saranam

Saranam India: July 2026

Enabling Access to Palliative and End of Life Care in Public Health Spaces



DEEPENING ROOTS, WIDENING CIRCLES

July 2026 has been a month where Saranam's work has developed rapidly — outward into new partnerships and public health touchpoints, and inward into the moments of connection that sustain a team doing difficult, meaningful work every day.

A momentous marker was our MoU with the **Indira Gandhi Institute of Child Health (IGICH)** to establish **a pediatric palliative care center of excellence**, under the clinical guidance of the Institute. Pediatric palliative care remains one of the most under-resourced areas in Indian healthcare, despite the fact that children living with life-limiting illness and their families carry a distinct burden of medical complexity, emotional grief, and long-term care coordination that adult-oriented systems are simply not built to hold. Establishing a center of excellence is not just an expansion of services — it is an overdue correction, and one that we hope will become a model other institution can look to and replicate.

Another significant marker this month was the signing of an **MoU with the Dementia India Alliance (DIA)**, extending our reach into a population whose needs are frequently invisible within mainstream care systems. Palliative care for people living with dementia is often delayed or entirely absent, even though the disease's progressive, life-limiting nature makes early integration of comfort-focused, dignity-preserving care essential — this partnership begins to close that gap.

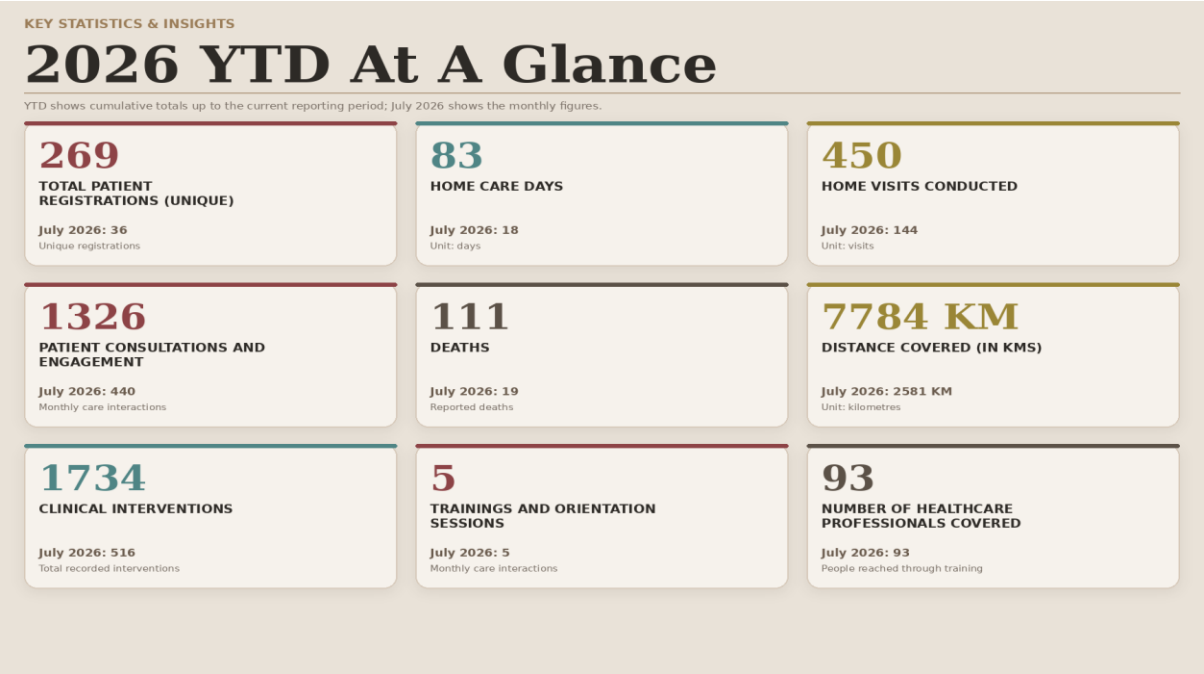
This spirit of building capacity beyond our own walls also shaped our continued, **deepening engagement with the public health system**. Through the month, our team **conducted training sessions for ASHAs, nurses, and staff at Primary Health Centers** within a 5-8Km radius of KC General Hospital — underscoring our belief that palliative care cannot remain confined to specialist settings. It must be woven into the fabric of primary and community health delivery, carried by the frontline workers who are often patients' first and most consistent point of contact.

Alongside this, we made the decision to integrate **Geriatric Care Clinics into our work at KC General Hospital,** and initiated our first such clinic**.** As India's population ages, comprehensive geriatric assessment — covering non-communicable disease (NCD) screening, functional status, and coordinated care protocols — becomes central to reducing the compounding disease burden that so often accompanies old age. A well-structured geriatric clinic does more than treat isolated conditions; it anticipates decline, coordinates across specialties, and prevents the kind of fragmented, reactive care that leaves both patients and families exhausted and under-supported.

We were really pleased to engage with the next generation of professionals this month, as we welcomed a **group of students from CMR University** who wanted to understand palliative care more deeply. Conversations like these matter enormously — palliative care is still absent from much of formal medical and nursing curricula in India, and every student who leaves with a clearer, more compassionate understanding of end-of-life care carries that understanding into whatever role they eventually take up.

And finally, amid weeks that stretched our team thin**, our weekly crochet sessions continued to be a small but important ritual —** a fun, (and partly-embarrassing) way to unwind, create something with our hands, and step back from the intensity of the work we carry. In a sector defined by caregiving, it matters that caregivers also make room to care for themselves.

Key Statistics and Insights



Saranam's Work: Scenes from the Ground

Engaging with students of CMR University, Bangalore



We were happy to host students from CMR University.

Educational institutions have a unique and powerful role to play—not just in shaping careers, but in shaping conscience.

We loved the engagement with these students of CMR University.

And were thrilled see them engage deeply, ask some great questions, and express their own personal visions for how they hope to contribute to a better and more equitable society.



Training and Orientation Sessions for Nurses and ASHA Workers













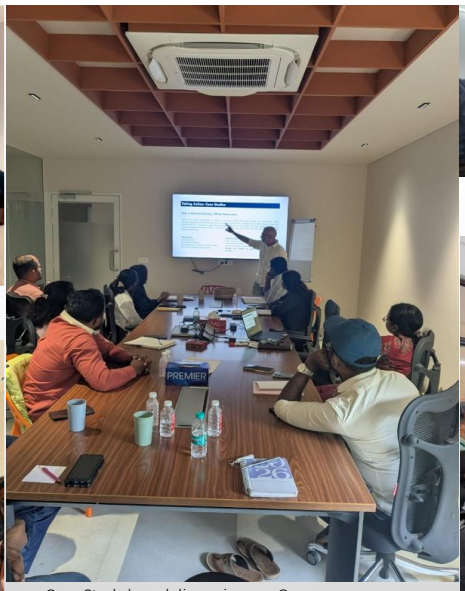


Internal Capacity Building and Training:

Every other Saturday our team comes together for a **bi-monthly internal capacity building session**. This month we had multiple topics that got covered including Wound Care Management, Ethics in Palliative Care, Governance and Integrity, and Communication Skills in Palliative Care.



Working Session on Data Analysis and Insights



Case-Study based discussions on Governance, Ethics, and Integrity in Business.



Orientation on Ethics in Palliative Care



Working Session on Community-Based Volunteer Model, with Dr Vanshika



Training on Wound-care Management, and Communication Skills in Palliative Care

Wound care management in palliative home care is essential because it reduces pain, odor, exudate, and infection risk while improving comfort and dignity. It also helps prevent worsening skin breakdown and reduces distress for both the patient and caregiver. Getting this right matters.

Because palliative care teams need to unwind too

We picked up crochet hooks.

What followed was equal parts hilarious and humbling. Turns out, the same hands that manage complex wound care and comfort patients with steady precision… completely forget how to coordinate when faced with yarn and a hook. There was a lot of laughing, several tangled messes, and at least one heroic attempt that ended up looking nothing like the tutorial.

Learning something new together, being bad at it without judgment, and just enjoying each other's company outside the intensity of our work – as important as anything else.

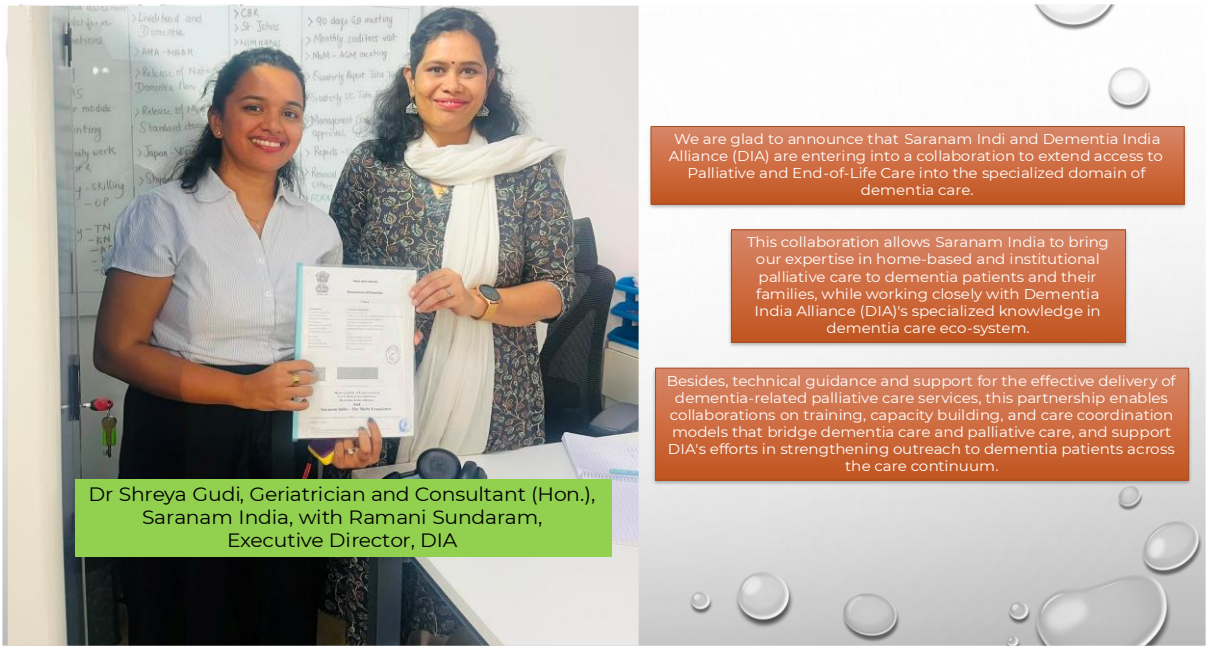


Amazing to have a team that shows up for the hard days — and knows how to unwind as well.

MoU with Dementia India Alliance(DIA):

Saranam and Dementia India Alliance signed an MoU to collaborate. This collaboration allows Saranam India to bring our expertise in home-based and institutional palliative care to dementia patients and their families, while working closely with Dementia India Alliance (DIA)'s specialized knowledge in dementia care eco-system.

Besides, technical guidance and support for the effective delivery of dementia-related palliative care services, this partnership enables collaborations on training, capacity building, and care coordination models that bridge dementia care and palliative care



Dr Shreya Gudi, Geriatrician and Consultant (Hon.), Saranam India, with Ramani Sundaram, Executive Director, DIA

Strengthening Death Literacy: A Light Touch

Conversations about death, dying and end-of-life care are not a niche interest; they are essential public conversations that need engaging, supportive platforms where people can ask questions, share stories and plan with compassion.

As part of our Death Literacy portfolio of work, Saranam is exploring a new kind of space—one that brings together stand-up comedy, storytelling, and improv to talk about death and end-of-life care.

These are not easy conversations, but perhaps they don't always have to feel heavy. Without trivialising these topics and associated emotions, this initiative hopes to hold these themes with care and lightness, using humour and shared experiences to make them more approachable, human, and easier to engage with.



This free-to-attend session is being curated by Saranam India as part of its Death Literacy Portfolio, with the first program on **Sat, 22nd August. 6PM. At MyBoTree, Koramangala.**

Case diaries: Stories From The Field

A masterfully crafted case story from the keeper of Saranam's memories: Vara, our psycho-oncologist and palliative care counsellor.

Sometimes, what hurts the most are the conversations that never happened. The stories left unfinished. The futures we build without realising they were never ours to build.

Some stories ask to be written. Not because they change the ending.

But because they give a place for all the unfinished pieces we continue to carry.
I am writing this because I needed somewhere to place all the unfinished pieces she left behind.

This is the story of Monica, a thirteen-year-old girl, and the quiet privilege of walking alongside a child through home-based palliative care.



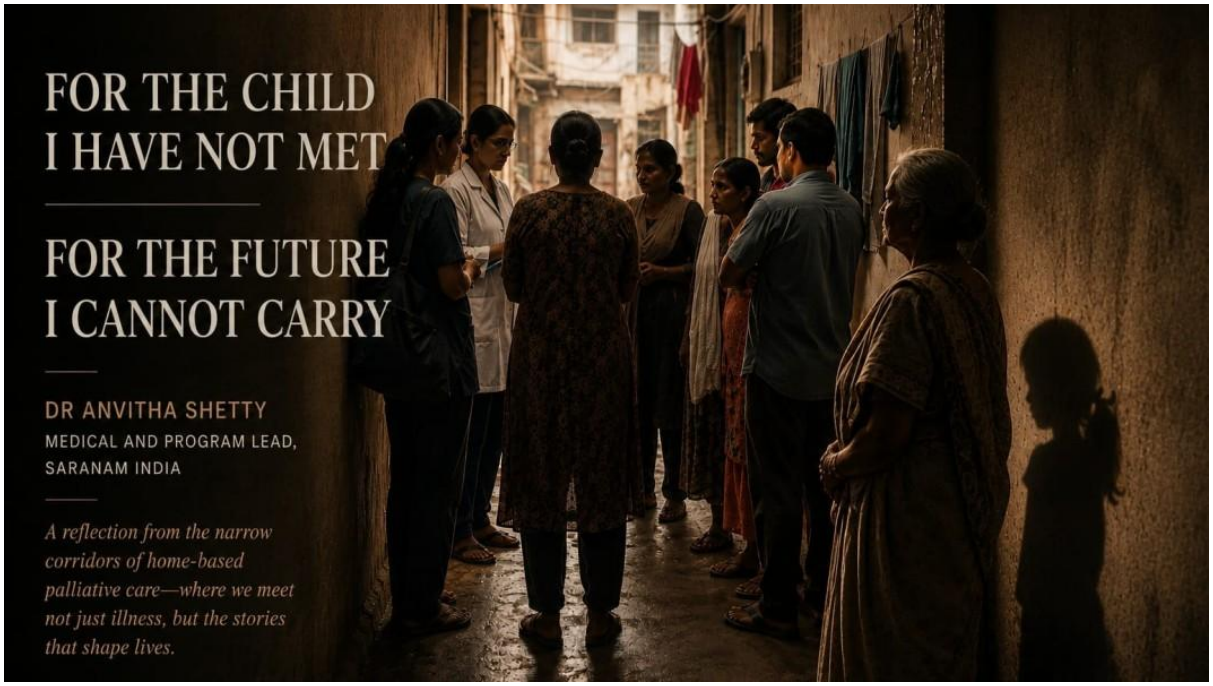
Read the full story at: https://tinyurl.com/26vtkk3j

A SARANAM NEWSLETTER FEATURE:

Being a Palliative Care physician - especially one leading home visits means being prepared for the most unusual. That is part of the job description.

Yet there are days when your best training doesn't prepare you adequately.

Saranam's **Dr Anvitha Shetty** reflects on such day - advocating for a child she had never met.



> "The responsibility of that child's future was never mine to carry."
> From an essay on home-based palliative care, family conflict, and the limits of clinical responsibility.

An essay from Saranam India, reflecting on the deep human complexity of home-based palliative care.

Read the full essay at: https://tinyurl.com/ztwjrwet

We are deeply grateful for your continued support and commitment to this vital program. Many of you have reached out, expressed your support, your solidarity and of course, your generosity allows us to continue in our journey of ensuring that access to Palliative and End of Life Care is a fundamental human right.

To donate – please go to: https://www.saranamindia.org/donation