Niramay Charitable Trust

Health and wellbeing at every stage of life.

An institutional introduction for CSR partners and leaders

Nutrition

Vision

Disability

Cancer care

Leadership & Core Expertise

A doctor-founded organisation bringing together clinical experience, public health leadership and community programme delivery.

Dr Apurva Rathnu

Managing Trustee & Managing Director

20 years of professional experience, including 15 years in public health at **MoHFW New Delhi, UNICEF and NHM** and 5 years in clinical practice. He brings expertise in public health leadership, healthcare management and clinical service delivery. His focus includes strategic direction, CSR partnerships, institutional development and strengthening community-oriented healthcare initiatives.

Dr Hariprakash Hadial

Trustee & Program Director – Health

20 years of professional experience, including 15 years in public health at **MoHFW New Delhi, UNICEF and NHM** and 5 years in clinical practice. His expertise spans public health programme design, community healthcare and clinical services. He provides technical direction and supports effective planning, implementation and monitoring of health programmes.

Dr Imran Malek

Trustee & Director – Administration & Planning

25 years of professional experience, including 16 years in public health at **NHM Gujarat and UNICEF** and 9 years in clinical practice. His expertise includes public health management, strategic planning and programme administration. He leads organisational planning, institutional collaborations and coordination for effective delivery of community development initiatives.

Registrations and transparency

Institutional records and public financial reporting

Trust registration	**PAN**	**CSR-1**
E/2457	AACTN9481A	CSR00016788
12A / 12AA registration	**80G registration**	**NGO DARPAN**
AACTN9481A E20211	AACTN9481A F20211	GJ/2019/0223390

Scientific & Industrial Research Organisation (SIRO)

DSIR recognition on record through 31 March 2026*

Audited financial reports are available at www.niramay.org

*Renewal after March 2026 requires confirmation. Registration numbers: institutional records supplied by Niramay.

Our priority areas

Four areas of care, connected by community delivery and follow-up.

Nutrition

Maternal and child nutrition and anaemia mitigation

Vision

School screening, assessment and access to glasses

Disability

Customised prostheses, mobility and rehabilitation

Cancer care

Prevention, early detection and implementation research

A Gujarat base. A wider Indian footprint.

80+

team members

10+

doctors on the team

Offices in Gujarat

Dwarka • Jamnagar • Rajkot

Ahmedabad • Vadodara

Programmes across multiple states in India

Team and offices: Niramay update, October 2026. Map: published programme locations; office locations are listed separately.

Nutrition care from pregnancy to childhood

45
villages

60,000+
population covered, 2023–26

Maternal nutrition • Low-birth-weight support
Family counselling • Home follow-up
Malnutrition referral • Mobile primary care

Earlier Bal Poshan Kendras treated 200+ children with severe acute malnutrition in 2021–22.

Vruddhi: Niramay programme brochure; supported by TCSRD. Bal Poshan: Niramay update, 2021–22 experience.

Anaemia mitigation at community scale

9 lakh+

people reached

Cumulative reach reported in October 2026

Supported by Shrimad Rajchandra Mission

Testing → treatment support → counselling → follow-up

Source: Niramay programme update, 22 October 2026.

VISION / PROJECT DRASHTI

School vision care that reaches children

40,000+ children screened

350 schools

4 districts in Gujarat

Jamnagar • Rajkot • Morbi • Dwarka

Source: Niramay programme brochure.

From screening to a pair of glasses

6,000+

pairs of glasses provided free

Screening and referral

Refractive assessment

Prescription and free glasses

Drashti has included separate implementations with TCSRD and HDFC.

Source: Niramay programme brochure. Programme name shared across separate partner-supported implementations.

Customised prostheses for everyday independence

200+

upper-limb beneficiaries

Individual assessment and digital design

Customised 3D printing

Fitting and functional rehabilitation

Source: Niramay programme brochure.

Mobility support across India

1,000
wheelchairs

265
old-age homes

19 cities
across 11 states

Supported by PEHEL Foundation (PNB Housing Finance Ltd)

Reported in Niramay’s October 2025 introduction. Photograph: Niramay’s official Project Care page.

Strengthening early detection of oral cancer risk

Clinical screening: severely reduced mouth opening

Clinical care

Oral Cancer Research Centre & Dental Clinic, Gandhinagar

Research

ICMR-supported evaluation of non-invasive methods for oral potentially malignant disorders

Care pathway

Assessment, risk stratification, counselling and referral for further care

Research collaborators include ICMR–NICPR, AIIMS New Delhi and Swaminarayan Medical College.

Tobacco prevention starts at school

100

schools in Vadodara

Interactive health education for classes 6–10, with cancer and tobacco-harm awareness.

Implementation findings published in Cureus, 2026.

Sources: Project Udaan programme materials; Hadial et al., Cureus 2026;18(4):e106997.

Community health beyond the four priorities

Manovishwa

Mental-health awareness, screening, counselling and referral.

132 camps

reported in 2024–25

Earlier programmes also include Mavtar elder care, NCD screening and community health outreach.

Source: Annual Report 2024–25 and supplied programme records. Image: Manovishwa activity, March 2023.

Strengthening the places where care happens

10 Anganwadis

Upgraded learning and care environments in Gandhinagar and Rajkot.

Nursing education

35 computers across two government nursing colleges in Ahmedabad and Surat.

Hospital equipment

Ultrasound machine support for New Civil Hospital, Surat, including obstetric care.

Sources: Niramay annual reports and October 2025 introduction. Infrastructure programmes supported by PEHEL and partners.

Partners who support the work

CSR and philanthropic partnerships across our programmes

Tata Chemicals / TCSRD

HDFC Bank · Parivartan

Arvind Foundation

IDBI Bank

PNBHFL · PEHEL Foundation

Shrimad Rajchandra Mission

Nayara Energy

Farmson Group

Torrent Pharma

Meghmani Organics

Swarnim Urja Trust

GSECL

SSV Foundation

Bhajanandi Foundation

Nitin Charitable Trust

Fulcrum

Logos: supplied originals, Niramay's partner records and official institutional assets. Partner roles vary by initiative.

Public, research and implementation partners

Government, academic and community relationships

Government of Gujarat

National Health Mission

PM-JAY

ICMR

AIIMS New Delhi

IIPH Gandhinagar

Swaminarayan University

Parul University

ECHO India

Gujarat CSR Authority

Bharat Cares

Bharuch Police

Heart Foundation & Research Institute

SAATH Charitable Trust

Shree Swaminarayan Mandir, Kalupur

Sources: Niramay's supplied partner records and official partner page. Includes programme and historical collaborations.

Research from the field, published for wider use

JMIR RESEARCH PROTOCOLS Gupta et al

Protocol

Evaluation of Noninvasive Adjuncts for Early Detection of Oral Cancer in Oral Potentially Malignant Disorders and Development of Risk-Based Management Strategies: Protocol for a Prospective Longitudinal Study

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Abstract

Background: Oral potentially malignant disorders (OPMDs) constitute the most important precursors of oral cancer. Histopathological examination of a biopsy from a clinically suspicious lesion is still the gold standard for the diagnosis of oral cancer. Adjunctive techniques such as autofluorescence, toluidine blue (TB), and others have been evaluated among high-risk individuals such as chronic tobacco chewers or in patients with suspicious lesions. However, evaluation of these noninvasive adjunctive techniques has not been performed in primary health care settings. Since the first point-of-contact of individuals living in rural and semiurban areas are the primary health care workers, evaluation of these noninvasive adjuncts is likely to assist and strengthen the population-wide oral cancer screening in high-burden countries such as India.

Objective: This prospective longitudinal study aims to evaluate the noninvasive adjuncts in oral cancer screening in the field settings, specifically in detecting foci of oral cancers in various OPMDs.

Methods: After staff recruitment and training, we shall conduct oral cancer screening camps in the community for the recruitment of individuals with OPMDs after obtaining informed consent. All patients with OPMD shall undergo further screening via autofluorescence and TB staining for detection of lesions suspicious of oral cancer. Sensitivity, specificity, and negative and positive predictive values of these adjunctive techniques (autofluorescence and TB) in the detection of oral cancer shall be calculated using biopsy as the gold standard. In addition, this study will also focus on the validation of the 2022 consensus guidelines on risk-based stratification and appropriate management protocols for the OPMDs at the primary and referral health care centers. Our primary outcome is the diagnostic use of autofluorescence and TB in oral cancer detection among OPMDs as well as the robustness of the risk-based management protocols for these patients.

Results: Participant recruitment has been initiated at all sites. Staff recruitment and training in the oral visual examination have been conducted. Procurement of the autofluorescence device is in progress. All the study sites have begun conducting oral screening camps.

Conclusions: The results of this study shall provide robust evidence for the diagnostic use of autofluorescence and TB staining in early oral cancer detection among patients with OPMD. The use of these noninvasive adjuncts by primary health care providers

XSL•FO
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Clinical and programme research from Niramay and its team

Bal Poshan Yojana: facility-based SAM management

Soni et al. · Cureus · 2022

Severe acute malnutrition care in day-care settings

Gadhavi et al. · Healthline · 2022

Malnourished millions — are we doing enough?

Ratnu & Hadial · Healthline · 2022

LaQshya: input–output performance of health facilities

Shukla et al. · Healthline · 2025

Early detection of oral cancer in OPMDs: study protocol

Gupta et al. · JMIR Research Protocols · 2025

Project Udaan: tobacco-free educational institutions

Hadial et al. · Cureus · 2026

Guidelines and technical contributions

Contributions by founders and team, including professional roles before Niramay

01 Swasthya Parishad, Gujarat

02 Midwifery units, Gujarat

03 Midwifery services in India

04 LaQshya: six rapid improvement cycles

05 JSSK dietary norms

06 Swachh Swastha Sarvatra

07 Gestational diabetes: diagnosis and management

08 LaQshya: labour-room quality improvement

09 Obstetric ICUs and HDUs (2016 / 2017 editions)

10 Maternal death surveillance and response

11 Comprehensive abortion care: training and service delivery

12 Anaemia Mukt Bharat / Intensive National Iron Plus

13 Operationalisation of midwifery units, India

14 Gujarat Health System Research Strategy

15 Essential newborn care, Gujarat

Sources: supplied guidelines, October 2025 introduction and trustees' documented professional contributions.

Recognition for the work

Best NGO recognition, Dwarka

District Collector felicitation · 15 August 2025

IMPAct4Nutrition Leadership Award

Recognition for Niramay’s nutrition work

Also recognised: Best Practices in CSR Award 2025 and PEHEL Smart Anganwadi felicitation.

Team recognition: Dr Asma Desai
Most Social Impact Award · NARI 2025, IDA

Institutional collaboration and partner visibility

Government of Gujarat MoU

Document dated 11 January 2024

TATA CHEMICALS — Integrated Annual Report 2023-24

Enablers for Social, Economic and Environmental Development

As part of our social development thrust, we continue to invest in the areas of healthcare, safe drinking water infrastructure, education & skill development.

Ensuring Health and Wellbeing

Our preventive and curative healthcare programmes continued to support the promotion of health and wellbeing in the communities of our outreach during the year.

- Our two mobile clinics in the Okhamandal area provided primary health care services in 46 villages that have limited access to healthcare
- We initiated "Project Vruddhi" to comprehensively address the problem of malnutrition that is widely prevalent in these 46 villages. The project is focussed on providing requisite assistance to pregnant women and children suffering from Severe Acute Malnutrition (SAM). So far 160 women and children have been positively impacted under Project Vruddhi
- Our need-based infrastructure projects for community are helping provide access to clean drinking water through Swachh Tarang project and construction of Roof Rain Water Harvesting Systems

Impact Created during FY 2023-24

13,285	744	15,675	115
Patients provided healthcare services through mobile clinic	Women and adolescent girls treated for low haemoglobin levels	Households covered under Swachh Tarang project	Households covered under Roof Rain Water Harvesting Systems

Project Vruddhi in Tata Chemicals' Annual Report 2023–24

Partner nutrition work also featured on Tata.com, August 2025. Sources: supplied MoU/report and Tata.com.

Four priorities for our next phase of partnerships

Nutrition

Maternal and child nutrition care.

Anaemia testing, treatment support and follow-up.

Vision

Vision care in underserved schools.

Screening, glasses and referral to further care.

Disability

Prostheses and mobility support.

Assessment, fitting and rehabilitation.

Cancer care

Prevention and early identification.

Assessment, referral and implementation research.

How we can work together

Start with a population, a geography and a health goal.

01 **Programme partnership**

Support a defined nutrition, vision, disability or cancer-care programme with a delivery team, care pathways and follow-up.

02 **Service and infrastructure support**

Enable glasses, prostheses, mobility aids, diagnostic equipment or better public facilities where needs have been established.

03 **Research and capacity building**

Develop implementation research, strengthen clinical or field-team skills and use programme evidence to improve delivery.

Joint proposal: people & place • budget & timeline • delivery & referral • measurement & reporting

Let’s work together.

Connect with Niramay’s founding trustees

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