Internship Report

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Program: MBA (Hospital and Health Management)

Organization: IIHMR University

Organization Mentor : Dr.Mahendar Kumar

Internship Period: Mar 10 to May 312025

Activity Title: Introduction
As a part of the MBA in Hospital and Health Management program, I undertook an internship with the IIHMR University, Jaipur. During my internship, I supported the planning and execution of a two-day national consultation in collaboration with UNICEF India on the theme: “Barriers to implementation And utilization of e Sanjivani : Evaluating Indias flagship telemedicine program.

Although the main focus of my internship was on foster care, the behavioral science methodologies and stakeholder engagement strategies I observed are directly applicable to understanding barriers in public health programs like eSanjeevani. This report contextualizes those learnings to evaluate the implementation challenges of eSanjeevani, India’s national telemedicine initiative.

2. Objectives of the Internship
To understand the application of behavioral science in public health.

To experience stakeholder consultation and multi-sectoral program planning.

To develop skills in note-taking, coordination, and event facilitation.

To get exposure to real-world policy issues affecting health and social programs.

To translate consultation insights into programmatic improvements, especially relevant to technology-driven services like telemedicine.

3. Organizational Profile
The Centre for Behavioural Sciences (CBS) at IIHMR University uses behavioral insights from psychology, economics, and social science to design impactful public health programs. It works with partners such as UNICEF, government agencies, and NGOs to address challenges in child protection, health behavior, and communication strategies. CBS also plays a vital role in capacity building, research, and developing innovative tools for behavior change.

4. Services Provided by the Organization

Designing programs with a human-centered approach.

Advising governments and non-profits on health communication strategies.

Conducting capacity-building workshops and national consultations.

Creating toolkits and communication materials for parenting, health, and protection.

Leading research projects that aim to understand and improve behavior in health and social systems.

5. Key Internship Activities
Supporting the National Consultation on Foster Parenting (May 20–21, 2025)

I was involved in:

Pre-event material preparation and logistics.

Taking structured notes during sessions.

Participating in design thinking and stakeholder mapping.

Supporting group ideation and behavioral solutioning.

Assisting in the report-writing process post-event.

These activities helped me understand how behavioral barriers are identified and addressed, offering parallels to how digital health programs like eSanjeevani could benefit from similar processes.

6. Key Learnings from the Internship
Understanding foster care and emotional decision-making in vulnerable families.

Application of positive behavioral nudges, emotional mapping, and empathy-based tools in policy design.

Importance of stakeholder engagement and listening to community voices.

Learning how communication and simple interventions can greatly enhance service delivery.

Observing the critical role of planning, coordination, and timing in high-stakes consultations.

Recognizing the potential for behavioral science in digital health and telemedicine initiatives.

7. Application of Internship Learning to eSanjeevani

eSanjeevani, India's flagship telemedicine program, aims to bridge the gap in healthcare access. Despite its scale, it faces several barriers in implementation and utilization, which behavioral insights can help address. Based on my internship exposure, I identified the following core barriers and insights:

A. Digital Literacy and Access Issues
Many users lack the skills or confidence to use the app effectively.

Behavioral approach: Simplify user interfaces, use visual cues and step-by-step guides.

B. Trust and Acceptance of Virtual Care
Patients are hesitant to trust online consultations.

Behavioral approach: Use testimonials, positive framing, and familiarization messages to build trust.

C. Lack of Awareness and Promotion
Limited awareness in rural areas about the service's availability and benefits.

Behavioral approach: Conduct community-level promotions, leverage peer influencers, and implement micro-targeted campaigns.

D. Cultural and Gender Barriers
Women and elderly often defer usage due to household roles or hesitancy.

Behavioral approach: Involve ASHA workers, create gender-sensitive content, and offer supportive environments.

E. Operational and Systemic Issues
Irregular availability of doctors or poor connectivity disrupts services.

Behavioral insight: Improve feedback loops, reward consistency among providers, and involve local champions to ensure service quality.

8. Conclusion
My internship at CBS gave me a solid foundation in applying behavioral science to public health challenges. The principles and practices I witnessed—like empathy-driven design, participatory planning, and behavioral nudges—are highly relevant to overcoming barriers in eSanjeevani and similar digital health initiatives.

The internship not only enhanced my practical knowledge but also highlighted the importance of interdisciplinary approaches in strengthening healthcare delivery in India. Whether it's in foster care or telemedicine, understanding human behavior remains at the heart of successful program implementation.