

IMPACT & PROGRESS REPORT



Table of Contents

01

Executive Summary

02

Why Lung Health Matters

03

Our Story & Vision

04

Theory of Change

05

Our Programs & Interventions

06

Case Studies: Urban & Rural Impact

07

Technology That Transforms

08

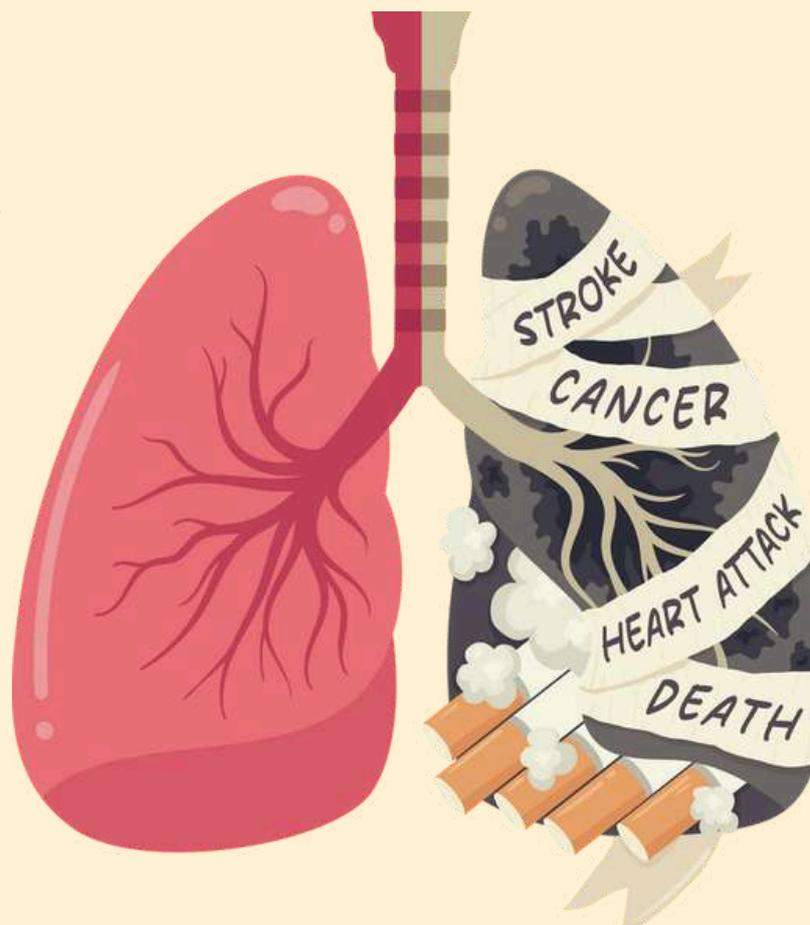
Outcomes & Impact Metrics

09

Financial Transparency & FCRA Fit

10

12-Month Roadmap & Scalability



Executive Summary

Pink Tree Foundation is India's first non-profit dedicated exclusively to lung health, blending grassroots empowerment, community awareness, and AI-powered early detection.

Our mission: No person in India should suffer or die from preventable respiratory disease due to lack of awareness, delayed diagnosis, or poor access to care. India faces a growing lung health crisis—over 90% of citizens breathe polluted air, with slum dwellers and rural communities bearing the brunt.

The Pink Tree Foundation is a health innovation nonprofit working at the intersection of community engagement, digital diagnostics, and climate-health advocacy to bridge the gap between awareness and accessible care. With 1,000+ individuals screened and 500+ underserved villages mapped, Pink Tree is building India's first community-powered lung health movement, backed by leading global health organizations.

Why Lung Health Matters

- Disease Burden: Asthma (30M affected), COPD (highest global prevalence), TB (world's largest TB burden), OSA (undiagnosed majority).
- Air Quality Crisis: 90%+ breathe PM_{2.5} above safe limits, causing 1.2M deaths annually.
- Indoor Pollution: 60–70% of rural homes use wood, dung, or crop waste for cooking — leading to two-thirds of household air pollution deaths being women & children.
- Economic Toll: Air pollution costs India \$36.8B/year in healthcare spending and lost productivity.
- System Gaps: Late diagnosis, high stigma, poor treatment adherence, no patient-generated health data for doctors.
- We work at the intersection of **air quality, healthcare access, and behaviour change.**



ELF

EUROPEAN
LUNG
FOUNDATION



GLOBAL ALLERGY & AIRWAYS
P A T I E N T P L A T F O R M

RECOGNISED BY GAAPP & ELF,
IMPLEMENTING GLOBAL BEST PRACTICES LOCALLY.

Our Story & Vision



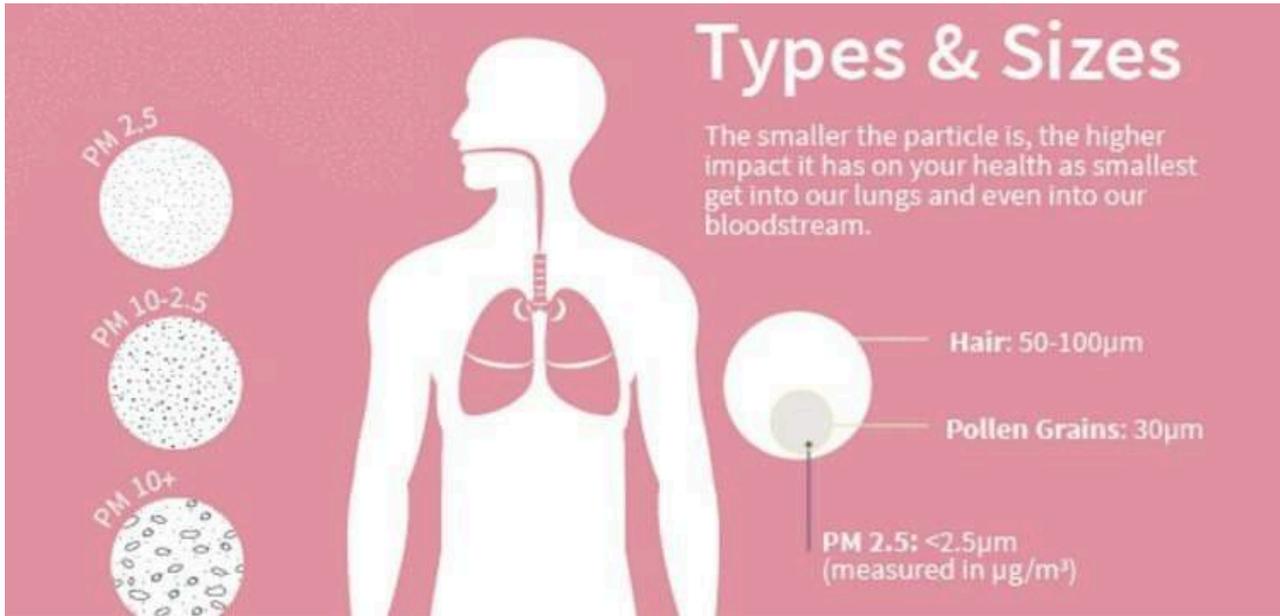
Founded after witnessing two decades of preventable suffering from chronic respiratory disease, Pink Tree Foundation:

- Started in Mumbai slums with awareness workshops & symptom recognition tools in local languages. **Revolutionising Lung Care Through Early Action & Community Power**
- Scaled to rural Maharashtra with partners like DigiSwasthya & Waatavaran introducing doorstep AI lung screening.
- Differentiates as: **The only Indian NGO with GAAPP & ELF partnerships**
- The first to bring **AI-based Vocal Biomarker technology to India**
- A **phygital model** linking street-to-clinic with patient-first design. **Approach: Technology + Education + Community Empowerment + Policy Advocacy.**
- **Vision: We want everyone, no matter where they live, to breathe clean air and live a healthy, respectful life.**
- **Core Values:**
- **Respect for Everyone |Healthcare for All| Caring with Heart| Innovation|**

Key Milestones

- **1,000+** screenings conducted in rural, urban, and pollution-affected communities
- **500+** individuals directly educated by – workshops, school sessions, and group meetings
- **10,000+** reached indirectly via media, digital, and print
- **200+** high-risk cases flagged for urgent follow-up
- **50+** community health workers (CHWs, ASHAs, volunteers) trained and equipped
- Partnerships with for LPG adoption, DigiSwasthya, Waatavaran, and GNSW Mumbai, BMC, Community schools, etc.
- India representative for GAAPP , COPD Foundation & ELF, securing global validation and resources

The Silent Lung Crisis is Stealing Lives



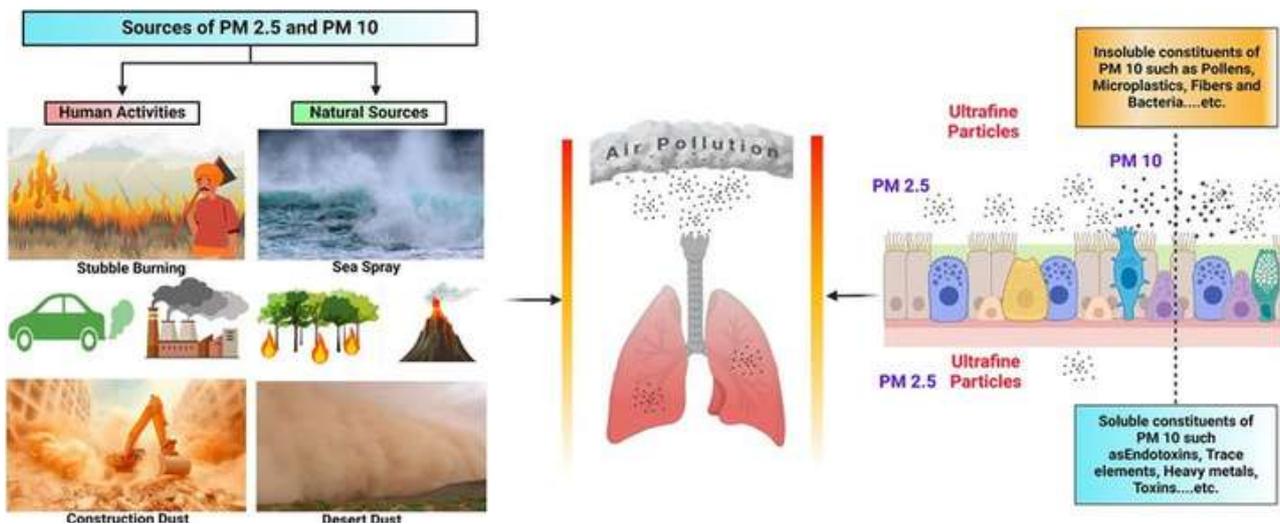
Why Lung Health Matters:

Millions at risk: Asthma, TB, and COPD affect tens of millions.

Toxic air: 90%+ of Indians breathe unsafe levels of PM2.5.

Economic toll: Air pollution costs India approximately \$36.8 billion annually.

Key Gaps: Low awareness, scarce access to early detection, stigma and misinformation.



PinkTree's Community Impact Pillars

Awareness: Demystifying lung health through culturally-sensitive education to break stigma and spur prevention.

Access: Taking cutting-edge screening technology directly to people's doorsteps, making early detection free and easy.

Equity: Focusing our efforts on the most vulnerable women, children, and underserved communities to bridge the healthcare gap.

Our Model

Educate & Raise Awareness

- Workshops in local languages to break stigma and misinformation.
- Builds community trust for partners' health initiatives.
- Outcome: Informed communities proactively seeking care.

Screen & Detect Early

- Non-invasive, 6-second AI voice test—no doctors or internet needed.
- Scalable, cost-effective solution for funders and CSR partners.
- Outcome: Early detection of high-risk cases (asthma, COPD, TB).

Empower & Build Capacity

- Train ASHA workers and volunteers as certified lung health champions.
- Creates a sustainable frontline workforce for long-term impact.
- Outcome: Communities equipped to manage their own lung health.

Advocate & Drive Change

- Use real-world data to influence policy and public health design.
- Supports research and advocacy for better resource allocation.
- Outcome: Systemic progress toward cleaner air and healthier communities.

Our Technology:

- Voice Test: 6-second AI-powered lung screening.
- PinkTree App: Connects patients to doctors, tracks health.
- LungSco Score: Monitors lung health over time.

Team



Ira Toraskar

Director



Nandita Dandekar

Director



Dr. Samidha Vichare

Advisor



Mohini Mehta

Advisor

Prioritised SDGs & Contributions



There are 17 SDGs and 169 targets in total. Bridging health gaps and climate action through tech-enabled screening, women's leadership, and outreach to marginalised populations.

People, Planet, Progress: Inclusive Health Innovation



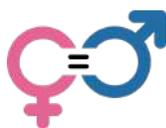
SDG 3: Good Health & Well-being

Pioneering early detection of asthma, COPD, and TB via patient-first digital monitoring, improving respiratory health outcomes.



SDG 13: Climate Action

Linking air pollution's health impacts to climate advocacy, driving policies for cleaner air and sustainable practices.



SDG 5: Gender Equality

To help give your audience an overview, this section can include a brief description of the goal, its relevance to your sector or industry, and the specific sub-targets your organization is addressing.



SDG 10: Reduced Inequalities

Reaching underserved groups (rural slums, waste-pickers, migrants) with equitable healthcare access and resources.

Theory of Change

Revolutionizing Lung Care Through Early Action & Community Power

IDENTIFY → INTERVENE → EMPOWER → SYSTEM CHANGE → MEASURE & SCALE

Phase	What We Do (Activities)	Short-Term Results	Health Impact	Scaling Strategy
1. Identify	<ul style="list-style-type: none"> - Run voice tests + symptom checks in hotspots like Deonar - Map pollution levels and vulnerable groups 	<ul style="list-style-type: none"> - Lung risk scores - Community lung maps - Priority list for follow-ups 	<ul style="list-style-type: none"> - Early warning signs detected - Awareness up 70% 	<ul style="list-style-type: none"> - Camp model used in other high-risk areas
2. Intervene	<ul style="list-style-type: none"> - Voice-based lung tests at camps - Educate instantly on smoke risks - Refer serious cases to doctors 	<ul style="list-style-type: none"> - Fast results - Prevention info in local languages - Tracked referrals 	<ul style="list-style-type: none"> - 20% reduction in symptoms - 40% better treatment 	<ul style="list-style-type: none"> - Local ASHAs trained to run camps
3. Empower	<ul style="list-style-type: none"> - Train ASHAs + women SHGs to do peer screenings - Use community leaders as advocates 	<ul style="list-style-type: none"> - 500+ trained women health leaders - Regular awareness sessions 	<ul style="list-style-type: none"> - 60% adopt cleaner practices - 30% fewer missed treatments 	<ul style="list-style-type: none"> - Community-run screening units in villages
4. System Change	<ul style="list-style-type: none"> - Link test data to doctors - Get pharma + CSR to fund camps - Send SMS alerts for high-risk cases 	<ul style="list-style-type: none"> - More doctors access local data - Corporate-sponsored camps - Full follow-up loop 	<ul style="list-style-type: none"> - 50% faster specialist support 	<ul style="list-style-type: none"> - Make this model part of public health systems
5. Measure & Scale	<ul style="list-style-type: none"> - Scorecard for each area - Manuals to replicate model - Share learnings with global partners 	<ul style="list-style-type: none"> - 30% fewer hospital visits - Expanded to 5 states 	<ul style="list-style-type: none"> - National-level adoption - Global validation 	<ul style="list-style-type: none"> - 100,000 screened per year by Year 3

This model stays focused entirely on screening-based intervention, right from identifying high-risk individuals in polluted zones to tracking their health over time. All actions are built around vocal biomarker technology, making it fast, scalable, and cost-efficient. By empowering ASHAs and SHGs to run these camps, and using digital tools to link patients to doctors, PinkTree ensures local action with systemic impact. This fits well for CSR, government partnerships, and health innovation platforms looking for measurable impact with a strong return on investment. Captures PinkTree's focus on rapid detection (breath samples), camp scalability, and preventive "defense" against respiratory damage.

Programmes & Interventions

Urban Intervention:

- We work in slum areas of Mumbai like Deonar.
- People get free lung health check-ups using our voice-based screening tool.
- We make learning fun kids draw healthy vs. sick lungs, play games to understand air quality, and everyone leaves more aware.



Rural Intervention: With DigiSwasthya

- In remote villages like Wafgaon (Pune), we go door-to-door.
- Our mobile app helps check people's lungs using just their voice.



These programs prove we can work in very tough conditions with technology, empathy, and deep community connection.



LOCAL, INCLUSIVE, AND TECH-POWERED,

Case Studies

Deonar Slums – “We Want Oxygen, Not Smoke”

Partners: PinkTree Foundation × Waatavaran × Govandi New Sangam Welfare (GNSW Mumbai) × BMC

Govandi borders Asia’s largest landfill, the Deonar Dumping Ground. Toxic smoke from constant waste burning fills the air, causing high rates of TB, asthma, and chronic cough.

Intervention (5 Aug 2025):

- Free Lung Health Camp with AI-powered vocal biomarker screening
- No paperwork needed — open to all residents
- Awareness sessions on the link between pollution and diseases (TB, asthma, cancer)
- Community Mapping of waste-burning hotspots
- “Wall of Demands” where residents wrote: “We want oxygen, not smoke”

Key Findings:

- 20% flagged for urgent lung care
- 65% reported chronic cough or breathlessness
- 100% exposed daily to toxic smoke

Community Voice: “I thought coughing was just part of living here. We want oxygen, not smoke.” — Farida, 38, waste-picker.”



LOCAL, INCLUSIVE, AND TECH-POWERED,

Case Studies

Wafgaon Gram Panchayat – Rural Tech on Two Wheels

Partners: PinkTree Foundation × DigiSwasthya Foundation

Remote village in Pune District; limited access to doctors and diagnostics. Indoor air pollution from chulhas affects women, elderly, and children.

Intervention:

- Trained public health workers on vocal biomarker technology
- Screening with PinkTree app (offline mode)
- Health education on better ventilation and clean fuel use
- High-risk patients referred to local public health centres

Results:

- 20+ villagers screened
- 50% reported breathlessness symptoms
- 15+ high-risk cases linked to treatment
- Women’s Self-Help Group took a **“Right to Clean Air”** pledge.



PINKTREE FOUNDATION

ENGAGEMENT HIGHLIGHTS REPORT

On April 8th in Wafgaon, we made an impact by listening to the health needs of the elderly. Partnering with DigiSwasthya, PinkTree Foundation provided tech-driven screenings for those most at risk but often overlooked in rural health.

25% Reported breathlessness	Gender
25% worked in dusty areas	12 8
36% at moderate to high respiratory risk	100% want regular lung checkups

Tech-powered screening enabled early intervention to protect vulnerable lungs

Partnerships Make Healing Possible

Community Trust	Collaboration Strengthening ties with grassroots champions at DigiSwasthya.	Tech Powered Screening
------------------------	---	-------------------------------

Case Studies

The Slum Screenings– Linking Environment to Lungs

Location: Mumbai urban slums

High-density neighbourhoods with poor waste management and high AQI risk.

Intervention:

- 100+ residents engaged in lung health awareness and screening
- Visual learning tools — children’s lung drawing wall, “smiling vs. unhealthy lung” boards
- AQI literacy games for youth
- Rotaract Club & student volunteers trained as lung health ambassadors
- Sticky-note boards for residents to share health concerns and pledges

Outcome:

- High recall of air pollution symptoms and preventive measures
- Dialogue started with local civic bodies on waste-burning policies

Community Voice:

“My child now draws clean lungs and says we should close the window when there’s smoke outside.” — Shaila, 29, homemaker

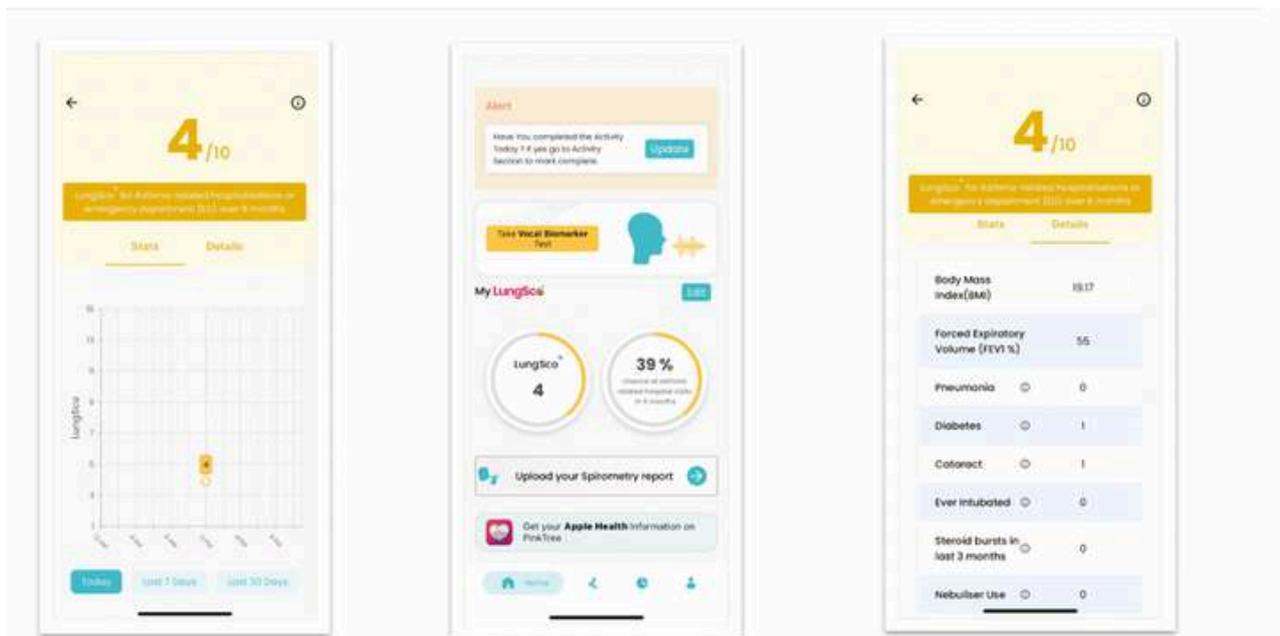


Technology That Transforms

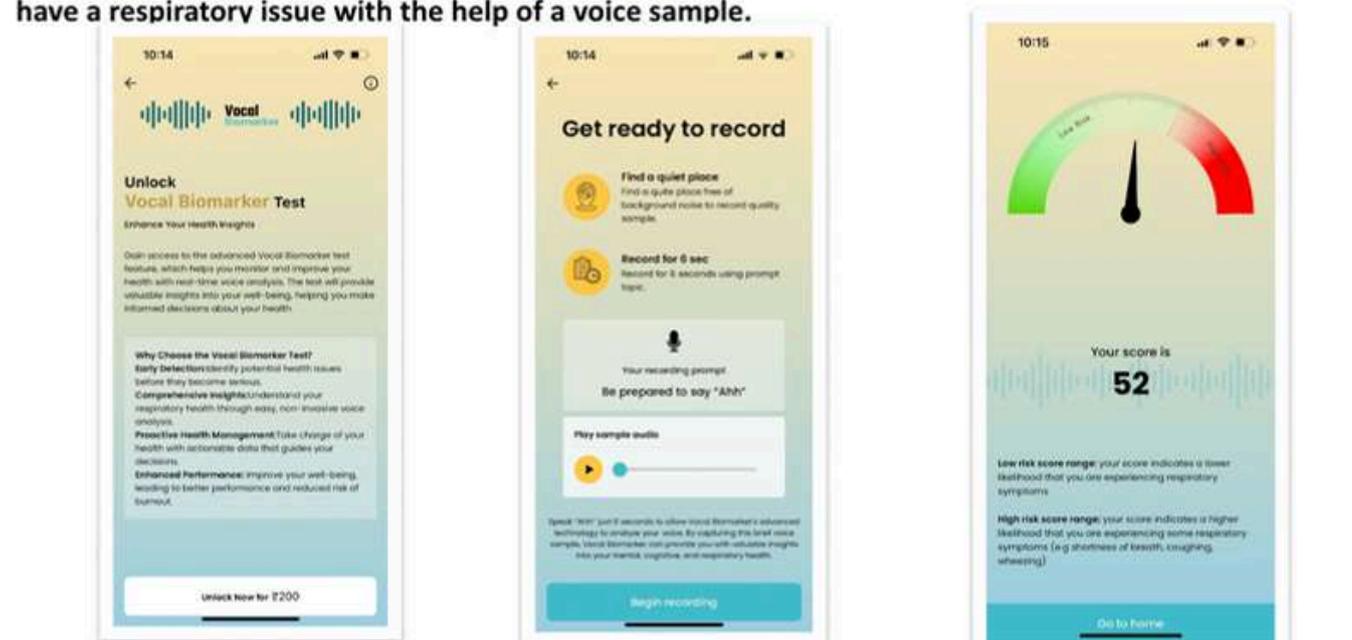
The Slum Screenings – Linking Environment to Lungs

- **Vocal Biomarker Test (with Sonde Health):** 6-second AI voice analysis → early detection without hospital visit
- **LungSco® Score:** Predictive, tracks patient risk status over time
- **PinkTree App:** Works offline, supports real-time referrals, connects patients to doctors
- **CAAT Questionnaire:** Global-standard COPD/asthma severity scoring, embedded in app

Designed for: Low-connectivity, low-literacy environments — with icons, local languages.



Vocal Biomarker Test: Partnership with a US based Vocal Biomarker Company which determines if you have a respiratory issue with the help of a voice sample.



Outcomes & Impact Metrics: What's Changed

Govandi lung screening finds 20% need urgent attention

Amit Srivastava
MUMBAI

A free lung health screening in Govandi – located beside Asia's largest dumping ground in Deonar – found that one in five residents tested required urgent medical attention and 65% reported chronic cough or breathlessness. Residents participated in awareness sessions on the link between air pollution and illnesses such as TB, asthma, and cancer.

The camp, organised by the PinkTree Foundation, Waatavaran Foundation, and screened around 50 residents at the Kamala Raman Nagar Municipal Hospital and Health Centre.

The initiative introduced Vocal Biomarker Analysis Technology – a quick, AI-powered, voice-based test capable of detecting possible respiratory conditions within minutes – for the first time in India. The findings also revealed that 100% of participants face daily exposure to toxic smoke and chemical fumes from continuous waste burning at the Deonar dumping ground.

sessions on the link between air pollution and illnesses such as TB, asthma, and cancer. Informational pamphlets on air quality and waste management were distributed, and locals voiced their demands on an interactive 'Wall of Demands' with messages like 'We want oxygen, not smoke.'

Ira Toraskar, Founder of PinkTree Foundation, said: "Govandi residents are breathing poison every day. This is not just an environmental issue, it's a humanitarian crisis. Through these screenings, we are giving residents the tools

ATTENTION REQUIRED

1 in 5 residents tested were flagged for urgent medical attention

65% of participants reported chronic cough or breathlessness

100% confirmed daily exposure to toxic smoke and chemicals from ongoing waste burning

Mohsinidun Pathan, senior project associate of Waatavaran, said, "Air pollution is stealing years from people's lives here. We cannot normalise communities living next to constant waste fires and chemical fumes. With each breath we can sense the pollutants in the air. It becomes very much important for municipal officials, policy makers and civil society organisations to work together for the betterment of the people living here."

Advocate Shaikh Fayaz Alam, president of GNSW community: "We have been raising our voices for decades, but now our health data speaks louder than ever. This is our lived reality – children, elders, everyone breathing toxic air every single day. We need solutions, not sympathy."

The three organisations have plans to launch a 'Monthly Lung Health Screening' programme in Govandi and surrounding areas. The initiative will focus on early detection, awareness building, and policy advocacy to push for stricter waste management, industrial regula-



Govandi- Deonar Slum Camp

- 80% of residents screened flagged for urgent lung care
- 100% reported daily exposure to toxic smoke



Mumbai Slum Awareness Drive

- 100+ residents engaged in air quality and lung health workshops
- Voice screening via smartphones + referral to PHCs



Rural Wafgaon Camp

- 50% villagers reported breathlessness; 15+ referred for treatment.

Seema (52): "I thought coughing was just life. PinkTree helped me finally breathe easier."

Impact

- 1,000+ individuals screened across rural & urban high-risk zones
- 800+ urgent referrals for asthma, COPD, TB
- 200+ CHWs & community volunteers trained in lung health tools
- 40% of rural camp screenings were women
- 1,000+ direct education participants
- ~5,000 reached via media, digital & community events
- +30% better adherence to treatment among app users
- 15% fewer emergency visits in monitored patients

Advocacy, Governance & Partners



01

Global Partners

- GAAPP (Global Allergy & Airways Patient Platform)
- European Lung Foundation (ELF)
- COPD Foundation



02

Local Partners:

- DigiSwasthya
- Waatavaran
- GNSW Mumbai
- BMC (Brihanmumbai Municipal Corporation)

Financial Transparency

- ₹50–₹70 per screening; ~₹250 per beneficiary
- ₹500 = 2 screenings + awareness + referral kit

12-Month Roadmap (2025–26)

- 10,000 screenings/year target
- Certify 50 Lung Healthy Villages
- Nationwide Awareness Campaigns (Educating tens of thousands on lung health, indoor air pollution, and preventive care)
- App upgrade: AQI alerts
- Launch Youth Lung Health Fellowship
- Expand to 5 more industrial-pollution hotspots



Join the PinkTree Movement

This is more than healthcare, it's a movement. When you join us, you're standing up for millions of invisible patients, creating healthier homes, and shaping policies that value every breath.

Why Join?

Volunteer – Youth, students, community leaders

Partner – NGOs, hospitals, CSR, government

Donate – ₹500 = 2 life-saving lung screenings

Your Impact:

- Detect disease early
- Reduce hospital visits
- Fight for clean air for all

Be the breath of change India needs.

Contact

✉ Email: contact@pinktreefoundation.org

🌐 Website: www.pinktreefoundation.org

📱 Social Media:

[Facebook](#)

[Instagram](#)

[LinkedIn](#)

LET'S MAKE INDIA'S LUNGS PINK, NOT GREY
LET'S GIVE EVERY FAMILY THE RIGHT TO CLEAN AIR.