Saranam India: August 2026

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



EDITORIAL

Better Late Than Never

There's a small, funny truth about time at Saranam: it moves faster than our ability to mark it.

In June, we turned six months old. By the time we paused long enough to notice, we were already seven months old. And by the time we finally found a date to meet that worked for everyone's calendars — a rare alignment of stars — we were closer to nine.

So, this month, in true Saranam fashion, we did what felt right rather than what felt disciplined and punctual: we celebrated turning six months old. Just a mere three months late.

An Evening, Long Overdue
About 35 of us came together for it — a number that, on its own, tells a story. These were people who have been part of Saranam's journey in ways direct and indirect, visible and silent, some since even before we had a name for what we were building. Friends who put their faith in an idea when it was still just an idea. Team members who joined along the way, choosing to stay even when the ground kept shifting. Associates who will be joining us in the coming days and weeks, already part of the story before their first day.

Looking around that room was its own kind of lesson. It takes an unreasonable number of different kinds of people to build something new — not just the ones on payroll, but friends and well-wishers who gave their time, their energy, their intellectual capital,

without ever being asked. New friends we discovered along the way, who somehow became essential before we even realised it. Nothing about Saranam has been built alone, and that evening made that fact impossible to ignore.

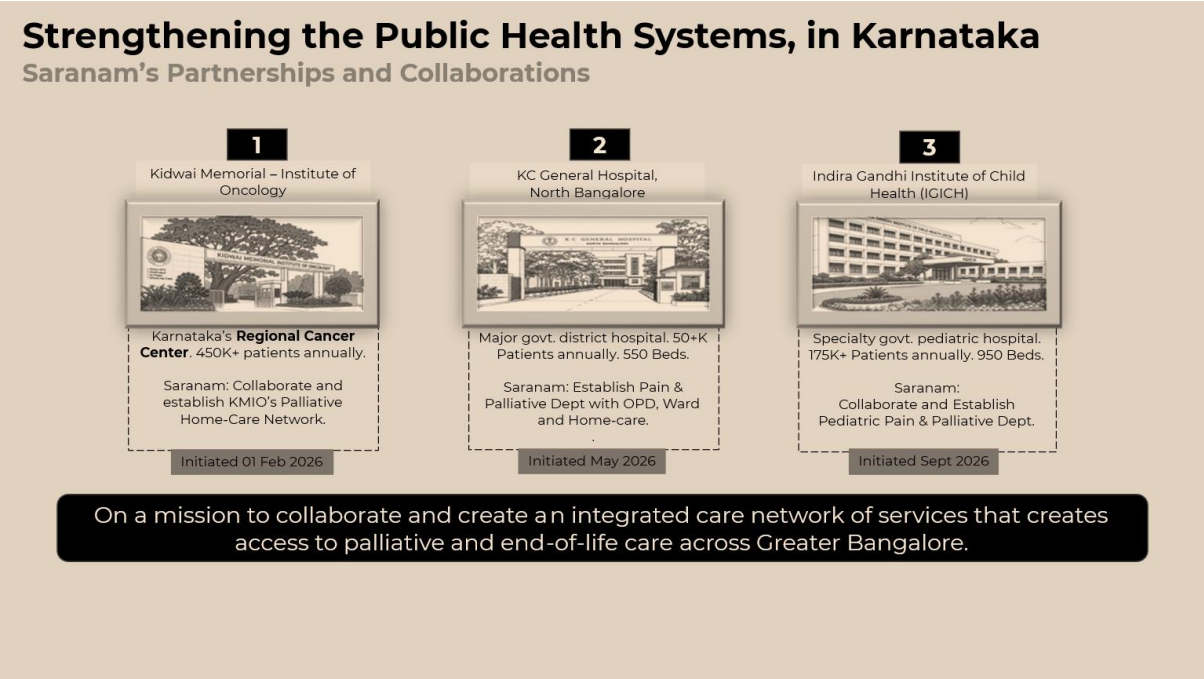
Games, Reflections, and Down Time

There was nothing elaborate about how we spent the evening — some good old-fashioned games, a few honest reflections on the months behind us, and the rare luxury of unstructured downtime. No agenda beyond being in the same room together. Saranam has come a long way in a short while. We have responded to challenges we didn't see coming. We have created things from scratch. We have worked incredibly hard, and — if we're honest — we've often felt like we were drinking from a fire hose. We have made mistakes. We have learnt, sometimes the hard way. And it is only after finally pausing for an evening like this that you realise how much you needed exactly that pause.

What We Carried Out With Us

We left that evening knowing the path ahead will continue to be hard. Nothing about that has changed. But we also left knowing, more certainly than before, that we are working on something that matters — something where success is never guaranteed, but where value is never in question.

That, perhaps, is the most honest way to describe Saranam at nine months: still figuring it out, still stumbling occasionally, and still absolutely certain of why we're here.



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SARANAM'S NEWEST COLLABORATION

Indira Gandhi Institute of Child Health

On Saturday, 5th September – in a simple, brief ceremony we were honoured to inaugurate the Pediatric Pain and Palliative Care Unit at the Indira Gandhi Institute of Child Health (IGICH), Bengaluru — the first such program in a government Quaternary Care Hospital in India.

This initiative is a collaborative effort between IGICH, Saranam India, the Pain Relief and Palliative Care Society (PRPCS), Hyderabad, Azim Premji Foundation, and Cipla Foundation.

The unit was inaugurated by Dr. Nandini Vallath, Head of Department of Palliative Medicine at St. John's Medical College Hospital, and Dr. Khatri, IAS (Retd), former Additional Chief Secretary, Government of Karnataka, in the presence of Dr. Narendra Babu, Director of IGICH, Mr Sudheesh Venkatesh of Azim Premji Foundation, and several other distinguished guests.

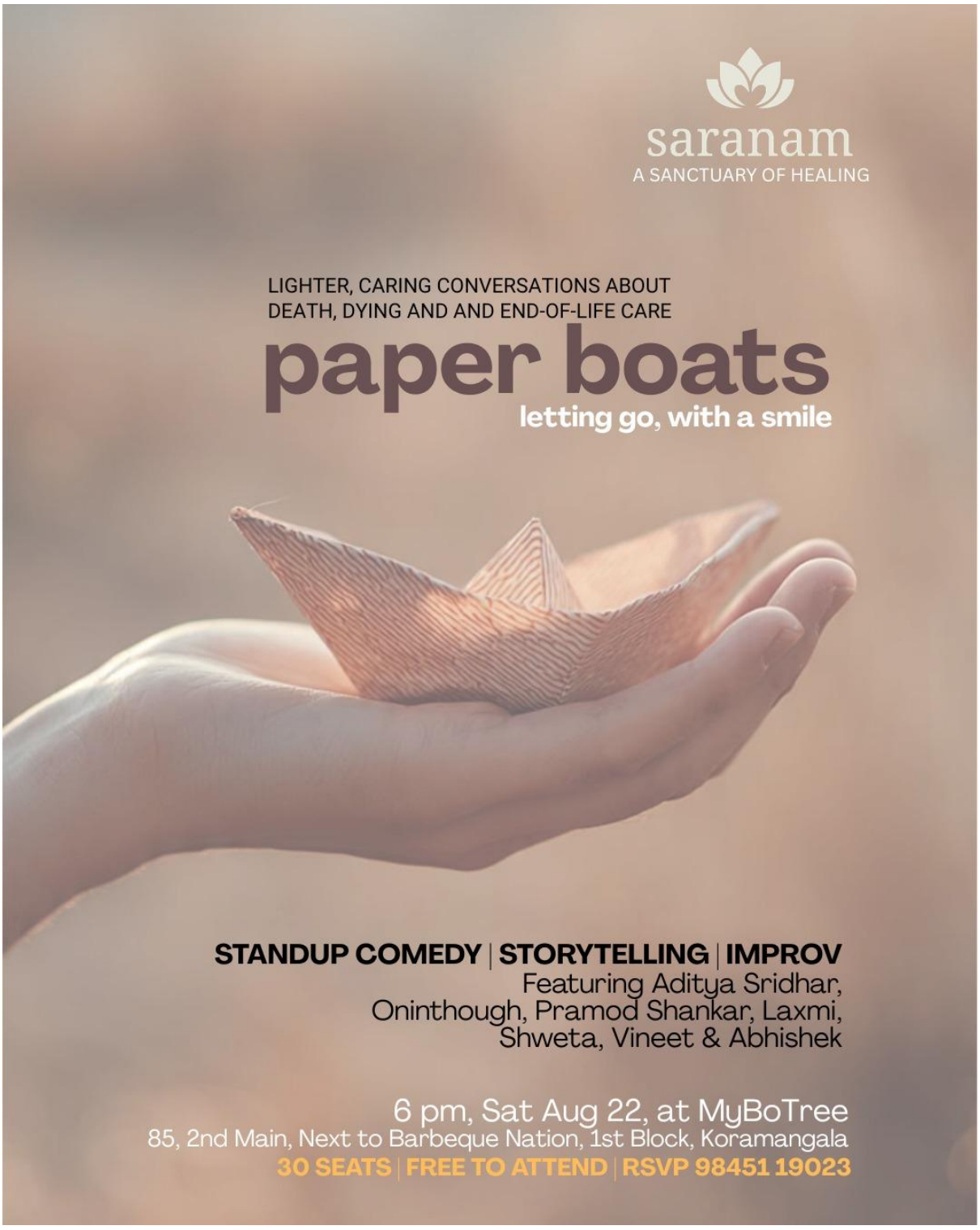
As Dr. Anuradha Ganigara, Professor of Paediatric Anaesthesia, under whose leadership this unit was conceptualised, beautifully said, this is an "important step forward in ensuring that no one is left behind, and it is both a promise and a commitment that no child needs to suffer needlessly."

The program at Indira Gandhi Institute of Child Health (IGICH) is being established under the clinical leadership of Dr Anuradha, and will be led by Dr Nikhila Karanth, Medical and Program Lead at Saranam India.



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Death Literacy Series



Can you have raucous laughter with 35 people, at an event themed around death and dying, for almost two hours on a Saturday evening? We found out you can.

We've believed that conversations on death and dying don't have to live only in hushed, heavy rooms. So, we curated **#PaperBoats** — an experiment in bringing these conversations to life through art and artistes.

We brought together artistes across stand-up comedy, story-telling, and improv theatre, and gave them one brief: hold this topic lightly; help a room full of strangers laugh about death and dying — without flinching, without fear, and without trivializing grief and loss.

What unfolded was something we didn't expect to work quite this well. There was laughter. There was poignant silence at touching stories about life and loss. There was the particular kind of joy at the incredible brilliance of improv theatre the evoked emotions. And then there was the comfort in knowing that that it is safe to feel everything at once — grief, humour, memory, relief — without having to choose just one.

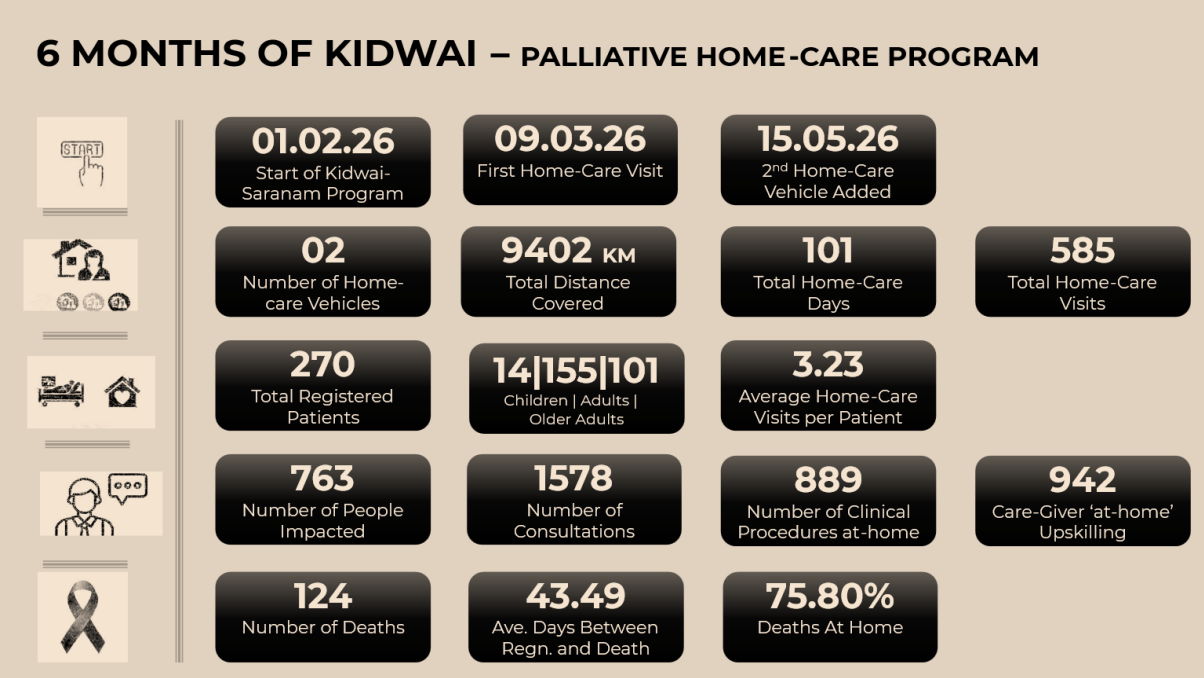
Because here's what we keep learning, event after event: normalising conversations on death doesn't mean stripping them of gravity. It means creating spaces where heavy topics can be held lightly — where we can smile, even laugh, without ever trivialising the grief underneath.

A special thanks to **Pramod Shankar** for being one of a kind – for bringing together some amazing talent, and for his touching narration of beautiful stories. And to Dr Aditya Sridhar, Oninthough, Lakshmi, Shweta, Vineet, and Abhishek, for their time – and their talent – for this cause.



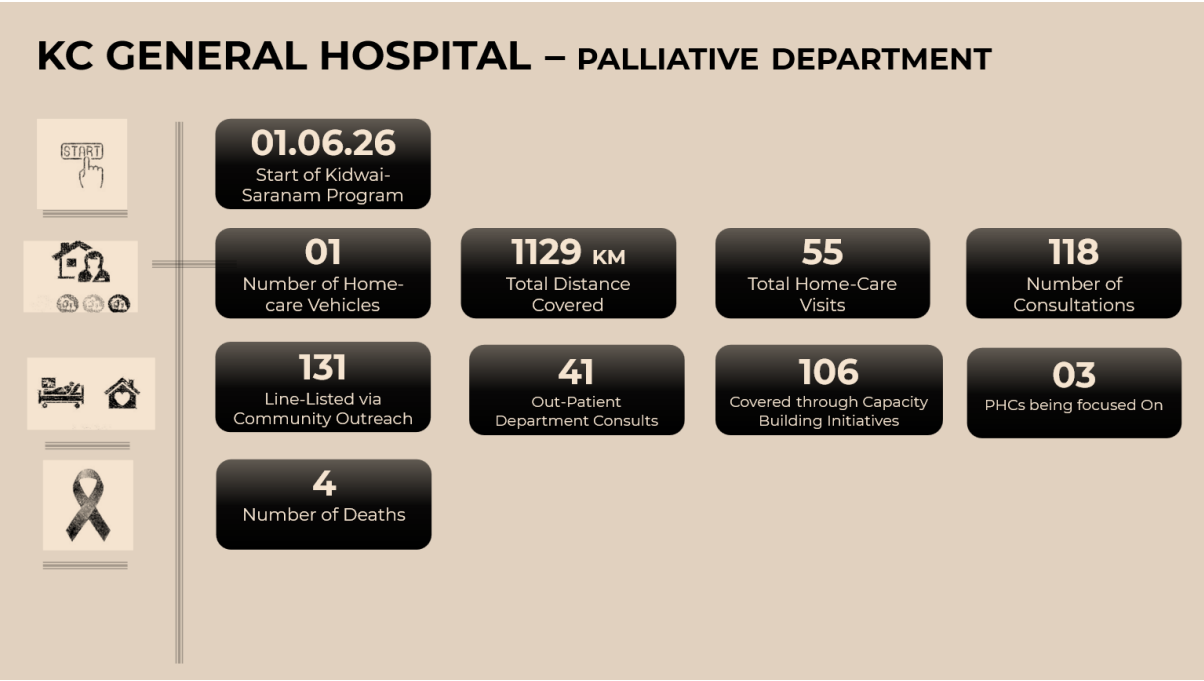
PROGRAM SUMMARY – BY NUMBERS

Partnership with Kidwai Memorial Institute of Oncology



The Kidwai Memorial Institute of Oncology (KMIO) program is focused on exclusively providing palliative home-care services to oncology patients of Kidwai.

Partnership with KC General Hospital, Bangalore.



This program is chartered with establishing a full-fledged palliative care department at this District Hospital. Currently the program is focused on establishing an Out-Patient Department, and on a community-based outreach and home-care program working in collaboration with PHCs, ASHA workers, urban slum settlements, and Destitute/Old-age homes.

SARANAM'S WORK: SCENES FROM THE GROUND

SARANAM'S GROWING TEAM



Since the last update, Sis Bhagyashree and Br. Anand have joined us as Staff Nurses. Mohit Sood has joined us as our Lead for Data Systems and Research. Prakash has joined us as our Lead for Community Outreach and Social Welfare.
Dr Nikhila Karanth (MBBS, MD - Anaesthesia, NFPM) joins us as our Medical and Program Lead for the Pediatric Pain and Palliative Unit at Indira Gandhi Institute of Child Health, and brings with her several years of experience both as an anaesthetist and as a palliative care physician.

WELCOMING WELL-WISHERS

We were also thrilled to welcome and host Shri KC Ramamurthy, IPS (Retd), Former Inspector-General of Police, and former Member of Parliament, Rajya Sabha, Dr Sabitha Ramamurthy, Vice-Chancellor, CMR University, and Dr Tristha Ramamurthy, Founder Ekya Schools, and Co-Founder and Director, Saranam India.


With Dr Anuradha at Indira Gandhi Institute of Child Health


With Dr Yadhuraj Gowda,HOD, at Kidwai Memorial Institute of Oncology

OUR FUN 6-MONTH (ACTUALLY 9-MONTH)'VERSARY



SHRI NAGRAJ SHETTY AND HIS AFFECTION FOR TEAM SARANAM

(Photo reproduced with permissions)



Mr Shetty is an elderly gentleman living with cancer who has been a home-care patient of ours for a few months. He has a lot of interests and retains his bubbly nature. He used to run a printing press and still enjoys his paintings.

He says the days the team visits are the best days for him because he gets to interact with all of them . He calls Dr Anvitha "dodda akka" and Sis Nandita is "sanna akka".

The sunglasses that Dr Anvitha is wearing was gifted to him some time ago, and now he has gifted it to her. He has told her she should always wear it as it will protect her from sun and dust.

Case diaries: Stories From The Field

A case story from our home-care team: about a life changed by illness. About listening beyond symptoms.

About a journey home.



Contributing Authors: Dr Anvitha Shetty, Gloria Liz, Sani Mol, Dr Rashmi

About ten days ago, Santhosi boarded a train to her hometown in Bihar. The journey would take 32 hours—long and uncertain, but one that promised a kind of solace medicine alone could not offer.

A mother of two and a tailor by profession, Santhosi had always carried more than her share of the family's responsibilities. When she was diagnosed with Diffuse Large B-Cell Lymphoma, the illness affected far more than her body. It changed the shape of her entire household.

Santhosi and her husband had migrated to Bengaluru from Bihar in search of work and stability. Her husband was a daily wage labourer, their home was rented, and treatment costs soon became overwhelming. Loans were taken, savings diminished, and the family increasingly depended on their son's income. Her daughter stepped away from college to care for her mother, while trying to keep her own future alive through online studies.

During a home-care visit, the family began discussing whether Santhosi should return to Bihar. A cousin felt she would be more at ease among familiar people, fields, cattle, and memories. Her husband hesitated, weighed down by debt, responsibility, and the need to keep the family afloat. Both responses came from love, but they reflected different understandings of comfort and security.
Santhosi herself spoke with remarkable clarity. Even as chemotherapy continued, she insisted, "I will not die soon. I will fight this disease and overcome it." Her words expressed determination, but also the fragile need to believe that she still had a future worth fighting for.

What troubled her was not only pain or treatment. She worried about finances, her daughter's interrupted education, and the fear of becoming a burden. She noticed that

conversations at home increasingly centred on money, loans, and medical decisions, while her own emotional distress remained less visible. The feeling of becoming a problem instead of a person is one of the deepest forms of suffering serious illness can bring.

The Saranam Team understood that Santhosi's suffering could not be addressed through symptoms alone. Alongside medication and symptom management, they supported breathing exercises, gentle movement, safe ambulation, and medication adherence. Family meetings created space to discuss caregiving roles, treatment goals, financial stress, and future planning—while keeping Santhosi's voice at the centre.

Again and again, she expressed one wish: to return to Bihar.
That wish became the heart of her care.Santhosi has now reached her village. She travelled well and is happy. Her family is being connected with a local palliative-care centre, so that her care can continue close to home.

Her journey reminds us that home is not only a place.

> *"Sometimes, in the middle of suffering, home becomes a form of care."*

Names have been changed to protect privacy.

A SARANAM NEWSLETTER FEATURE:

Saranam's Co-Founder and CEO reflects on the public health system in India, and an important issue that ails the system the today.



"The women surgeons I know are unbelievably smart," had said a good friend recently, herself a highly accomplished, wonderfully passionate senior doctor working within the public health system in India.

"Yet I often sense that they have learned to veil their brilliance slightly, to make themselves more acceptable in rooms that were never fully designed for them", she had continued.

It is a calculated compromise: brilliance, mellowed for acceptance.

Time, I have spent inside India's tertiary and secondary care public health institutions reveals a paradox. Institutions staffed by some of the finest clinical talent anywhere, operating within physical and administrative environments that seem almost indifferent to the people who sustain them.

Read the full essay at: https://tinyurl.com/3u7trnrv

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