

# NPPMOMD IMPACT 2025

**Report Prepared by**

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# **NPPMOMD IMPACT ASSESSMENT REPORT 2025**

## ***National Programme for Prevention and Management of Osteoarthritis and Musculoskeletal Disorders (NPPMOMD)***

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### **1. Introduction**

Musculoskeletal disorders (MSDs), including osteoarthritis, represent a significant health burden, impacting mobility and quality of life. The National Programme for Prevention and Management of Osteoarthritis and Musculoskeletal Disorders (NPPMOMD) is an AYUSH Public Health Programme initiated by the Ministry of AYUSH, to address this challenge through a comprehensive, integrative approach leveraging AYUSH systems of medicine. The NPPMOMD aims not only to provide treatment but also to empower individuals through education and self-care practices.

This impact assessment aims to evaluate the effectiveness, reach, and sustainability of the NPPMOMD Programme, identifying areas for improvement and policy recommendations to enhance its implementation nationwide. This impact assessment report is based on the data collected using google forms from 17th December 2024 to 15th February 2025. The report covers demographic insights, treatment effectiveness, patient experience, and overall impact of the program.

### **2. Background and rationale**

Musculoskeletal disorders (MSDs), including osteoarthritis (OA), are a major public health concern, contributing significantly to disability, morbidity, and healthcare costs worldwide. In India, the burden of MSDs is rising due to increasing life expectancy, lifestyle changes, and a growing elderly population. Osteoarthritis alone affects approximately 22-39% of the Indian population, with a higher prevalence among women and older adults.

Recognizing the urgent need to address the growing burden of musculoskeletal disorders, the Ministry of AYUSH launched the **National Programme for Prevention and Management of Osteoarthritis and Musculoskeletal Disorders (NPPMOD)**. This initiative aims to provide early diagnosis, preventive strategies, and integrated management of musculoskeletal disorders using AYUSH systems.

### **3. Objectives**

1. To understand the impact of NPPMPMD OPDS in different districts of Kerala
2. To evaluate the quality of life of beneficiaries of NPPMOMD
3. To analyse the impact of NPPMOMD OPD services on the healthcare facilities available to beneficiaries.

#### 4. Methodology

- **Data Collection:** Information was gathered via Google Forms from patients who had completed a minimum follow-up period of nine weeks.
- **Project Locations:** The study was conducted in 7 NPPMOMD OPD's of Government Homeopathic Hospitals in different Districts of Kerala

- GHH KARAKULAM
- GHD EZHAMKULAM
- DHH MUTTOM
- GHH KOZHIKODE
- GTHH KOYILANDI
- DHH KANHANGAD
- NKBM GHH NILESHWAR

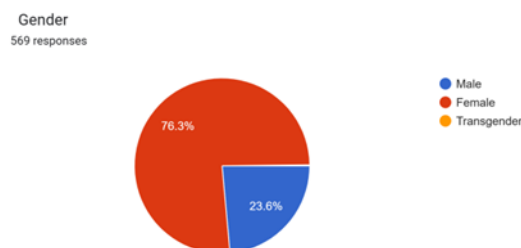
- **Key Sessions Analyzed:**
  1. Demographic Information
  2. Health Background
  3. AYUSH Interventions
  4. Program Awareness and Impact
  5. Self-Care Practices
  6. IEC Comparative Effectiveness Materials
  7. Overall Impact

#### 5. Program Implementation: Findings & Analysis

##### 5.1 Demographic Information

###### ❖ Gender Distribution:

The majority of participants in the program were females (76.3%), with males comprising 23.6% of the population. No transgender individuals were recorded in the dataset. This indicates a higher prevalence of musculoskeletal disorders among females or a greater tendency for women to seek AYUSH interventions.



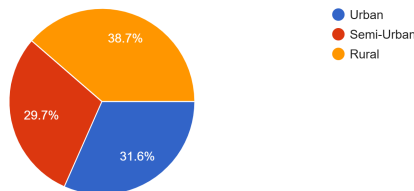
###### ❖ Age Range:

The program catered to individuals ranging from 16 to 85 years old, showing inclusivity across various age groups. The wide range suggests that musculoskeletal disorders affect both younger and older populations, though the prevalence is likely higher in elderly individuals.

#### ❖ **Location of Residence**

The largest proportion (38.7%) of respondents belong to rural areas, indicating that the impact assessment includes a significant focus on rural communities. Semi-urban (29.7%) and urban (31.6%) populations are almost equally represented, suggesting a balanced mix of respondents from developing and developed areas. This distribution suggests that the findings of the assessment reflect a broad socio-economic landscape, with a higher emphasis on rural impact while still accounting for urban and semi-urban variations.

Location of Residence  
569 responses

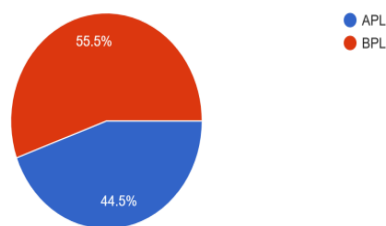


#### ❖ **Socioeconomic Status:**

- **Above Poverty Line (APL):** 44.5 %
- **Below Poverty Line (BPL):** 55.5 %

This suggests that the program benefited individuals from diverse economic backgrounds, with a significant proportion of participants from lower-income groups. Access to AYUSH treatments appears to be relevant across both economic categories.

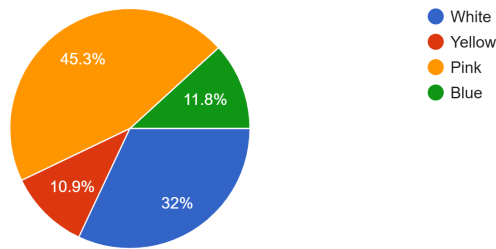
Socioeconomic stats  
569 responses



#### ❖ **Color of Ration card:**

The majority (56.2%) of the surveyed population falls under BPL categories (Yellow and Pink cards) indicating economically weaker sections who rely more on government subsidies. Only 22.7% (Blue and White cardholders) belong to APL categories.

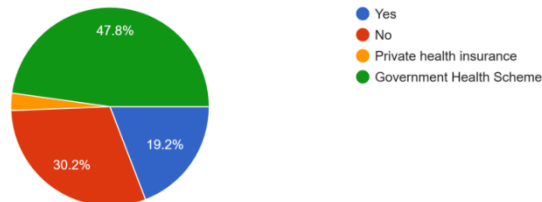
Colour of Ration card  
569 responses



### ❖ Health Insurance Scheme:

An analysis of health insurance coverage among participants revealed that 47.8% availed benefits from government health schemes. However, 30.2% of individuals did not have any form of health insurance. This finding highlights the role of financial security in influencing treatment choices and accessibility to healthcare services.

Do you have access to health insurance or Government health schemes?  
569 responses



## 5.2 Health Background

### ❖ Most Common Diagnoses

The program primarily catered to individuals with various musculoskeletal conditions. The most frequently reported diagnoses were:

- **Osteoarthritis of the Knee (48%)** – The most prevalent condition among participants, indicating a significant burden of degenerative joint disease, which commonly affects mobility and quality of life.
- **Lumbar Spondylosis (22%)** – A degenerative spinal disorder affecting the lower back, often associated with chronic pain and restricted movement.
- **Osteoporosis (15%)** – A metabolic bone disease characterized by reduced bone density, increasing the risk of fractures, particularly in older adults.
- **Other Musculoskeletal Disorders (15%)** – Includes conditions such as cervical spondylosis, rheumatoid arthritis, soft tissue rheumatism, and other orthopedic issues.

The data suggest that osteoarthritis is the most prominent musculoskeletal disorder, necessitating targeted interventions for pain management and mobility improvement.

#### ❖ **Previous Treatment Approaches**

Participants reported diverse treatment histories, highlighting various approaches to managing musculoskeletal disorders:

- **Allopathic Medicine (53.13%)** – More than half of the participants had previously relied on conventional medical treatments, including pain relievers, anti-inflammatory drugs, and surgical interventions.
- **AYUSH Systems (13.95%)** – A notable percentage sought treatment through Ayurveda, Yoga, Unani, Siddha, and Homeopathy, reflecting growing interest in holistic approaches.
- **Combination of Allopathic & AYUSH (14.67%)** – A segment of participants combined modern medicine with AYUSH therapies, indicating a trend toward integrative healthcare.
- **Physiotherapy (8.23%)** – Physiotherapeutic interventions, including exercises and manual therapy, were used to alleviate pain and improve function.
- **No Treatment (3.40%)** – A small proportion of individuals had not sought any prior treatment, possibly due to lack of awareness or access to healthcare.
- **Other Treatments (6.62%)** – This category includes alternative methods such as traditional herbal remedies, dietary modifications, and indigenous healing practices.

These findings suggest that while allopathic medicine remains the predominant choice, AYUSH therapies and integrative treatment approaches are gaining acceptance, underscoring the need for more awareness and accessibility to alternative treatment options.

### **5.3 Effectiveness of AYUSH Interventions**

#### ❖ **Effectiveness Ratings:**

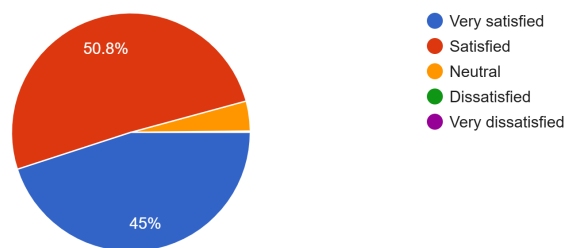
The assessment of AYUSH interventions revealed a high level of effectiveness, with 79.61% of participants reporting that the treatments were "very effective" in managing their musculoskeletal conditions. These individuals experienced significant relief from symptoms such as pain, stiffness, and mobility restrictions. Another 20.21% found the interventions to be "moderately effective," indicating partial improvement and the need for continued therapy for optimal results. A negligible 0.18% considered the treatment "less effective," suggesting that while the majority benefited from the interventions, individual variations in response to therapy exist. These findings reinforce the overall efficacy of AYUSH treatments in musculoskeletal healthcare.

#### ❖ **Patient Satisfaction:**

Patient satisfaction levels were overwhelmingly positive, reflecting the perceived benefits of AYUSH interventions. Nearly 45%% of participants reported being "very satisfied" with their treatment outcomes, highlighting substantial symptom relief and improved quality of life. Another 50.8% expressed that they were "satisfied," indicating favourable results with some scope for further enhancement. A

small 4% remained "neutral," possibly due to limited improvement or short treatment duration.

How satisfied are you with the services provided under the program?  
569 responses

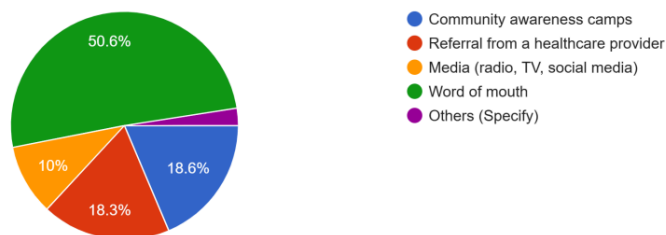


5.4 Program Awareness & Impact

❖ Program Awareness Sources:

The majority of participants became aware of the AYUSH program through word of mouth (50.6%), indicating the strong influence of personal recommendations in healthcare decisions. Referral from health care provider played a crucial role in outreach, contributing to 18.3% of program awareness. Social media (10%) served as a growing platform for disseminating information, reflecting the increasing digital engagement in health promotion. Other sources, including newspapers, community events, and healthcare referrals, accounted for 4%, highlighting the diverse channels through which individuals learned about the program.

How did you hear about the program?  
569 responses



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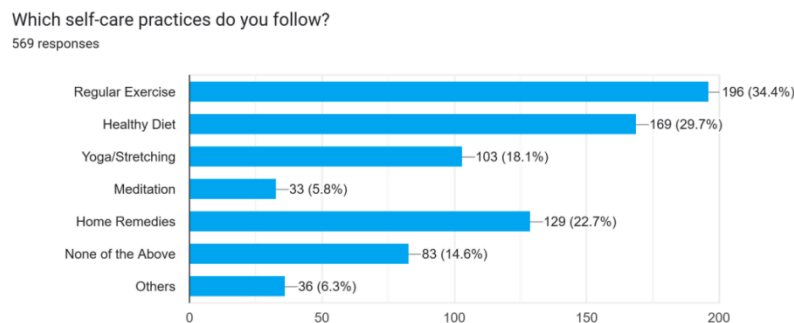
❖ Would Recommend AYUSH Approaches?

The program received an overwhelmingly positive response, with 99.46% of participants expressing their willingness to recommend AYUSH treatments to others. This high endorsement rate signifies strong trust in the effectiveness and benefits of these interventions. Only 0.54% of individuals were hesitant to recommend, possibly due to personal treatment experiences or preference for alternative healthcare approaches. The near-universal recommendation underscores the success and credibility of the program among its beneficiaries.

## 5.5 Self-Care Practices

### ❖ Adoption of Recommended Lifestyle Modifications:

Participants adopted various self-care strategies as part of their musculoskeletal health management. Exercise and physiotherapy (34.4%) were the most commonly followed practices, emphasizing the role of physical activity in improving mobility and reducing pain. Dietary changes (29.7%) were also implemented by many, reflecting an awareness of nutrition's impact on bone and joint health. Yoga and meditation (23.9%) were incorporated as complementary practices, promoting holistic well-being. Additionally, 22.7% of participants used herbal remedies, demonstrating continued reliance on traditional therapeutic approaches. These findings highlight the diverse self-care measures embraced alongside AYUSH interventions for better health outcomes.



## 5.6 IEC Comparative Effectiveness Materials

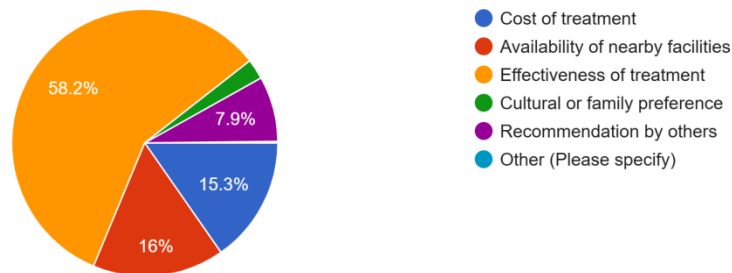
### ❖ Factors influencing choice of treatment

Participants' selection of treatment modalities was primarily driven by effectiveness (58.2%), underscoring the importance of clinical outcomes in decision-making. The availability of nearby facilities (16%) also played a crucial role, emphasizing the need for accessible healthcare services. Cost considerations (15.3%) influenced choices, reflecting the financial aspect of healthcare-seeking behavior. Additionally, recommendations from others (7.9%) and cultural or family preferences (2.5%) contributed to treatment selection, highlighting the role of social influences and traditional beliefs. Other miscellaneous factors accounted for 15.3%, suggesting that individual circumstances and additional considerations also shaped treatment decisions.



Which factors influenced your choice of treatment for osteoarthritis or any other musculoskeletal disorders?

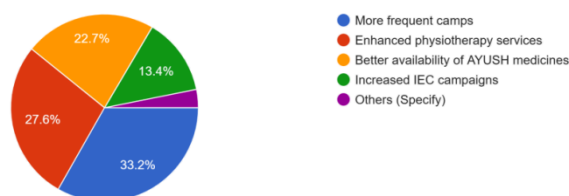
569 responses



### ❖ Factors improving program's impact

To enhance the overall effectiveness of the program, participants identified key areas for improvement. Frequent medical camps (33.2%) were highlighted as a crucial factor, as they provide increased access to care, early diagnosis, and regular follow-ups. Enhanced physiotherapy services (27.6%) were also emphasized, reflecting the growing recognition of physiotherapy as an essential component in managing musculoskeletal disorders. These improvements, along with continued community engagement and patient education, would significantly strengthen the program's impact and accessibility, ultimately leading to better health outcomes for beneficiaries.

What do you think could improve the program's impact?  
569 responses

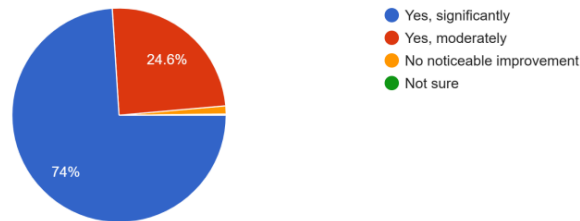


## 5.7 Overall Impact

### ❖ Improvement in Quality of Life:

The implementation of AYUSH interventions has contributed significantly to enhance the quality of life for individuals suffering from musculoskeletal disorders. Patients reported notable improvements in pain management, mobility, and overall functional ability, enabling them to perform daily activities with greater ease. The holistic approach of AYUSH therapies, combined with lifestyle modifications and physiotherapy, has played a crucial role in alleviating discomfort and promoting long-term well-being.

Did you notice an improvement in your quality of life after adopting AYUSH interventions?  
569 responses



### ❖ Major Areas of Suggested Improvement:

While the program has demonstrated substantial success, several key areas for enhancement have been identified to further optimize its impact. The need for increased availability of AYUSH medicines was highlighted, ensuring consistent access to prescribed treatments. Additionally, the introduction of daily orthopedic outpatient (OP) services was suggested to facilitate continuous patient care and timely interventions. The expansion of physiotherapy services was also emphasized, acknowledging its integral role in musculoskeletal rehabilitation. Moreover, strengthening Information, Education, and Communication (IEC) campaigns were recommended to raise greater awareness about AYUSH interventions and encourage informed health choices. Addressing these areas would significantly enhance the accessibility, efficiency, and effectiveness of the program.

## 6. SWOT Analysis

### Strengths ●

- ✓ High patient satisfaction and effectiveness of AYUSH treatments
- ✓ Strong word-of-mouth promotion of the program
- ✓ High adoption rates of self-care practices

### Weaknesses

- ✗ Limited access to AYUSH medicines and specialized services
- ✗ Low engagement with IEC materials among certain populations

### Opportunities ●

- ✧ Expansion of outreach programs to improve program awareness
- ✧ Enhanced digital engagement through social media and online resources
- ✧ Collaboration with allopathic practitioners for integrative treatment models

### Threats ⚠

- ⚡ Dependency on limited AYUSH resources in certain areas
- ⚡ Potential skepticism from patients unfamiliar with AYUSH treatments
- ⚡ Sustainability concerns for long-term implementation

## 7. Conclusion & Recommendations

The NPPMOMD program has demonstrated high effectiveness and patient satisfaction, with **99.46%** of respondents recommending AYUSH interventions. However, challenges such as medicine availability, access to physiotherapy, and IEC material engagement need to be addressed for better program impact. The programme holds immense potential in addressing musculoskeletal disorders effectively, and these improvements will help sustain its long-term success.

### Key Recommendations:

- **Strengthen AYUSH medicine supply chains** to improve treatment accessibility.
- **Expand physiotherapy services** in key centers.
- **Enhance digital and physical IEC materials** to improve patient engagement.
- **Conduct further data validation** to correct discrepancies in recorded quality-of-life improvements.

Total Number of Responses: **569** patients

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