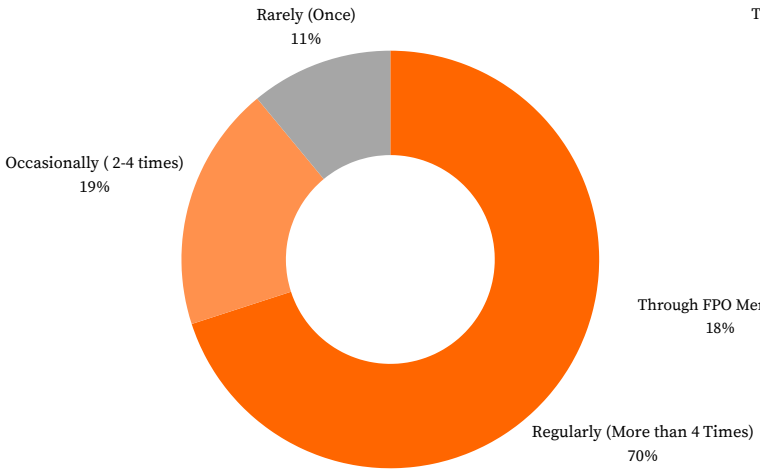


Fig 87: Frequency of Visits

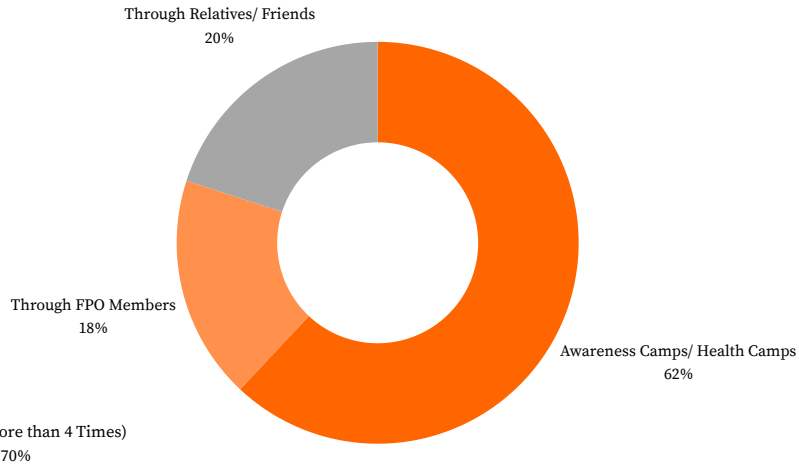


Fig 88: Awareness about Telemedicine Center

The data on the percentage of respondents who availed services from the telemedicine center shows that more than 50% utilized general services, indicating a strong demand for basic healthcare needs. This suggests that many individuals are actively seeking routine health consultations, which is crucial for maintaining overall wellness. Specialist services were accessed by 35% of respondents, reflecting a significant interest in specialized care, though it is lower than general services. This could imply that while general health issues are more prevalent, there is still a considerable need for expert consultations in specific medical fields. 14% of respondents utilized emergency services.

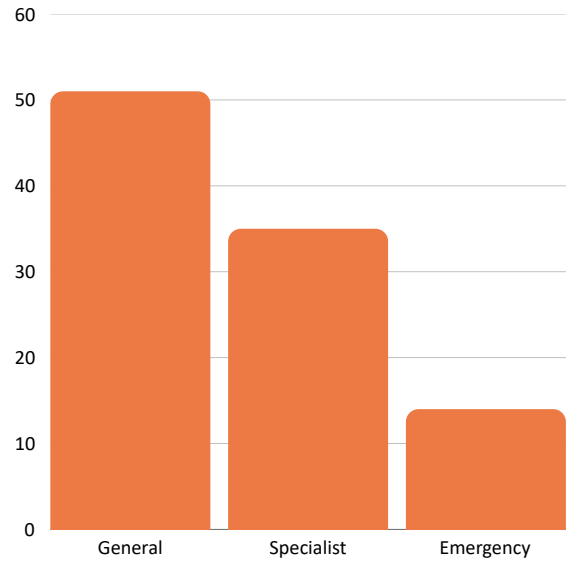


Fig 89:Type of Services Availed at Telemedicine Center

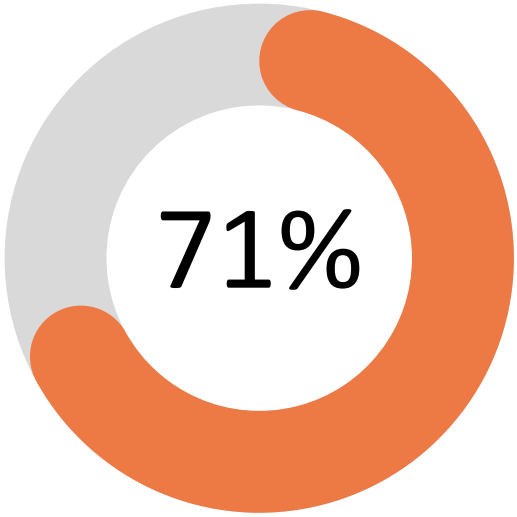
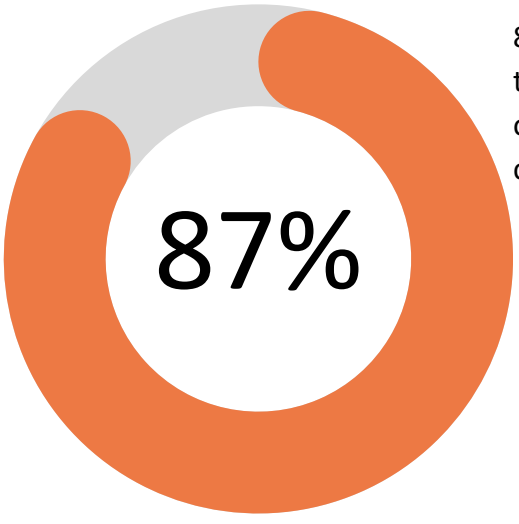


Fig 90:NCD Screening was helpful

As part of the telemedicine project, non-communicable disease screening was offered to beneficiaries, with 71% reporting that the screening was helpful. This high percentage indicates that beneficiaries found value in the screening services, which likely contributed to early detection and management of potential health issues.



87% of the respondents stated that they did not face any technical difficulties during consultation. On contrary, 13% of the respondents raised an issue of interrupted connectivity and failure to connect during the consultation.

Fig 91: No technical difficulties during consultation

Ninety-two percent of respondents reported being aware of the health camps organized by the telemedicine centers in their villages. This high awareness indicates that the telemedicine centers have effectively communicated their programs and services to the community, successfully promoting health education and outreach efforts.

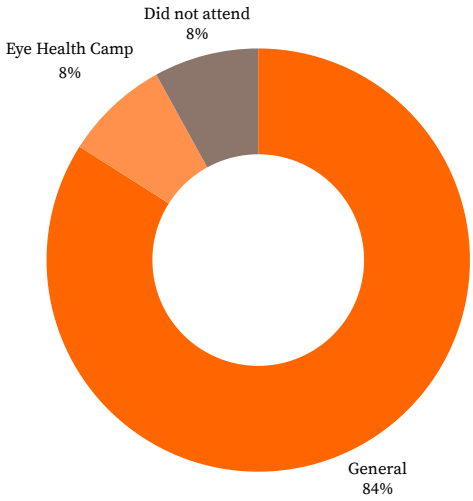


Fig 92 :Type of Health Camp Attended

92% of the respondents mentioned that access to the telemedicine center was beneficial. Some credited this to the timely services they received, while others emphasized that the services provided saved them from having to rely on private practitioners. These respondents also mentioned that they have recommended access to telemedicine center among their peer including friends and relative.

Challenges

During discussions in Jharkhand, few challenges were identified after consulting with beneficiaries. This includes the absence of doctors who speak the local language. Few of the respondents stated that teleconsultations lack in-person interactions with healthcare providers, which otherwise they are not accustomed to. Additionally, there were instances where medicines were unavailable, further hindering the effectiveness of the services.

Recommendations

Recruitment of Local Language-Speaking Doctors: To enhance the effectiveness of teleconsultations, it is recommended to prioritize the recruitment of healthcare providers who speak the local language rather a local dialect. This would ensure better communication and understanding between patients and doctors, improving the overall consultation experience.

Ensuring Availability of Medicines: To address the issue of unavailable medicines, it is recommended to establish partnerships with local pharmacies or ensure a reliable supply chain for essential medications at telemedicine centers. This would ensure that beneficiaries can access necessary medications promptly.

Patient Education and Support: Providing additional training or support to patients about the telemedicine process, including how to use the platform and what to expect, could improve the overall experience and reduce challenges in accessing services.

CONCLUSION

In conclusion, the success of the telemedicine project can be attributed to a combination of key activities and factors that have effectively addressed the healthcare needs of underserved communities. The establishment of telemedicine centers has significantly improved access to healthcare services, enabling beneficiaries to consult medical professionals without the financial and logistical barriers associated with traditional healthcare. By focusing on general medical services, non-communicable disease screenings, and health camps, the initiative has engaged the community and promoted a culture of preventive healthcare.

Effective communication and outreach strategies have played a crucial role in raising awareness and encouraging utilization of these services among diverse populations. Additionally, the integration of feedback from healthcare staff has ensured that the project remains responsive to local needs, enhancing its overall effectiveness. The timely provision of medical advice and information has empowered individuals to take charge of their health, leading to better health outcomes and a reduction in the burden on existing healthcare infrastructure.

Overall, the telemedicine project has not only facilitated healthcare access but has also instilled a proactive approach to health management within the community. Health camps have provided direct access to healthcare services in areas where such resources are limited. They have allowed individuals to receive consultations, screenings, and treatments without needing to travel long distances.

The project aligns with several Sustainable Development Goals (SDGs) in meaningful ways. By providing timely medical consultations, preventive screenings, and health education, the project directly contributes to ensuring healthy lives and promoting well-being for all individuals, contributing to SDG 3. By reducing travel costs and making healthcare services more affordable, telemedicine has alleviated financial burdens on low-income families, impacting SDG 1.

CONCLUSION

The project supports gender equality by improving access to healthcare services for women, who often face greater barriers to accessing medical care. Health camps and screenings specifically tailored for women, such as breast cancer screenings, empowered women to take charge of their health.

Few of the key common challenges identified across states regarding the telemedicine initiative are listed below.

Language Barriers: A significant issue faced by beneficiaries is the lack of doctors who are proficient in the local language. As a result, patients often struggled to communicate their symptoms or concerns effectively. In healthcare, clear communication between the patient and doctor is critical for accurate diagnosis and treatment. The absence of doctors fluent in local dialects or languages can led to misunderstandings and, in some cases, incomplete or incorrect treatment recommendations. Respondents from states like Bihar, Jharkhand and Uttar Pradesh highlighted this challenge during the discussion.

Lack of Personal Interaction: Few respondents also expressed dissatisfaction with the lack of in-person interaction with doctors. While teleconsultations offer convenience, some patients prefer face-to-face consultations, where they can develop a stronger connection with the healthcare provider. This issue is particularly relevant in remote areas where people may place more trust in physical interactions with doctors, rather than through virtual platforms, which may feel impersonal or less reliable.

Medicine Availability Issues: Another challenge noted across Bihar, Gujarat, Uttar Pradesh, Chhatisgarh is the inconsistent availability of prescribed medicines. After teleconsultations, beneficiaries sometimes find it difficult to access the necessary medications locally, which hampers the overall effectiveness of the treatment process. In rural areas, pharmacies may not stock certain medicines recommended during teleconsultations, forcing patients to travel to larger towns or cities to obtain them, thereby negating the cost-saving benefits of the telemedicine initiative.

Endline
Report 2024

Comprehensive Telemedicine Solutions

Study Conducted and Reported by: SGS