



Independent CSR Impact Assessment Report
CSR project: Disaster Relief- Response to Covid Pandemic
2021-2022

By
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Bangalore, India



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Acknowledgement -

This CSR Impact Assessment Report is prepared by Bluesky Sustainable Business LLP. The report assesses the Impact of Coromandel International Ltd. (CIL) CSR Projects: **Disaster Relief- Response to Covid Pandemic** for FY 2020-21.

Bluesky Sustainable Business LLP takes this opportunity to thank all the stakeholders who interacted with us during the impact assessment - community beneficiaries (who received food kits, covid care kits and IBCC awareness sessions), hospital representatives, Government representatives. We appreciate them for being responsive, supportive and patient with us during the assessment process.

We want to state our appreciation of Ms. Amrita Shrivastava (DGM, CSR, Coromandel) for her able leadership to sustain the CSR Projects during COVID. We acknowledge the CSR Team members Deepshi Arya, Srikanth and Vamshi Krishna for arranging meetings, addressing our audit queries and providing us with project data. The good rapport of the CSR Team with the communities contributed to robust data collection

Signed & reviewed by:

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Chapter 1 -

Executive Summary -

Coromandel International Limited, (CIL) India's second-largest phosphatic fertilizer player, is in the business segments of fertilizers, speciality nutrients, crop protection, and retail.

The company clocked a turnover of Rs. 13,155 Crores during FY 2019-20. It was ranked among the top 20 best companies to work for by Business Today and was voted one of the ten greenest companies in India by TERI, reflecting its commitment to the environment and society. Coromandel is a part of the INR 381 billion (38,105 Crores) Murugappa Group. <https://coromandel.biz/aboutus.html>.

In compliance to The Companies Act 2013, Coromandel Industries Limited has a robust [CSR Policy](#) and an active CSR Committee that guides its CSR activities.

Coromandel International Limited hired Bluesky Sustainable Business to conduct an impact assessment of its CSR Project – “Disaster Relief- Response to Covid Pandemic” for CSR activities done in 2020-2021.

“Impact” for this assessment is defined as the delta change that occurs because of the CSR Project. The project's impact assessment has been assessed as a high impact based on stakeholder feedback and documentary evidence.

CIL played a critical role in ensuring the speedy delivery of medical equipment and humanitarian relief kits to the frontline workers, community people and local health centres, ensuring access to requisite health and nutritional support for the communities. The CSR Project on COVID-19 relief had a deep, long-lasting impact on the beneficiary communities by sourcing, delivering, and installing critical medical equipment and humanitarian aid.

Based on the proprietary scoring algorithm, Bluesky has assessed the impact of the CIL program with a score of 88 identified with a Platinum category of impact.

The Platinum Category of the CIL CSR project on “Disaster Relief- Response to Covid Pandemic” demonstrates new solutions to issue management and demonstrates an alliance of multi-organizational stakeholder relationships to address the issues in community health interventions.

About CSR Project: Disaster Relief- Response to Covid Pandemic –

The impact of Covid has been largely disruptive in terms of economic activity as well as a loss of human lives. Coromandel undertook this mission of COVID-19 relief through an immediate action towards providing relief kits (Dry rations and Health Kits) to the communities at-risk and also equipped the existing health infrastructure with appropriate medical equipment, oxygen plant and other necessary health support. CIL played a critical role in ensuring speedy delivery of medical equipment and humanitarian relief kits to the frontline workers, community people and local health centres which ensured access to requisite health and nutritional support for the communities. By sourcing, delivering, and installing critical medical equipment and humanitarian aid, the CSR Project on COVID-19 relief had a deep, long-lasting impact on the beneficiary communities.

CSR Expenditures –

A cumulative expenditure of 953.18 Lakhs were spent during FY 2020-21 towards the CSR Project – “Disaster Relief- Response to Covid Pandemic”.

Activity	Sub-Activity	Location	Expenditure (FY 2021-22)
Infrastructure Support	Donation to Govt. Authorities	Andhra Pradesh, Telangana	400 Lakhs
	Installation of Oxygen Plants	Kakinada, Ennore, Ankleshwar, Vizag, Ranipet, Ooty	291.96 Lakhs
	Support to Hospitals for medical equipment	Kakinada, Ennore, Ankleshwar, Vizag	91.82 Lakhs
Essential support	Village disinfection, Food grain distribution, COVID care kits distribution, Covid-19 vaccination support, Livelihood support	Kakinada, Ennore, Ankleshwar, Vizag, Ranipet, Sarigam, Dahej, Hyderabad	125 Lakhs
IBCC sessions	Community Covid awareness sessions	Vizag, Ennore, Ankleshwar	15 Lakhs
	General health awareness	Vizag, Kakinada	29.4 Lakhs

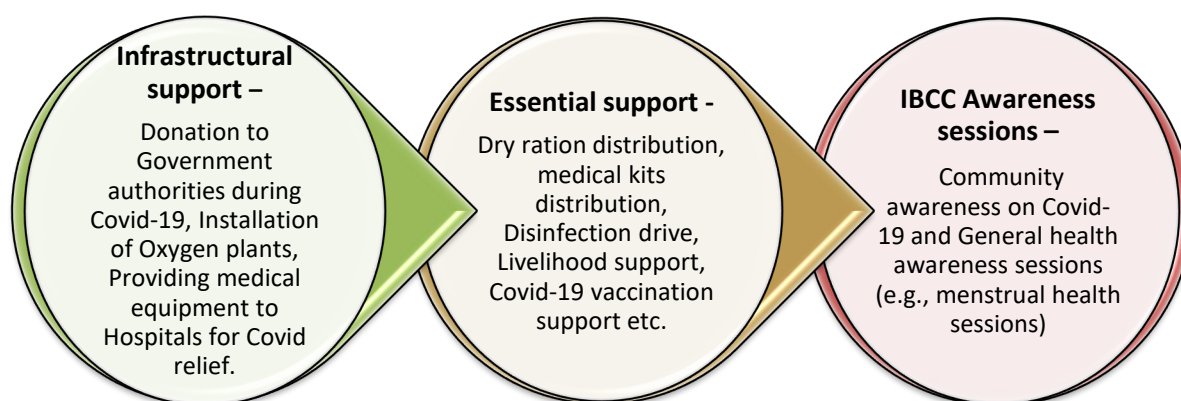
Project Details –

Activity	Brief Summary & Objective	Project Location
Infrastructural Support	<p>The Infrastructural Support was based on providing both immediate and long-term support to the communities during Covid-19. The underlying objective of this intervention was to support the existing health infrastructure catering to the communities at-risk of the disaster.</p> <p>As part of this intervention, CIL installed Oxygen plants in the hospitals and provided Oxygen concentrators and medical equipment to the hospitals for they can provide requisite support to communities at-risk of Covid.</p> <p>This meant that the hospitals were equipped to provide medical support to immediate cases of Covid-19 and other health issues along with building preparedness for future health crisis.</p> <p>One of the immediate outcomes of this initiative was the timely delivery of health kits and medical equipment provided to the frontline workers and hospitals which enabled them to work efficiently with the communities at-risk.</p>	Ankleshwar, Kakinada, Vizag, Kota, Sarigam, Thyagavalli, Ranipet
Essential Support	<p>The primary objective of the Essential support was to extend immediate relief to the communities sd because of the disaster. Distribution of Dry rations & Health Kits, Community disinfection drive, Livelihood support for Mask making to Women SHG Group, Vaccination support, educational support to children in need; were some of the key activities undertaken under the Essential support initiative led by Coromandel. Through this initiative, CIL made up for the shortage of emergency supplies from the Government side. Its timely support ensured people in the communities have their emergency needs met on time and do not rely only on the government for support.</p>	Ankleshwar, Kakinada, Vizag, Kota, Sarigam, Thyagavalli, Ranipet, Ennore, Hospet

	This initiative intended for a short- term outcome for the communities as it started during the pandemic to end with the same.	
IBCC Awareness	<p>The initiative on creating awareness through IBCC sessions was intended for a long-term change in the community. CIL planned regular Behavioral change communication sessions with community people during Covid. Apart from Covid, other health issues were also touched upon like TB, Thyroid, Menstrual Health, Sanitation, Diabetes etc.</p> <p>CIL also partnered with organizations like TB Alert India for conducting IBCC sessions with community people in Vizag. Its multistakeholder approach in leading this initiative resulted in bringing measurable changes in the knowledge, attitudes and practices of community people.</p> <p>The sustainability quotient of the initiative was very well integrated in the program design to support communities through long term solutions.</p>	Ankleshwar, Kakinada, Vizag, Kota, Ennore

Scope of the Impact Assessment –

Key activities covered under the Impact Assessment –



The Geographical Scope of the Impact Assessment covers the Health Interventions conducted by Coromandel in the following locations –

- Kakinada
- Ennore
- Vizag
- Sarigam
- Ankleshwar
- Ranipet
- Kota
- Hospet
- Thyagavalli

The detailed Impact Assessment of the project took place in Kakinada and Vizag.

Duration of CSR Projects - 2020-21

Objective of the Impact Assessment –

- To determine the change experienced by the community due to the Immediate relief work conducted by Coromandel during Covid-19 disaster.
- To understand utilization of health equipment and Covid emergency kits for project beneficiaries - Community people, Health professionals, Local Health centers etc before and after the Coromandel Health interventions.
- To assess Community Preparedness on Future Disasters like Covid-19, and general awareness on different health issues.

Stakeholder interaction –

159 Quantitative surveys along with 7 KIs and 5 FGDs were conducted as part of this project –

- The 150 surveys were conducted with the Beneficiaries of Vizag and Kakinada on community intervention on Essential support categorized mainly into 2 areas – (i) Dry ration kits (ii) Covid care kits and (iii) IBCC sessions.
- The 7 KIs were conducted with representatives of Oxygen plant management, Hospitals who received medical equipment, Government authorities, etc.
- The 5 FGDs were conducted with – Women group engaged in Mask making, Health Workers, Community Beneficiaries who were part of Community interventions covering 3 activities (Dry rations distribution, Covid care kits and IBCC awareness sessions) and the Coromandel CSR Team.

Chapter 2 -

Recognizing Social Responsibility –

Social responsibility involves an understanding of the broader expectations of society, and it is a continuous process. The response to Covid-19 by CIL was an extension of the health projects already conducted by Coromandel with the communities in the past. The health intervention projects is part of CIL's CSR Policy and hence Covid is an addition to larger gamut of health projects.

CIL received multiple requests from the local health centres, hospitals, district administrations, NGOs to partner and support during the Covid-19 situation. Along with these primary evidences to support Covid relief work, CIL's intervention is also validated by the secondary research which provides reasonable grounds for such intervention.

¹ ***Roughly two-thirds of nearly 4000 persons interviewed in India by Hunger Watch reported that the quantity of food that they consumed in October, 2020 had either “decreased somewhat” or “decreased a lot” compared to before lockdown.*** But even these alarming average figures should not mask the even more calamitous impact of the lockdown on socially vulnerable groups such as households headed by single women, households with people having disabilities, transgendered people and old persons without caregivers. *58% of the older people without caregivers, for instance, had to go sleep at night sometimes without a meal. This was the case with 56% of single-women headed households, and 44% of households with persons with disabilities.* Hunger Watch concludes that “the stringent national lockdown and the rising spread of the pandemic has resulted in deep economic distress resulting in a crisis of livelihoods, food and healthcare”. The economic crisis continues and deepens. “People who lost their jobs are yet to find replacements. Work, even where it is available, is even more irregular and for fewer days”.

² **Covid-19 Commission (Indian Task Force)** – provided recommendations to manage India's second wave of Covid-19. These are -

- Address bottlenecks in the pharmaceutical supply chain to end shortages of medical equipments (Oxygenation equipments) and essential drugs (Steroids);
- Invest in medical facilities infrastructure including enhanced ability to transport patients, and overall preparedness especially in tier 2 and 3 cities to cope with high levels of hospitalization; c) In low and medium risk settings, there is need to ramp up Oxygen supply to prepare for future peaks. In medium risk settings, setting up oxygen generating plants within hospital premises at

¹ Survey by Hunger Watch - <https://drive.google.com/file/d/1bpmxHXefEGF0ggZLVHGzTqCh1oc9JSYy/view>

² Publication by Lancet Covid-19 Commission

the district level and creating access to Oxygenation equipments (Oxygen Concentrators and Cylinders), to plan for future surges.

Health Infrastructure need:

- India has approximately 1.9 million hospital beds and about 60% of these are in private hospitals. This translates to just 1.5 beds per 1,000 people. The number of ICU beds stands at 95,000. The availability of ICU beds was far below the demand of approximately 500,000 at the peak of the second wave.
- **According to the clinical guidance for management of adult COVID-19 patients, issued by the Ministry of Health & Family Welfare**, an oxygen concentration less than or equal to 93% on room air required hospital admission, while that below 90% was classified as a severe disease, requiring admission in ICU. Given the dire need for rapid improvements in medical infrastructure in the wake of the 2nd wave, replenishing existing oxygen levels was done at a fast pace with the help of oxygen concentrators.
- **³A report by India Today on May 2021** - While the first wave of COVID-19 took almost ten months to infect over 10 million people in India, the virus took just ten weeks to infect over 11 million during the second wave. It created a daily oxygen demand ten times that of the pre-COVID period.
- **⁴A 2018 study conducted by PATH (Sponsored by Bill & Melinda Gates Foundation)** – *“Market assessment and recommendations to increase access to Oxygen Supply in India”* showed a vital finding –

The total amount of oxygen required to meet the need of the public health system in India is estimated to be almost 700 billion liters of oxygen each year.

³ India Today Report 2021 - (<https://www.indiatoday.in/diu/story/india-oxygen-shortage-boosting-capacity-covid-1801828-2021-05-12>)

⁴ PATH Study on Oxygen need (study sponsored by Bill & Melinda Gates Foundation)

Stakeholder Matrix –

Category of Stakeholder	Details of stakeholder	Activity theme for which the stakeholder is selected	Location	Interest <i>The degree of change experienced. The more serious and significant the impact, the more "interest" in the project</i> (+1, 0, -1)	Accountability <i>The degree to which a stakeholder will be held responsible for their role in the project. The more "accountability" the greater the interest.</i> (+1, 0, -1)	Influence <i>The power to steer projects to success or divert the outcome in unwanted ways. More the strength of the consequence, stronger the influence</i> (+1, 0, -1)	Stakeholder importance
Beneficiary Stakeholders	Community People	Essential Support & Integrated behavioral change communication (IBCC) - Community related Covid intervention (Dry rations, medicines, other essential support)	Kakinada and Vizag	1	0	1	2
Beneficiary Stakeholders	Women Enterprise Group	Essential Support- Livelihood - Mask Making during Covid	Kakinada	1	0	1	2
Beneficiary Stakeholders	Health Workers	Distribution of Health Kits	Kakinada	1	0	1	2
Beneficiary Stakeholders	Govt. Representative	Infrastructural support and Covid relief work	Kakinada & Vizag	1	1	1	3
Beneficiary Stakeholders	Oxygen Plant Management Representative	Infrastructure Support- Installation of Oxygen Plants	Ranipet, Vishakapatnam, Kakinada	1	1	1	3
Beneficiary Stakeholders	Personnel of Government General Hospital, Kakinada	Infrastructure Support- Donation to hospitals (medical equipment)	Kakinada	1	1	1	3

Executing Stakeholders (Management) : Group/individual responsible for managing execution	Coromandel CSR team	Implementation of entire CSR Program	All locations	1	1	1	3
Executing Stakeholders (Participants): Group/individual responsible for project execution	TB Alert	IBCC Awareness sessions	Vizag	1	1	1	3
Oversight Sponsor	Coromandel International	Entire Project Sponsorship	All Locations	1	1	1	3

Mapping CSR Activities to National Laws and Global Standards –

The CSR Project – “Disaster Relief- Response to Covid Pandemic”; very well aligns with the Sec-135 of 'The Companies Act; Sustainable Development Goals and its targets, thereby contributing to the National Development Indicators.

List of alignments are as follows –

Alignment to Sec-135 of ‘The Companies Act 2013’ –


CSR Activity	Alignment to Sec-135, Companies Act
Covid Relief	(xii) Disaster management, including relief, rehabilitation and reconstruction activities, it includes spending of CSR Funds for COVID-19 is eligible CSR activity.

Alignment to ISO 26000 –

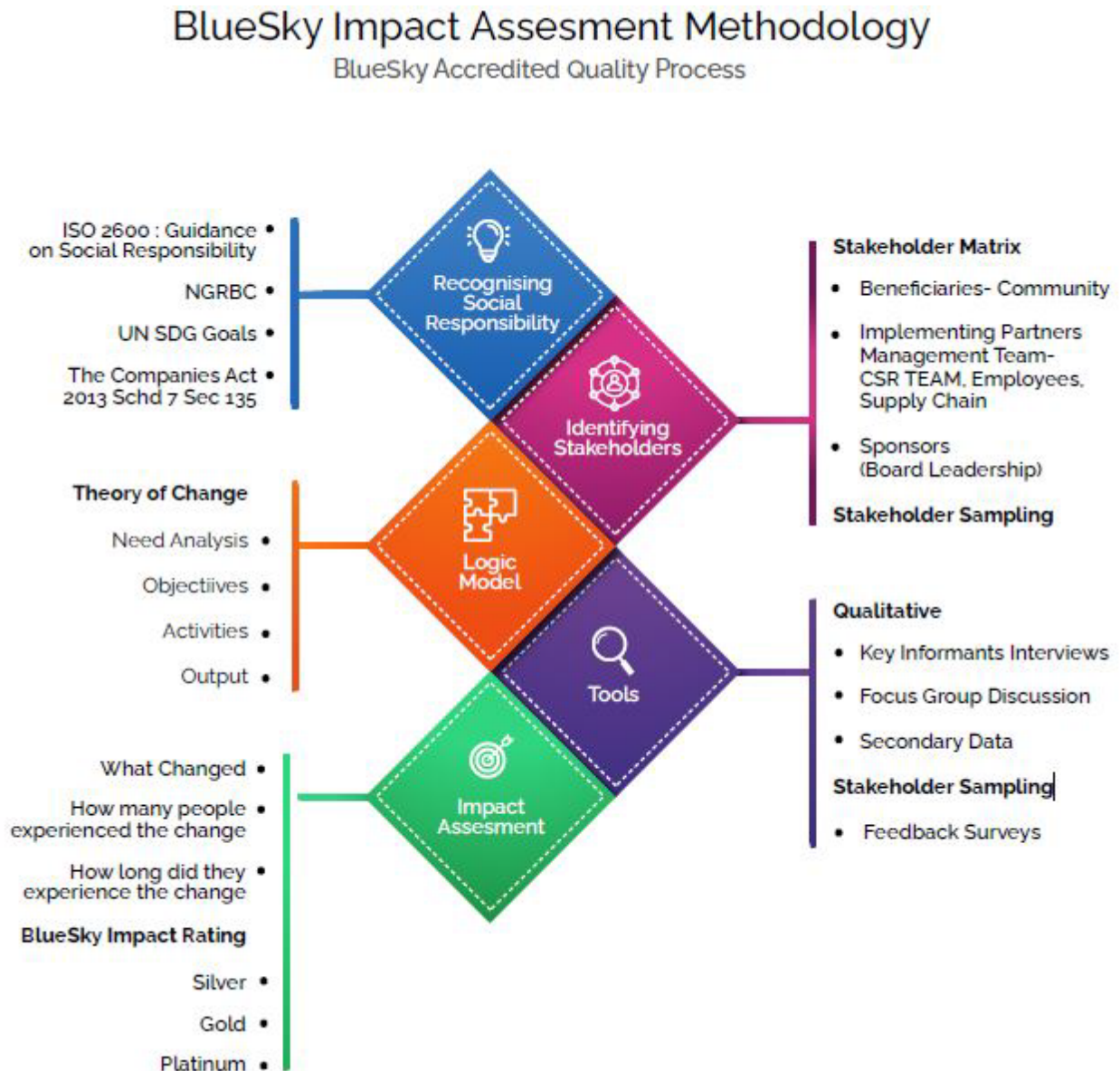
CSR Activity	Core Subject of ISO 26000	Core issue of ISO26000
Covid-Relief	6.8 - Community involvement and development	6.8.8 - Issue 6 : Health (Supporting long-lasting

		and universal access to essential health care services)
<p>As per related actions & expectations suggested in ISO 26000 core subject, Community Involvement & development, threats to public health (as witnessed during the COVID-19 pandemic) can severely impact communities and hamper their development. Thus, all organizations should contribute, within their means and as appropriate, to the promotion of health, to the prevention of health threats and diseases, and to the mitigation of any damage to the community. A healthy community reduces the burden on the public sector and contributes to an excellent economic and social environment for all organizations.</p>		

Alignment to SDGs (*Sustainable Development Goals*) and its pertaining Targets -

CSR Activity	SDG Goals	Targets
Covid-Relief	<p>Goal 3: Ensure healthy lives and promote well-being for all at all ages</p> 	<p>Target 3(d) -</p> <p>Improve early warning systems for global health risks: Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks.</p>

Bluesky Impact Assessment Methodology –



The project activities have been assessed as per the process followed for Planning & Implementation of the program, its monitoring processes of recognizing social responsibility (why the project), and identifying key stakeholders and beneficiaries (who of the project). The activities, outputs, and subsequent outcomes are then verified with available documentary evidence. Qualitative feedback and Quantitative metrics have been collected through interactions and feedback from the key stakeholders and beneficiaries of the program. The data so collected has been triangulated to arrive at the impact of the program.

Chapter 3 –

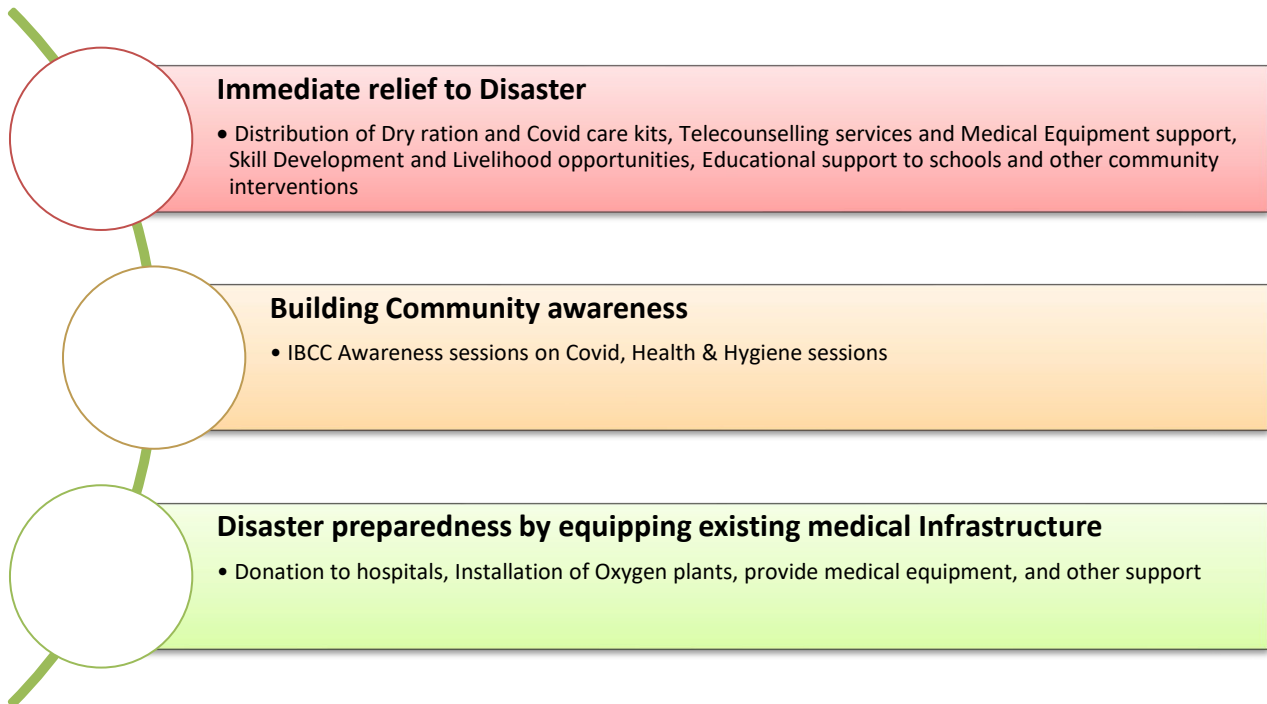
Analysis and Findings –

The analysis and findings of this report is based on the:

- Desk review of the existing data of the project being implemented.
- Stakeholder feedback from key stakeholders of the project – Community Beneficiaries, Health workers, Hospital Representatives, Implementing partners, Government Representatives, Coromandel CSR Team etc.

One of the objectives of the Impact Assessment was to assess the CIL's response to Disaster Management during Covid-19.

Coromandel's strategic response to Covid-19 Disaster could be analyzed under 3 thematic areas



Project Activities, Outputs and Outcomes under each thematic areas –

THEMATIC AREA 1 - IMMEDIATE RELIEF TO DISASTER –

KEY ACTIVITIES –

- Distribution of Dry ration and Covid care kits
- Tele counselling services and medical equipment support
- Skill Development and Livelihood opportunities
- Educational support to schools and other community interventions

KEY OUTPUTS –

Location	Distribution of Dry Ration	Covid Care Kits
Kakinada	<ul style="list-style-type: none"> - Dry rations (10Kgs Rice & 1 kg Dal) distributed to 3300 families from Vakalapudi village at their doorstep. - TUSR donated 6 tons of rice and 600 kgs of pulses to 450 families from Vaslasapakala village - Coromandel ladies club donated Vegetables and rice to 57 single older women from Fishing Harbour Pet - 46 tons of Rice and 8 tons of pulses distributed to 3800 families. A total of 12000 people reached through dry ration distribution in Vakalpudi. 	<ul style="list-style-type: none"> - 169962 face masks and 2100 sanitizers were distributed to frontline workers - Donated 340 PPE kits to GGH superintendent
Vizag	<ul style="list-style-type: none"> - Distributed 5 kgs of rice bags to 100 poor families through TUSR and provided Dry rations & Hygiene kit worth 2000rs. to 186 Covid affected patients in 14 villages - Employee Volunteerism involved distribution of 300 meals for shelter less people and migrant labours; and 500 grocery kits & vegetables in major slums. - Dry rations were distributed to 500 Covid affected families - Provided 10 kgs of rice bag for each and every family and around 7500 families 	<ul style="list-style-type: none"> - 40,000 face masks distributed to Greater Visakhapatnam Municipal Corporation - 65000 face masks & 6000 sanitizers and 20 boxes of gloves, 200 aprons distributed to GVMC Police & surrounding communities. - Distributed 25,000 masks and 5,500 sanitizers to people in 18 villages of Vizag - Distributed 800 sanitizers, masks to MRO, Police, Community organizers and Media - Distributed 1000 COVID protection Kits to 2000 children of 5 communities in Vizag

Ennore	<ul style="list-style-type: none"> - 13750 Rice Bags were distributed in 35 villages (includes 8800 families in 19 CSR intervention villages and 4950 families in 16 unique villages) to 13750 families 	
Ankleshwar	<ul style="list-style-type: none"> - 3000 pieces of Face Masks & PPE kits were donated to the Nagar Palika Ankleshwar - 15000 Covid kits distributed in the 5 focused villages of Ankleshwar 	
Sarigam	<ul style="list-style-type: none"> - Supported 400 Pregnant and Lactating Mothers by providing nutrition kits that consists of 5 KG Wheat flour, 1 KG Rice, 1 KG Toor Dal, 1 KG Cooking oil, 500 gram chana, 1 KG Gud and 1 KG Dates. Total 14 villages in Valsad district were covered under this program 	<ul style="list-style-type: none"> - Covid kits worth 11 Lakhs was distributed to colleges and school students thereby covering 7896 students - 1000 Covid Care kits were distributed to District Health Officer under the campaign "My Village Corona Free Village" as per the request of local MLA and District Health officer.
Kota	<ul style="list-style-type: none"> - Dry ration (1kg Atta, 1 kg rice, 250gm Pulses, 250ml edible oil) distributed to 100 poor families at Japura village, Rajasthan 	<ul style="list-style-type: none"> - 40 Hand-sanitizer (1.5 ltr each) and 200 Face masks were distributed to 4 Police check-posts near Coromandel factory area in Kota - Face masks worth 42,000 Rs. were distributed at Hanuman mandir, Cable Nagar, Kota
Ranipet	<ul style="list-style-type: none"> - Dry Ration (Worth Rs. 1000/- per kit) (like Rice, lentil dhal, urad dhal, ground nut oil, chana dhal and soap etc.) were distributed to 400 families around Karai village, 70 families around Navalpur village and 30 families around Punganur Village 	<ul style="list-style-type: none"> - Provided 5000 pieces Face Mask, 250 pairs of gloves and 20 ltr of Sanitizer to Ranipet Police station
Hospet	<ul style="list-style-type: none"> - 1000 units of Dry Ration kits were distributed to 3000 community people during Covid-19 lockdown - 500 packets of Dry Ration were provided to District Collector's office for redistribution amongst community people 	
Thyagavalli	<ul style="list-style-type: none"> - Distribution of Dry rations (Rice bags) to 5500 families covering 21000 people in 2 villages during lockdown 	<ul style="list-style-type: none"> - Sponsored Covid kits for 5500 families in 5 communities covering 21000 people

Location	Tele counselling services and medical equipment support
Ankleshwar	Donated 1 ventilator & 1 Bipap machine to ESIC Covid hospital, Ankleshwar
Vizag	<ul style="list-style-type: none"> - Medical equipment (Pulse oximeter, Thermometer, BP Apparatus) worth 20 Lakhs were donated to the District Collectorate, Vizag - Telephonic counseling services aimed to provide psychological support to CMC patients especially Comorbidities rendered to more than 1230 people through 3246 Telephonic counselling sessions
Kakinada	<ul style="list-style-type: none"> - Renovation of new Covid ward in partnership with Government General Hospital (GGH), Kakinada which benefitted a total of 342 people from both RICU (12 Beds) and SICU (20 Beds) wards at GGH. - Medical equipment including (30 GI beds with mattresses, 1 Digital Radiography machine, 8 HFNC Machines, 5 Multipara monitors, 2 Air conditioners) were donated to GGH, Kakinada - Tele-counselling sessions were conducted with 1862 patients out of which 214 patients were identified with Covid symptoms and referred for further treatment and 112 patients were referred for testing
Kota	<ul style="list-style-type: none"> - 10 oxygen cylinders were donated (47 ltr. each) to Govt. Medical college-Kota based on the request of District Administration - Medical equipment including (20 Pulse oximeter, 20 Thermal scanners, 8 BP Machines and 100 Face shield) were donated to Community health centre (CHC), Mandana
Ranipet	<ul style="list-style-type: none"> - 5 Oxygen concentrators were donated to Govt. Headquarters hospital, Ranipet - 10 Disinfectant Sprayer provided to Ranipet Municipality commissioner towards Covid Prevention
Sarigam	- 40 Lakhs Direct Donation to Valsad Collector in CM Cares
Thyagavalli	<ul style="list-style-type: none"> - Sponsored Vehicle to Health department for two months in 1 village - Sponsored Printer, Ceiling Fans, Chairs & Benches, Pulse Oximeter, Nose mask, Infrared Thermometer, hand sanitizers & Sanitizer stands to Primary Health Centre, Thiruchopuram - Sponsored Oxygen Concentrator to Cuddalore District Government Hospital

Location	Skill Development & Livelihood	Other community initiatives	Educational Support
Ankleshwar	60 students participated in the Skill development program in AOCP & Electrical Trade for the youths of 5 focused villages Nava Diva aimed at enhancing the adoption of formal training and creating a formal market opportunity harnessing the industry traction	<ul style="list-style-type: none"> - 3000+ people from vulnerable community i.e. senior citizen, pregnant women, disabled people from the 5 villages got vaccinated as part of the Vaccination Drive in Ankleshwar. - 50+ differently abled (Male and Female Senior Citizen) people in Nava Diva village were given Covid-19 vaccine in the vaccination drive led by CMC Nava diva, Ankleshwar, Gujarat. - 22 Pregnant Women underwent Health Check-up organized by Coromandel at Medical Sub Centre Matiyed 	<ul style="list-style-type: none"> - 230 Girls from 63 Government schools were awarded "Girl child education merit scholarships" in a virtual event. - 122 Students of Standard 6th to 8th participated in awareness program on Posco (The Protection of Children from Sexual Offences Act), Traffic Rules, Good touch Bad touch at the Government School, Nava diva Village with the help of Police Department of Ankleshwar - Provided 1 teacher to Govt school, Nava diva for 2 months - Drinking water facility provided in Government Secondary School Nava diva village
Kakinada	NA	- Disinfestation drive carried out in Vakalapudi village near Coromandel, Kakinada to disinfect public places, community spaces, toilets, shops, halls etc.	NA

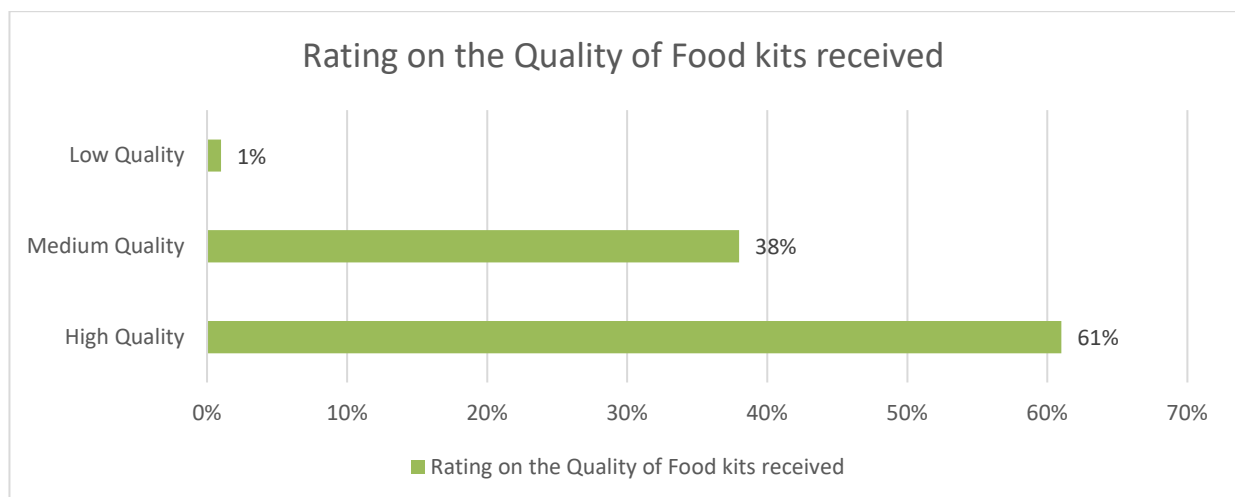
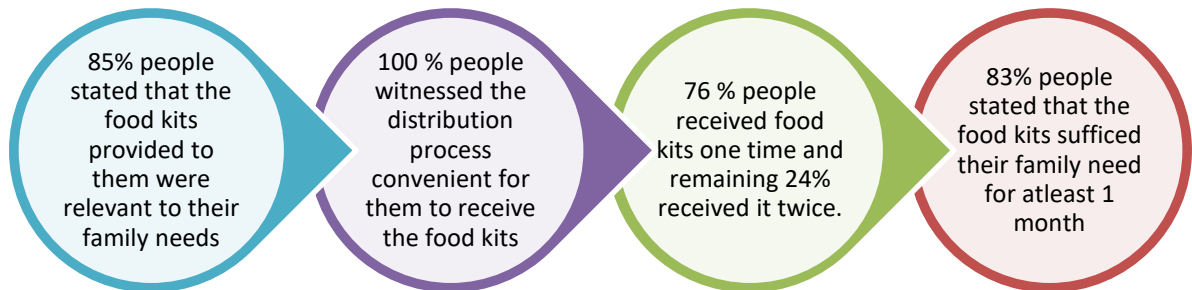
Vizag	<ul style="list-style-type: none"> - 5 Community women were engaged in making face masks. - 2200 masks were made and sold at 15rs per mask thereby ensuring scope for livelihood creation 	<ul style="list-style-type: none"> - Hypochlorite disinfectant drive done in 16 villages of neighborhood streets - Sterifume and Fogging was done in 21 surrounding villages and police station thereby reaching out to 8500 families. - 38 Chronic illness patients like DM/HTN/HLP/HYPOTHYROID received CMC Pharmacy services - Fogging was done in Gullapalem covering 5000 people to prevent cases of dengue. 	<ul style="list-style-type: none"> - 58 students who secured 8+CGPA in secondary examination were awarded a merit certificate and Rs. 2000 card - CIL provided 100 cloth masks, one Infrared Thermometer, 20 kgs of bleaching powder, 1 COVID Display board to Sriharipuram Primary school - 30 children from Primary school at Mulagada Sriharipuram underwent screening for Covid-19
Ranipet	NA	500 pieces reflector jackets and 100 units of Traffic Barricades were provided to Ranipet Police department for safety	NA
Kota	NA	Disinfestation drive with Sodium Hypochloride was carried out in 6 villages ((Jagpura, Cable Nagar, Kalam ka kua, Alaniya, Vijayapura & Dev Kui) where most of the contract workers of the factory resides	Medical equipment including (Pulse oximeter, Thermometers, and BP Machines) were donated to Govt Sr. Secondary School Balakund
Hospet	- NA	500 Blanket pieces were distributed to DC Koppal and 500 Blankets were provided to District Health Officer, Koppal	- NA
Sarigam	- 60 youths were trained for a period of 55 days in the electrician trade	A token of 2 lakhs was provided to Sarigam Industry Association towards prevention of Covid-19	School enrichment and learning program - Adaptation to Covid-19 - responding to the educational needs of children

KEY OUTCOMES AND IMPACT –

Distribution of Dry ration kits –

The nutritional support was based on addressing the immediate need of the communities affected due to the pandemic. The intended outcome of this initiative was short term. It was a humanitarian relief work wherein huge supplies of covid kits, dry ration supplies, and other essential hygiene kits were provided.

During the survey conducted with 159 community beneficiaries from Kakinada and Vizag, the following observations were made –



During the FGD with Community Beneficiaries from Kakinada and Vizag, the following outcome specific observations were made –

- **Utilization of Food Kits** – Women from the poor background used the ration kits judiciously which lasted for more than 2 months, as they didn't have any other source of food due to no daily wage income. Dependency on daily wage work got derailed because of Covid due to which they were only dependent on Food kits distributed by Coromandel and the Government. Since the government relief work was delayed, CIL in that urgency period provided timely help to the communities.
- **Efficiency & Fairness of Distribution** - The community beneficiaries stated that the ration kits provided by CIL was on time when it was needed the most whereas other support mechanisms like the government was overburdened which delayed the relief work for communities. The dry rations were distributed to all the people in the village without any partiality as there was no selection criteria for food distribution. The food kits were distributed 3 times in the villages and every time there would be different ration items which became highly useful for the people.

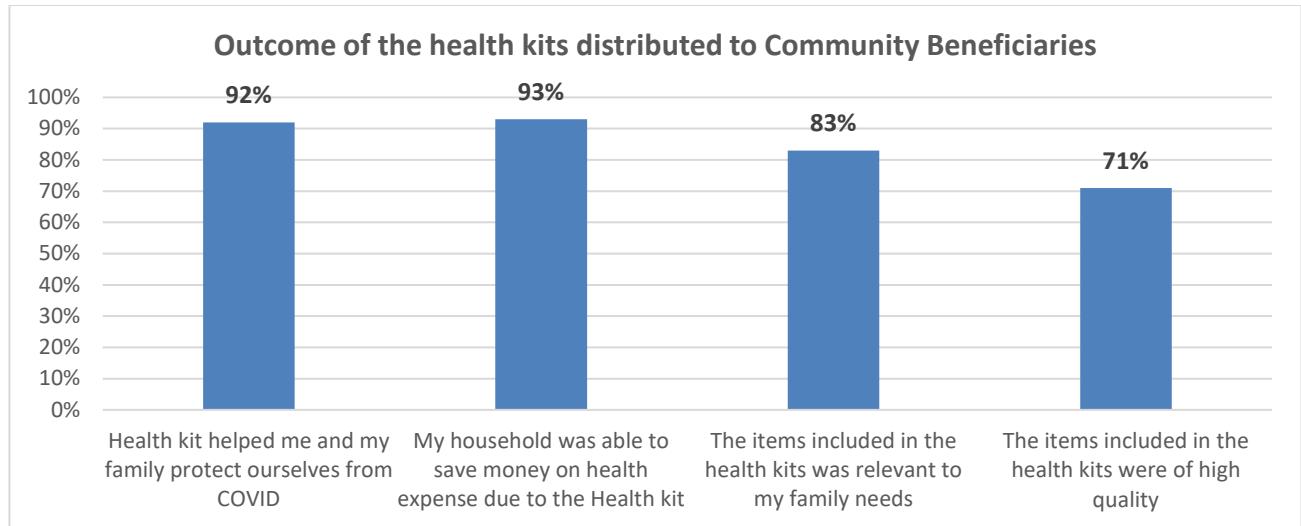
Tele counselling services & Medical Equipment support (including covid care kits) –

Coromandel played an integral role in providing the health care equipment and covid care kits to the health workers, frontline workers, and hospitals in the times it was needed the most.

The timely delivery of the equipment and health kits made up for the shortage which government mechanism was facing when the spread of covid was at its highest. This also demonstrates the partnership and collaborative nature of CIL's intervention wherein it came forward to support government's efforts towards disaster relief.



Survey Feedback from 159 beneficiaries from Vizag and Kakinada –



The Impact of providing medical equipment and covid care kits are:

- Timely delivery of medical equipment and Covid care kits ensured safety of frontline workers to work fearlessly with the community.
- It protected the spread of covid in the community thus reducing medical cost and risk.

During the FGD with Health workers from Sachivalayam, Vakalpudi, all the group members gave the highest rating of 5, in terms of the usefulness of Coromandel's Covid response.

"As frontline workers, we lead a threatened life during both the Covid waves and people used to fear seeing us. We were supposed to visit COVID infected houses for the follow up and report to the Government. There were no sufficient masks or other equipment for the health workers, and we used to receive a lot of calls from the community for help.

CIL contributed N95 masks to all the frontline workers, and medical kits, which was very much useful to us. In those days, N95 masks were in demand as well costly too. But, CIL supplied those to us, which allowed us to efficiently work with the community"



" As part of immediate relief, CIL has provided medical kit to the families which were great contribution at that point time, because Government was unable to supply the masks, sanitizers & medicines.

While in the lock down, the food kit distributed to the families was very much useful and there was no work for the people. Food kit was much supported activity from CIL that was much appreciated by the community." –

Mr Pandurangarao – Government Representative, Vakulapadu, Kakinada

During the KII with Hospital Representative from GGH Kakinada, when asked to rate on a scale of 1-5 (1 -lowest, 5-highest); in terms of the usefulness of medical equipment in addressing the patient needs during the Covid times, the representative gave a rating of 5.

" The major challenge that was faced during the pandemic, where most of the patients' faced problem was in respiration which led to many deaths as we did not have appropriate equipment. CIL coordinated with the hospital to provide the appropriate support during COVID situation. They helped us with HFNC and Multipara Monitors, which saved many lives during COVID and even now, they are well utilized in the ICU"



"CIL coordinated with every volunteer to create awareness in the region and they started with providing N95 masks & regular masks to the front-line workers even before Government supply, which was highly useful. Later on they even provided medical kits to the households based on our list of beneficiaries, which covered almost all the households in the community" –

Mr Ravikiran Bhupathy – Ward Admin Secretary, Govt Representative, Vizag



Educational support to schools –

One of the key outcomes of the Learning Enrichment program in Sarigam was to create access to offline teaching for students in Sarigam due to lack of availability of online medium of education. This was done by launching the Learning enrichment program wherein 3 high schools from the nearby places were selected on the basis of their inability to provide teaching support to students. CIL provided 3 teachers in these 4 schools to cover subjects like Mathematics, Science and English Grammar. **This support created access to teaching support for 1139 students in 3 schools.**

It also had an impact on their academic output in terms of qualifying the board exams post CIL's teaching support in the 3 schools –

School Name	Academic Year 2022		2022	2020	2019	2018	2017
	Total Students Appeared for Board Exam	No of Students passed					
IP OZA High School	63	50	79.36%	27.77%	35%	17.07%	25%
Swami Vivekanad High School	265	187	70.57%	64.84%	51.19%	71.12%	74.45%
Eklara High School	109	65	65.18%	60.65%	66.97%	67.50%	68.24%
Total/ Average Percentage	437	302	69.10%	51.09%	51.05%	51.90%	55.90%
Gujarat Board Result			65.18%	60.64%	66.97%	67.50%	68.24%

THEMATIC AREA 2 – BUILDING COMMUNITY AWARENESS –

KEY ACTIVITIES –

- IBCC Awareness sessions on Covid
- Health & Hygiene sessions

KEY OUTPUTS –

Location	IBCC Awareness sessions
Ankleshwar	- BCC program in five villages conducted with the help of Help Age India-NGO in Ankleshwar

Vizag	<ul style="list-style-type: none"> - 661 sessions were conducted through 520 house visits by Health workers reaching out to 1484 peoples - A Comprehensive Health Intervention Program in partnership with TB Alert India was launched implemented in 10 select villages of Vishakhapatnam city, the surrounding areas of Coromandel International company ltd
Sarigam	<ul style="list-style-type: none"> - Conducted awareness campaigns in 14 villages of Valsad District through Mobile Medical Vans during the peak pandemic period of June to December 2020. The demonstration was done on Hand washing, maintaining distance etc.
Kakinada	<ul style="list-style-type: none"> - 3200 Families were reached out through 70 sessions by Gram volunteers to create awareness on Covid-19 in surrounding villages of Vakalapudi and Valasapakala - 165 awareness sessions were conducted in total on Handwashing, Covid awareness, Plasma donation etc.
Kota	<ul style="list-style-type: none"> - Covid-19 awareness campaign was led through PA System in four villages (Jagpura, Cable Nagar, Kalam ka kua & Koyla Talai) where most of the Coromandel factory manpower resides - Wall Paintings worth 52,200Rs were done in 10 different locations to create awareness on precautionary measures on Covid-19 in co-ordination of CHC, Mandana
Ennore	<ul style="list-style-type: none"> - Interpersonal communication sessions were organized with community people in 11 villages of fishermen habitations in Ennore by 11 CPs (Community professionals)

KEY OUTPUTS FROM THE IBCC WITH TB ALERT –

The IBCC Awareness activity took a special focus in Vizag wherein CIL in partnership with TB Alert India, undertook a Comprehensive Health Intervention program aimed at building the communities to fight against TB, COVID 19, seasonal diseases, antenatal care and other non-communicable diseases such as Diabetes and Hypertension.

The package of services included sensitizing the communities on these diseases while addressing the myths & misconceptions associated and refer and test symptomatic individuals and ensure treatment completion as per the guidelines. This project focused on KABP model to understand the knowledge, attitude, behavior and practice of the people in communities on the key indicators of aforesaid diseases.

- 2 trained Community Health workers under the supervision of a Project Coordinator conducted home visits of **2900 families with an average family size of 4 members** with health information and education. This included the diseases such as diabetes, hypertension, Tuberculosis, COVID 19 and Ante Natal Care. During the project period, **all these families were visited 3 times by the project staff reaching to a total of around 34800 visits to people of the families.** (Each member of the family has received 3 interactive sessions by the project staff).

- Around **959 group sessions** were conducted with homogeneous groups i.e. female adult, male adult, and adolescent girls etc., thereby **reaching out to 2877 people** with health education. The flip charts were used during the sessions to emphasize on the key health messaging and pamphlets were distributed to the participants.
- **9 demo sessions** were conducted in the communities and school premises thereby **reaching out to 1307 people** with demo classes emphasizing on the importance of regular hand washing.
- In total **18 awareness sessions** on menstrual health, maternal and child health, **21 sessions** on hypertension, Diabetes Mellites and nutrition, **9 sessions** on TB and COVID 19 were held. Similarly, **28 sessions** with adolescent girls' groups and high school students on Good Touch & Bad touch were undertaken. A total of **3051 people** with an average of 35 to 40 people participated in each awareness session.

KEY OUTCOMES AND IMPACT –

The initiative on creating awareness through IBCC sessions was to help the community by setting up awareness programs to address its preparedness for future pandemics - a long-term change in the community. The first and second wave of the pandemic took a heavy toll on the communities especially rural areas. It revealed the unorganized and disbalanced nature of the existing health infrastructure which was unprepared for the pandemic situation like Covid.



IBCC objective was to take the message of the vaccination plan and Covid-19 appropriate behavior to the community. Curbing misinformation and rumors surrounding vaccines.

CIL also partnered with organizations like TB Alert India for conducting IBCC sessions with community people in Vizag. The multistakeholder approach in leading this initiative resulted in bringing measurable changes in the knowledge, attitudes and practices of community people.

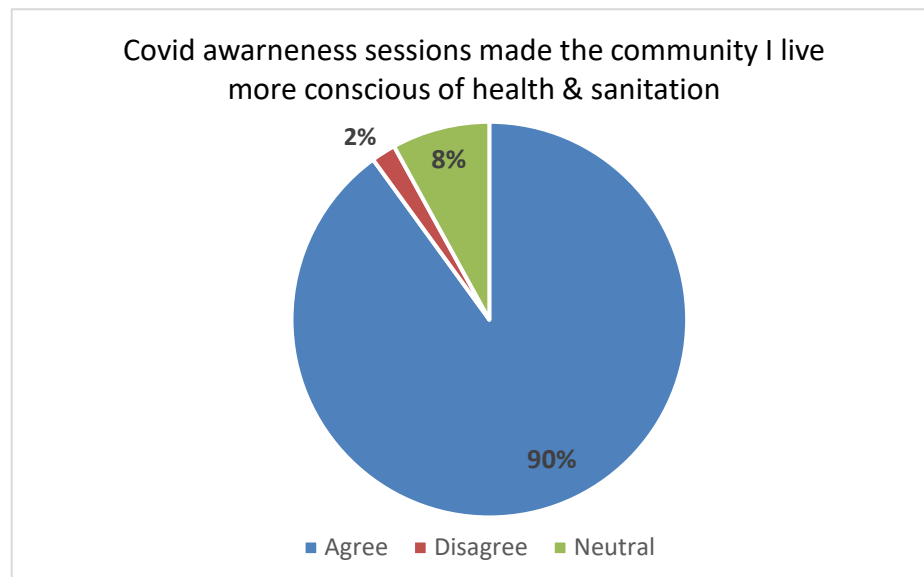
Improved hygiene behavior among the community helped to reduce the incidence of Covid-19 and pool community and other resources for establishing a pandemic-free village. Also, awareness on importance of menstrual hygiene management intended to use Sanitary Napkins, to ensure MHM friendly environment was also imparted.



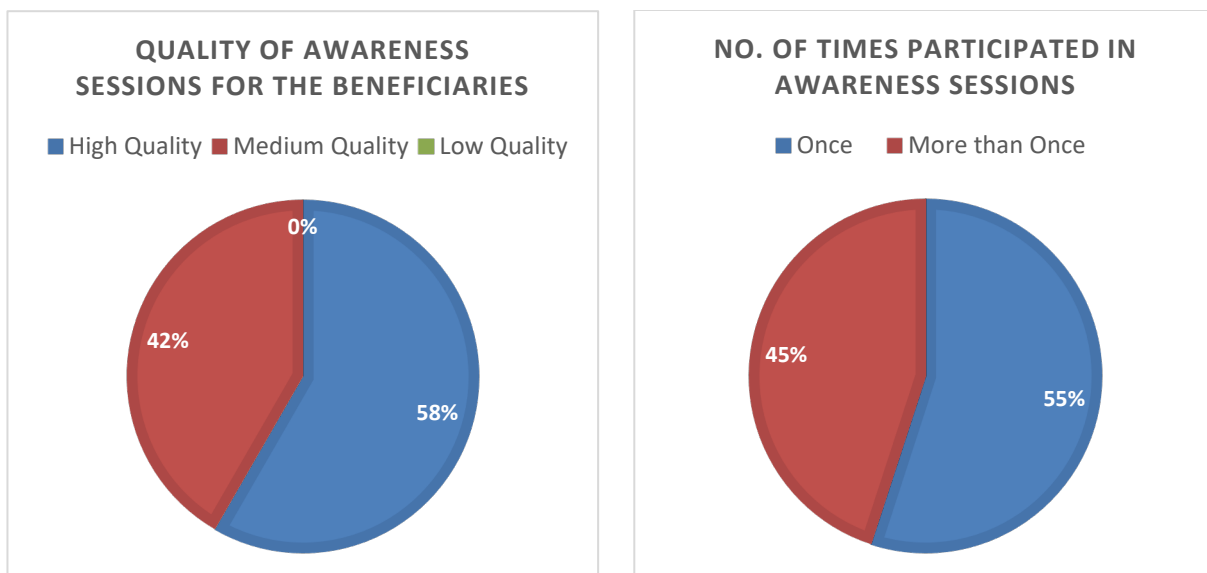
The sustainability quotient of the initiative was very well integrated in the program design to support communities through long term solutions.

During the survey with 159 community beneficiaries from Vizag and Kakinada –

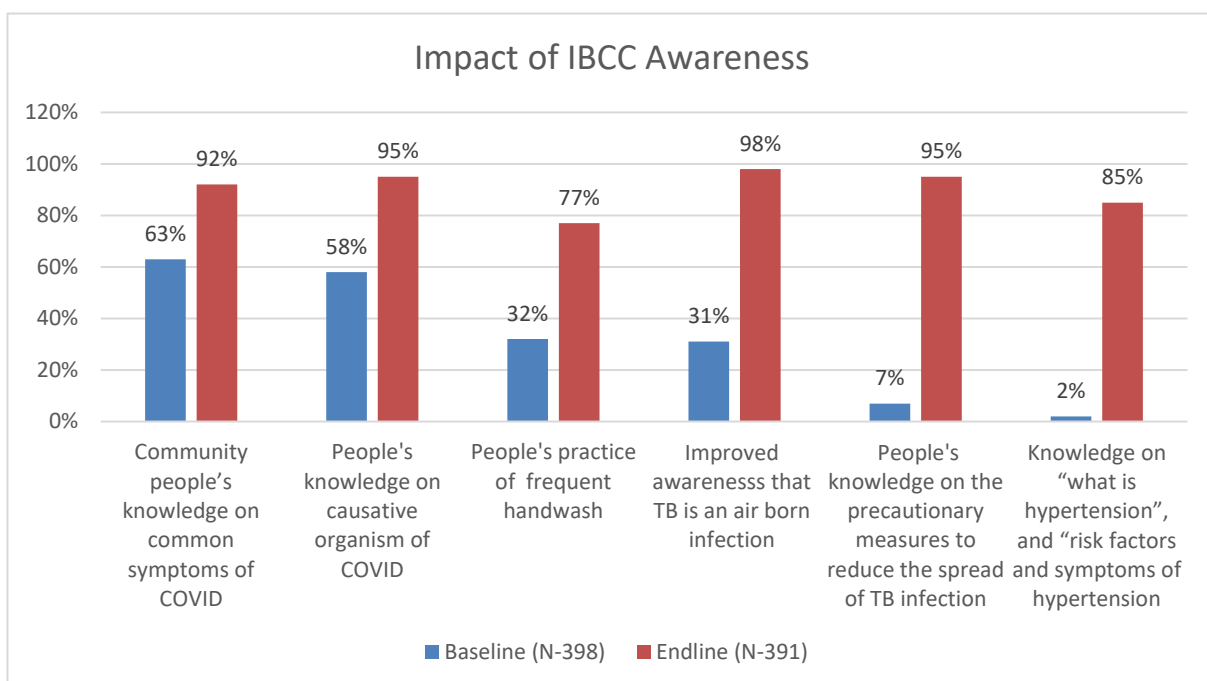
- 90% people agreed that the IBCC Awareness sessions conducted on Covid-19 made the community more conscious of health and sanitation.



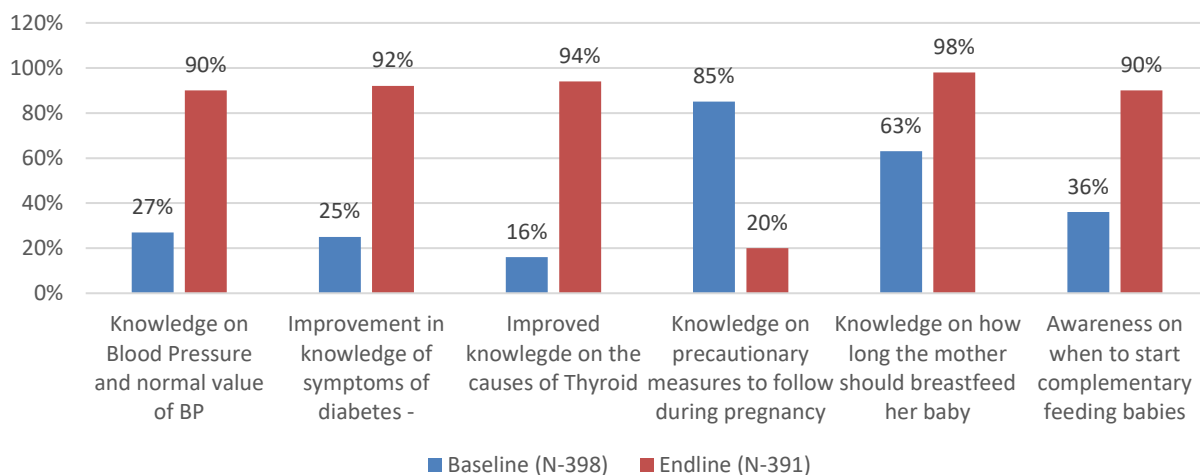
- More than 58% people rated the quality of awareness sessions as High.
- 45% people participated in the sessions more than once whereas 55% people participated once.



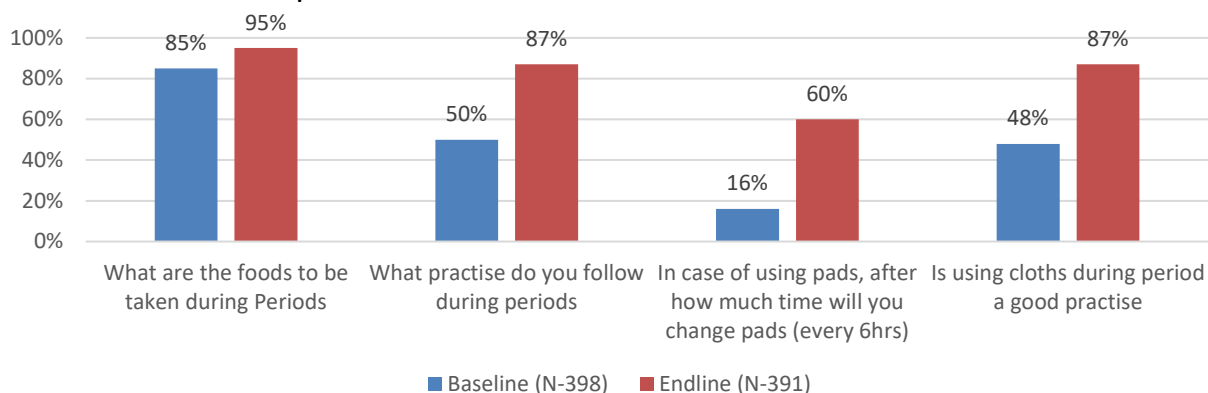
The long-term impact of the IBCC Awareness sessions can be categorized as follows –



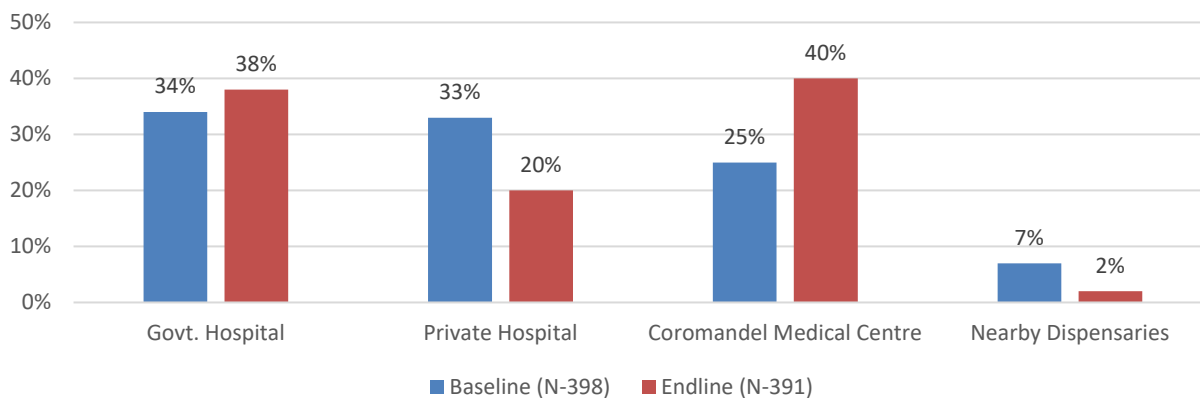
Impact of IBCC Awareness



Impact of IBCC on Menstrual Health Awareness



PEOPLE'S CHOICE OF VISITING HEALTH FACILITY FOR THEIR HEALTH PROBLEMS

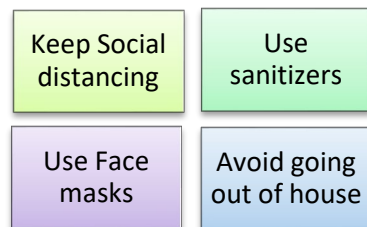


The highlights from the above graphs are as follows –

- 95% of the adolescent girls and women are aware of the nutrition required during menstrual days compared to 85% in baseline.
- 87% of the respondents are using disposal pads and are aware of its safety compared to 50% in the baseline.
- 87% of the respondents said that using cloth during periods is not a good practice compared to 48% in baseline.
- Similarly, 60% of the respondents are aware that the pad needs to be changed every 6 hours.

This was mere 16% in baseline.

During the FGD with 15 Community Beneficiaries of Yeduruvanipalem Village, Visakhapatnam and 13 beneficiaries from Vakalapudi, Kakinada, the key communication messages received by the beneficiaries during the Covid Awareness sessions are as follows –



"Keep Social distancing was the most important thing we learned from the Awareness sessions during the Pandemic. As few of the families would travel and mingle in the market, which lead to infection and we thought how it could affect when we mingle, but it infected few families."

"Only after the CIL conducted awareness sessions and chlorinating the village; it made the families aware of the pandemic situation. The entire community started following the Covid instructions and became very strict"

"Good awareness programs were conducted by CIL and the information was easily understood because of the "skits" and initially, we thought it was common infection, later we came to the seriousness of the pandemic. Community started to follow the rules strictly and the health workers of CIL constantly visited the community and supported wherever there is need in the family, like arranging ambulances & referrals to the hospital"

One of the most important outcomes of the Covid Awareness sessions implemented by CIL was that community women who were part of the awareness sessions would force the male members of their house to wear masks whenever they go out of the house. **During the FGD with Community women from Kakinada and Vizag,** it was found that men were reluctant and didn't follow Covid protocols properly which increased the risk of infection spread. Since women attended community awareness sessions and also witnessed deaths in the community due to spread of virus, they would force their family members to follow Covid norms properly.



THEMATIC AREA 3 - Disaster preparedness by equipping existing medical Infrastructure

KEY ACTIVITIES –

- Installation of Oxygen Plants
- Providing to Medical equipment like Oxygen cylinders

KEY OUTPUTS –

Location	Installation of Oxygen Plants & Oxygen Cylinders
- Ankleshwar	- A 200 LPM Capacity Oxygen Generator Plant donated to Smt. Jayaben Mody Hospital-Ankleshwar for the Preparedness of the Covid-19 3rd Wave.
Vizag	- Establishment of a 200 LPM Capacity Oxygen Generator Plant at RCD (Ranichandramani Devi Government) Hospital, Andhra Medical college.
- Kakinada	- A 200 LPM Capacity Oxygen Generator Plant donated to Community Health Centre, Prathipadu, near Kakinada
- Kota	- 10 oxygen cylinders were donated (47 ltr. each) to Govt. Medical college-Kota based on the request of District Administration
- Ranipet	- A 200 LPM Capacity Oxygen Generator Plant installed at Govt. Headquarters hospital, Ranipet

KEY OUTCOMES AND IMPACT –

The Infrastructural Support was based on providing both immediate and long-term support to the communities during Covid-19. The underlying objective of this intervention was to support the existing health infrastructure catering to the communities at-risk of the disaster.

CIL installed Oxygen plants in the hospitals and provided Oxygen concentrators and medical equipment to the hospitals so that they can provide requisite support to communities at-risk of Covid as well as help communities become resilient in the face of new variants.

Although the Installation of Oxygen plants was done in preparation for the third wave of Covid-19. But it had an immediate use post installation during the second wave as the government supply of oxygen was not sufficient to meet the urgent needs of oxygenation.



During one of the interviews with the Oxygen Plant Management representative, Prathipadu, Urban Health Centre, it was found that the hospital was catering to 15 villages and there were around 10-15 covid cases everyday which was the biggest challenge for the hospital.

Timely installation of the Oxygen plant by CIL with complete set up at each bed addressed the immediate need.

Kakinada

- The 200 LPM Oxygen generator plant installed at CHC, Prathipadu has enabled Hospital staff to convert one more ward as Covid-19 ward with 20 More beds.
- About 2 lakh population are utilizing the services of CHC, Prathipadu from 6 Mandals namely Prathipadu, Kirlampudi, Jaggampeta, Gollaprolu, Shankavaram and Yeleswaram of East Godavari District

Ankleshwar

- A 200 LPM Capacity Oxygen Generator Plant installed at Smt. Jayaben Mody Hospital-Ankleshwar for the Preparedness of the Covid-19 3rd Wave
- 696 patients were treated with the installed Oxygen Plant

Vizag

- A 200 LPM capacity Oxygen Generator Plant installed at RCD (Ranichandramani Devi Government) Hospital, Andhra Medical college
- The oxygen generator plant would serve the purpose of the Children Multi Speciality hospital.

Ranipet

- A 200 LPM Capacity Oxygen Generator Plant installed at Govt Headquarters hospital, Ranipet
- 50 additional beds and Dialysis unit will be served oxygen from this new oxygen generator plant

Installation of Oxygen Plants –



"CIL's contribution of Oxygen plant was very much useful although they donated the same at the end of the second wave. Even then the purpose was fulfilled at that time and now, the Oxygen plant is useful to Post Operative Ward and in Operation theatre. We all know that this hospital is the only one in the entire combined AP state serving the children with disabilities. So, the donation never went waste and serving the purpose to the children in need."

Oxygen Plant Managment
Representative, RCD Hospital,
Visakhapatnam

"The oxygen plant support has helped us to save the patients and our hospital has become popular at that time. The equipment was in good condition and even the Government recognized the Oxygen plant by including the plant under "Jaganannna prana vayuvu". Technician is available at the hospital and takes care of the plant"

Oxygen Plant Managment
Representative, Prathipadu,
Kakinada

"During the second wave, the oxygen plant provided by the Coromandel was used for more than 900 patients, as there were 300 beds which was full all the time. The peak time of the utilization was May to September"

Oxygen Plant Managment
Representative, Walajahpeta
District HQ Hospital (Ranipet)

Chapter 4 –

Case Study 1 -

Women SHG Group, Valasapaka Village, Kakinada District

The SHG group of 25 women were engaged in face-mask making. They started the unit during the first phase of Covid lockdown in order to support their family income. The families of these women worked as daily wage workers, in small enterprises and few in transport jobs; all of which got shut during the pandemic. Due to this, there was no earning in the family. The group members then decided to stitch face masks as it would fetch good demand during the Covid situation but they didn't know how and where to sell these masks. It is then the SHG group leader reached out to CIL for their support. Coromandel welcomed the idea and immediately provided the women with sewing machines.



The support from Coromandel ensured livelihood opportunities for the women even during the pandemic as CIL provided them with the first order of 18000 Face masks. The order size was huge which engaged the women for long. Each member of the 25member unit earned 25000 Rs. in 4 months, which was a great enabler and support during the times as there was no livelihood opportunities for women and their families.



The entire SHG group of 25 members made combined earnings of 6.25 Lakhs during the 4 months period.

The inspiration and support provided by CIL to Women SHG group increased their confidence which encouraged them to explore the market to identify more products that could be made from their tailoring unit. One such product is “cloth bags” used in shopping. The women approached big establishments like D-Mart, Reliance etc for orders which are under process.

The group received an order from the Telangana Government to provide sample bags. Meanwhile, the unit also designed innovative shopping bags to gain traction for their products. Apart from that, SHG group leaders are also trying to rope Government orders for stitching school dresses and other items that could be made in the unit.

It was a synergetic effort made by Coromandel where they integrated the livelihood opportunities of Women SHG group with the need for face masks distribution during the pandemic. This symbiotic relationship established by CIL was a smart move wherein it ensured livelihood opportunities for women who had no work during Covid by providing them orders to stitch face masks which can then be used in their Covid relief work.

Case Study 2 –

BHARATHI (Community beneficiary, Yedurivanipalem village, Visakhapatnam)

Bharathi is a resident of Yedurivanipalem village in Visakhapatnam and her husband is an Auto Driver, with a minimum income to the family. During both the first and second wave of Covid, the family got stuck at home and there was no work for them available. Except Bharti, all her children, husband got infected with Covid. Her one-year-old child became really serious due to infection. They were only dependent on daily wages and it was a horrible situation wherein they didn't have access to basic necessities and Covid infecting all the family members took a heavy toll.

It is then CIL intervened with Dry ration & Medical kits distribution.

Bharti says – “I don't know about others; but CIL supported my family at the right time with dry rations which helped my family the most as we were able to manage for one month with those groceries. They even gave us vegetables and other items like dal & sugar in the consecutive support. The medical kit was highly useful to all the infected members in my family and CIL even referred my family members to the hospital for follow up. CIL is really God to us”. I also came to know from the community people that CIL provided similar support to all the families and no other company in the region supported with such activity.



Now, after COVID, I realized about the importance of “Savings” for difficult times and hence I also wish to contribute financially to my family income. So, I decided to take up skill training in “tailoring & embroidery”, provided by CIL in our community and I am confident about CIL, that it will support our women in livelihoods. This will certainly improve our family income, which will enable us to support our children with better education.

Annexure –

CSR Expenditure List –

Activity	Sub-Activity	Locations	Expenditure (FY 2021-22) INR in Lakhs	Total (FY 2021-22) INR in Lakhs
Infrastructure Support	Donation to Govt. Authorities	AP, Telagana, TN	400	400
	Installation of Oxygen Plants	Prathipadu (near Kakinada)	51	
	Installation of Oxygen Plants	Visakhapatnam	51	
	Installation of Oxygen Plants	Ankaleshwar	49	
	Installation of Oxygen Plants	Ranipet	49	
	Installation of Oxygen Plants	Ooty	20	
	Installation of Oxygen Plants	Ooty	20	
	Installation of Oxygen Plants	Ennore	51.96	291.96
	Support to Hospitals for medical equipment	Kakinada	67	
	Support to Hospitals for medical equipment	Ennore	2.82	
	Support to Hospitals for medical equipment	Vizag	20	
	Support to Hospitals for medical equipment	Ankleshwar	2	
Essential support	Village disinfection	Sarigam	2	
	Village disinfection	Vizag	2	
	Village disinfection	Kakinada	1	
	Food grain Distribution	Vizag	20	
	Food grain Distribution	Kakinada	12.5	
	Food grain Distribution	Ankleshwar	3	
	Food grain Distribution	Dahej	3	
	Food grain Distribution	Ennore	40	
	Food grain Distribution	Hyderabad	2.5	
	Covid Care kits distribution	Vizag	4	
	Covid Care kits distribution	Kakinada	2	
	Covid Care kits distribution	Ankleshwar	2	
	Covid Care kits distribution	Dahej	2	
	Covid Care kits distribution	Ennore	2	
	Covid Care kits distribution	Other locations	10	
	COVID 19 Vaccination support	Sarigam	2	
	Livelihood support	Sarigam	7.5	
	Livelihood support	Ankleshwar	7.5	
IBCC sessions	Community Covid awareness sessions	Vizag	6	
	Community Covid awareness sessions	Ennore	4.5	
	Community Covid awareness sessions	Ankleshwar	4.5	164.82
	General health awareness	Vizag	17.4	
	General health awareness	Kakinada	12	29.4

Stakeholder Survey –

Stakeholder Questions		
CIL CSR Program Team Type FGD (1)	1	What is the social impact you were trying to achieve through your Covid Relief CSR funds for the diff interventions.
	2	What was your criterion for choosing project communities to invest your CSR funds.
	3	How were the community needs identified for implementation of activities like Skill Development/Education/Covid relief?

	4	How were the interventions designed? Some examples of the designing the CSR project
	5	How did you select your partners for implementation of CSR Program? E.g. Women enterprise group for masks making? Or Hospitals? Government representatives? Any other implementing partner
	6	While Covid was an emergency situation, did Coromandel consider the sustainability of the investment while deciding who and how much to contribute? - If yes, Will this be a best practice to develop an SOP for identifying similar projects and their sustainability. If no- what is the learning for dealing with future disaster relief
	7	How did you prioritize the activities for your program on Covid-19?
	8	What is the grievance redressal process for beneficiaries?
	9	While designing the next disaster relief, what would you continue to do- and what would you do differently
Govt. Representative - Infrastructural support and Covid relief work Type KII (2) - Vizag and Kakinada	1	What are the types of support you received from Coromandel for COVID disaster relief work?
	2	In what way were the CSR contributions able to supplement govt's capacity for addressing Covid relief work
	3	On a scale of 1-5 (1 -lowest, 5-highest); How useful was the contribution from Coromandel?
	4	What was the biggest challenge you were facing when CIL contributed for this Disaster relief fund?
	5	What did you do to address this challenge? What was your approach?
	6	How were the funds utilized that was donated by Coromandel?
	7	Which are some of the other corporates who donated for CSR Relief and for what activities
Women Enterprise Group-mask making Type FGD (1)	1	What enterprise activity is your group engaged in? When did you start the enterprise? How many members do you have
	2	What did the COVID waves affect your business
	3	What are the few main steps you took as a group to process the CIL requirement of masks (Probe on what steps did the group take. How easy or difficult was it for the group to coordinate with Coromandel representative. How much quantity was fulfilled?)
	4	How much was the earning and profit from this activity?
	5	What do you think would be the situation if the mask making orders had not come?
	6	What are the activities the group is involved in now that the demand of masks has gone down.
Oxygen Plant management representative Type KII - 5	1	What were the challenges you were facing when CIL contributed for providing medical equipment?
	2	How did CIL donation help in addressing those challenges
	3	Did you receive support from other corporates - if yes - how and what
	4	Do you continue to use the equipments? How do you maintain, service the equipments now.
	5	What was the Average number of COVID-19 patient served per month with the (oxygen generator / any other equipments) at the peak of Covid) specify the month of peak covid cases

	6	On a scale of 1-5, how useful were the medical equipments in addressing the patient needs during the Covid times? (1- being lowest and 5 being highest)
Govt hospital representatives (GGH Kakinada, Stanley- TN) KII -2	1	What were the challenges you were facing when CIL contributed for providing medical equipments?
	2	How did CIL donation help in addressing those challenges
	3	What are equipments CIL donated?
	4	Did you receive support from other corporates - if yes - how and what
	5	Do you continue to use the equipments? How do you maintain, service the equipments now.
	6	On a scale of 1-5, how useful were the medical equipments in addressing the patient needs during the Covid times? (1- being lowest and 5 being highest)
Community - 1. Beneficiaries of dry rations and other essential support.2. Integrated Behavioural Change communication (IBCC) - Type FGD (3)		<i>Essential Support -Community related Covid intervention (Dry rations, medicines, other essential support)</i>
	1	What was your personal experience of Covid? What was the most challenging problem you faced?
	2	Did the Dry rations and health kit provided by CIL help you address the challenges you were facing.
	3	How were the recipients of the food and health kits chosen? (Probe if there was an eligibility criteria, were the beneficiaries chosen really in need?)
	4	What was the content of the food and health kits? (Also probe on quality and relevance of the contents)
	5	How many times did you and you family received these kits? Was the distribution fair and efficient?
	6	How long did the content of each kit, food and health kit last? (Probe if the kits helped in saving household expense on food and health)
	7	How did you use these kits? (probe on benefits to get impact story for report write up)
	8	Apart from the dry rations and health kits - what else would have helped your family during covid.
		<i>Integrated behavioural change communication (IBCC) -COVID related Awareness sessions</i>
	1	What information was given to you about COVID? (Probe and note the items that respondents are able to recall)
	2	Were the session on covid awareness useful in changing your views. Give an example.
	3	How did you use these information in your daily life? (Probe for change in behavior)
	4	What changes did you see in your community after receiving these information?
	5	Should Coromandel continue on COVID and other Health Awareness sessions?
		QUANTITATIVE SURVEY
Quantitative - 150		<u><i>Food kit questions - Essential Support</i></u>
	1	Gender
	2	Size of family
	3	Number of people employed in the family during COVID time (2020-2021)

4	What is the average monthly family income during COVID time (2020-2021)
5	Did you receive food kits during the COVID?
6	How many times did you receive the food kit?
7	Was the food kit distribution process convenient for you to receive the food kits?
8	Were the items included in the food kit relevant to your family needs?
9	How would you rate the quality of the food kits received (on a 3-point scale)?
10	Did one food kit suffice your family for atleast 1 month?
	<u>Health (COVID care) kits</u>
1	Gender
2	size of family - more than 5, less than 5
3	number of people employed 1 more than 1
4	What is the average monthly family income?
5	Did you receive Health kits during the COVID?
6	How many times did you receive the Health kit?
7	Was the health kit distribution process convenient for you to receive?
8	Were the items included in the health kit relevant to your family needs?
9	How would you rate the quality of the health kits received (on a 3-point scale)?
	<u>IBCC Covid Awareness</u>
1	Man/woman
2	size of family - more than 5, less than 5
3	number of people employed 1 more than 1
4	What is the average monthly family income?
5	Did you participate in the awareness prg on Covid-19
6	How many times did you participate in the awareness prg
7	How would you rate the quality of the the awareness sessions (on a 3-point scale)?
8	Tell us the extent to which you agree with the following statements:
	1. The Health kit helped me and my family protect ourselves from COVID
	2. My household was able to save money on health expense due to the Health kit
	3. The COVID awareness sessions made the community I live become more conscious of health and sanitation.

EDUCATION OPPORTUNITIES: GIRLS IN ANDHRA PRADESH & TELANGANA



30.03.2023

IKKA LEARNING

for



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INTRODUCTION

The Coromandel Girl Child Education Scheme (CGCES) was conceptualized with the aim of providing educational assistance to girls in class IX-XII and encouraging them to continue their education. It sets out to achieve equality of educational opportunities and promotes the development of talent in rural areas by educating talented rural girl children in government schools.

This programme launched in 2005 has been supporting the educational needs and aims to:

- Reduce the percentage of rural girl child school drop-outs.
- Enthuse the rural girl child to compete for the award
- Encourage the rural girl child to go for higher education

In addition to providing scholarships to girl child beneficiaries, career counseling and life skill training programs are also conducted for the girl children to progress in life. Till date, more than 5000 girls have benefitted from this program.

This study, through secondary and primary research, provides an understanding of the constraints and opportunities encountered by girl children in India, specifically in the states of Andhra Pradesh and Telangana. This report also provides recommendations for additional support and modifications to the existing interventions, to ensure that the goals outlined for the programme are met.

SECONDARY RESEARCH: EDUCATION OPPORTUNITIES FOR GIRLS

Girls in India: Opportunities & Challenges

There are 113 million adolescent girls in India, accounting for 11% of the population, but they still remain largely ignored in systems, policies and programmes. While they are largely treated as a subset of youth or women, there is a clear requirement for special focus on them, as the constraints they face and opportunities they present are unique.

According to a study by Dasra, giving adolescent girls the opportunity to stay in school and delay early marriage and pregnancy could add \$110 billion to India's GDP

over their lifetimes, indicating not only the social benefit but the economic importance of investing in empowering adolescent girls. Their well-being is crucial for societies and communities; improvements in their health and education ripple out to their children, families and communities.

Statistics show that future social and economic indicators depend on the condition of adolescent girls today, not just in terms of their education but also their health and decision-making ability. Investing in girl-specific programs in the areas of reproductive health, education and financial literacy has an intergenerational impact.

Challenges

Key challenges adolescent girls face in their three environments:

Environment	Challenges
Home	<ul style="list-style-type: none"> Prioritization of the male child Household chores Caring for elderly, sick and young Lack of mobility Early marriage Domestic violence Compromised sexual and reproductive health Early pregnancy
School	<ul style="list-style-type: none"> Lack of non-formal education systems Poor infrastructure: Lack of female toilets Predominantly male teachers Compromised sexual and reproductive health awareness: Menstruation Poor sexual education
Work	<ul style="list-style-type: none"> Informal sector Low-skill, labor intensive jobs Risk of exploitation and trafficking Double burden of labor

Opportunities

The aspirations of young girls in India hold out a reassuring contrast to the challenges they face. The Teen Age Girls (TAG) Survey of 70,000 girls done as part of project Nanhikali presents some heartening numbers:

- 80.6 percent girls are currently studying
- 95.8 percent girls are unmarried
- 70 percent wish to pursue higher studies
- 74.3 percent wish to work after their studies and have a specific career in mind
- In rural as well as urban India, 73.3 percent girls want to marry only after they are 21 years old, by which time they would be earning a living

Girls And Education In India

The burden of household chores, early marriage and poverty limits adolescent girls' mobility and access to formal education. In India, disparities in educational attainment are the most prevalent form of gender inequality. Parents with limited resources typically prefer to invest in their sons' education.

The situation is also worsened by the lack of avenues for non-formal education, which can effectively overcome the barrier to sending girls to school as well as provide a strong bridge to mainstream education, providing an added impetus to completing schooling.

Further, a number of barriers to girls' education in schools contribute to the low enrollment rates. Poor infrastructure, such as inadequate toilets for girls and predominantly male teachers, dissuades parents from sending girls to school.

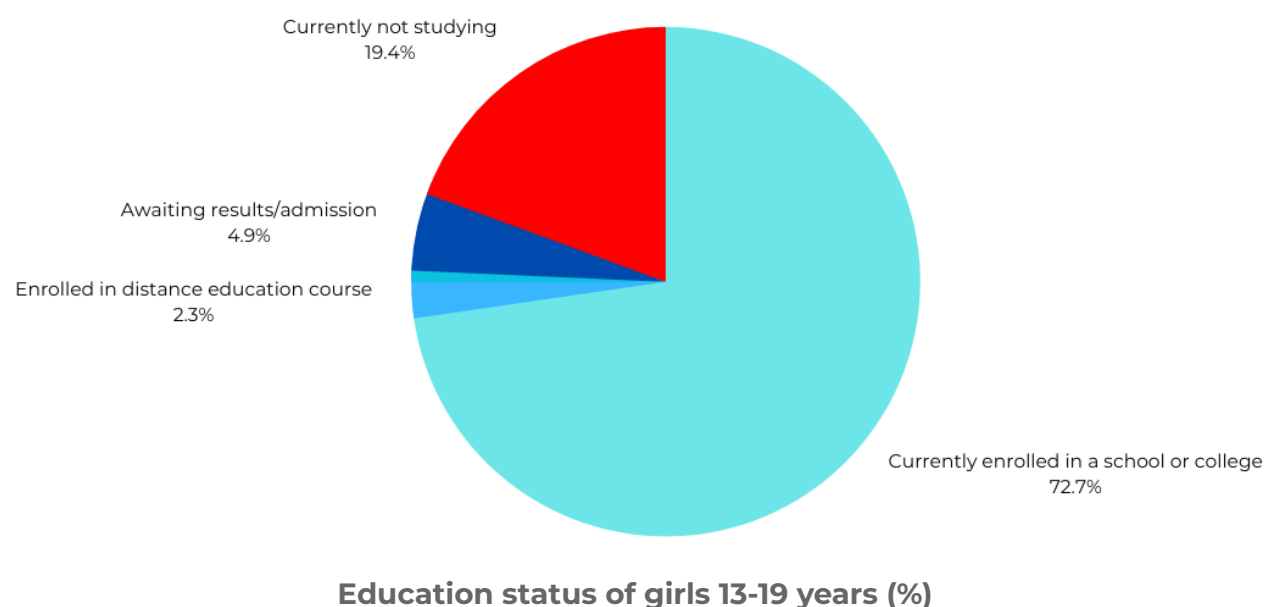
Menstruation is also a significant barrier to adolescent girls' schooling. Parents and families typically fear that with the onset of puberty, girls who are allowed to attend school will engage in romantic and sexual relationships and as such dishonor their families. This resistance is even greater if schools are located at a distance from their homes.

Critical Statistics On Girls' Education

1. Fewer girls in Secondary and Higher Secondary Schools

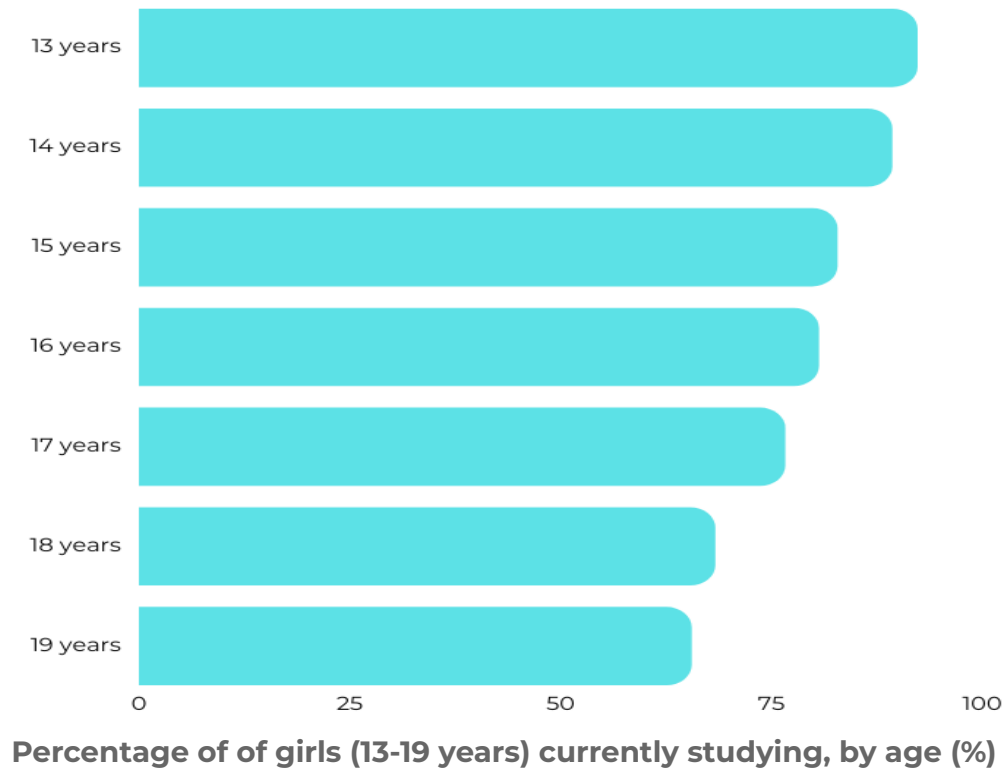
- At Least 1.6 Million Girls In India Remain Out Of School. A Report By NCPCR (2018) suggests that 39.4% girls between 15-18 years of age are out of school
- 57% girls drop-out upon reaching the 11th grade

- Distance to school acts as a significant roadblock: For every hundred elementary schools (classes I to VIII) in rural India, there were only fourteen offering secondary (classes IX-X) and only six offering higher secondary grades (classes XI-XII).



2. Education of girls from SC, ST and Muslim Communities: Enrolment reduces drastically for SC, ST females in secondary and higher secondary level:

- Enrolment is 19.34 % at the elementary level which becomes 18.6% at the secondary level and 17.3 at the higher secondary level for SC girls.
- For ST girls it is worse at 10.35% at elementary level, which falls to 8.6% and eventually to 6.8% at the higher secondary level.
- There is also a significant gender gap in accessing private schools: More girls are attending government schools at the elementary level (75% at primary level and 77.3% at the upper primary level) and 19.2 % of total girls are attending private school at the primary level and 15.6 at the upper primary level which remains almost the same at the secondary and higher secondary level.



3. *Girls face infrastructural barriers*

- Only 54% schools have functional WASH facilities (Toilet, Drinking Water and Handwashing facilities)
- 35% schools lack a boundary wall, making security a concern for girl and their parents
- There are 16.6 % secondary schools in the country without female teachers.
- Proportion of female teachers to total teachers is at 42.9%.¹¹

4. *More Girls Out of School*

- In India, more girls (3.2%) are out of school than boys (2.7) even today in the cohort of children below 15 years of age

5. *Girls more affected due to COVID-19*

- 'It is estimated that nearly 10 million secondary school girls in India could drop out of school due to the pandemic, putting them at risk of early marriage, early pregnancy, poverty, trafficking and violence.

6. *Girls lag behind in basic Mathematics*

- In the age group 14-16, there is a gender difference in basic math capability. All India, 50.1% of boys in the age group 14-16 can do division. For girls, the figure is 44.1%.
- 25 percent of the youth in the age group of 14-18 cannot read a basic text fluently in their own language.

Girls And Education: Andhra Pradesh And Telangana

Andhra Pradesh

School Education

Andhra Pradesh is one of the few states that have witnessed an increase in the student enrollment in government schools over the years as per the sixteenth 'Annual Status of Education Report (ASER) 2021'. For children in the age group of 6-14, enrollment in the government schools has increased to 71% in 2021 from 62% in 2018 in AP. This shift is seen in all grades and among both boys and girls.

Other than Telangana, all southern states have witnessed an 8% increase in student enrollment in government schools between 2018 and 2021. If parental education is taken as a factor, only 56% of the highly educated parents are sending their wards to government schools in Andhra Pradesh. This is almost 91% for the parents in the 'low' education category.

The availability of smartphones in households has almost doubled since 2018. About 72% of the total pupils in Andhra Pradesh currently have smartphones available at homes compared to a mere 42% in 2018. However, 18% of them do not have access to these smartphones for their studies. This means only some 60% of students have full-time or partial access to smartphones for studies.

The study identified a digital divide among the students with children from families having low education and no resources like smartphones had less access to learning opportunities. There is evidence of effort even in these households. Parents have been purchasing smartphones specifically for their children's education.

In 2020, about 4% children had taken private tuition classes in Andhra Pradesh. This proportion jumped to almost 23% in 2021. About 96% of the enrolled children have textbooks of their current grade.

Higher Education

The gross enrolment ratio (GER) in higher educational institutions has improved from 30% to 35% in the last five years in Andhra Pradesh, as per the All India Survey on Higher Education (AISHE) report 2019-20.

The national average of GER stands at 27.11%, which is calculated for the 18-23 year age group. The GER in males in Andhra Pradesh is 38.3, whereas it is 32.2 for the female category.

According to experts, poor employability, social and economic barriers, absence of career guidance, limited resources for research, geographical barriers, etc. are said to be the major reasons for limited enrolment into the higher educational institutions.

Andhra Pradesh comes at fifth position in the country in terms of having the highest number of colleges. The state has 2,750 colleges, including the private ones, with a college density (the number of colleges per one lakh eligible population in the age-group 18-23 years) of 51.

Telangana

School Education

The dropout rate till class eight of Telangana was zero during the academic year 2020-21, as per the district information system for education plus (UDISE+) report 2020-21.

In the report released by the department of school education and literacy, 13.9% of students of a total 11,21,917 enrolled in class nine and class 10 had dropped out during 2020-21, of which 14.3% are boys and 13.4% are girls.

In Telangana, a total of 69,64,553 students had been enrolled in pre-primary to class 12 during the said year.

According to the report, a total of 4,79,174 new students were admitted in class 1 in various schools across the state. Of the total new admissions, 2,51,143 are boys and 2,28,031 are girls. Of which, 1,54,249 joined government schools and the remaining were enrolled in government-aided, private among other schools in the state.

In the year 2019-20, a total of 6, 05, 370 students were admitted. As per the report, enrollment of students in pre-primary level and class 1 has reduced by 29.1 lakh and 18.8 lakh respectively in 2020-21 as compared to 2019-20 in the country.

Higher Education

Telangana has a GER much above the national average, according to the AISHE report. From a GER of 33.01 per cent in 2012-13, the State in 2018-19 recorded 36.2 percent and in 2019-20 recorded 35.6, as against the national average of 27.1 per cent.

Though the State observed a marginal decline in enrolment of women in 2019-20, when compared with data from 2012-2013, there has been a steady rise in numbers. Meanwhile, the enrollment of men has seen a decrease for the same period.

Women's enrolment in 2012-13 was at 29.3 per cent, and increased to 36.5 per cent in 2018-19. It saw a 0.1 per cent decline in 2019-20, bringing it to 36.4 per cent. Meanwhile, men's enrolment was at 36.9 per cent in 2012-13, declined to 35.8 in 2018-19 and to 34.8 in 2019-20.

Education in AP & Telangana: In Numbers

State	Primary (I-V)			Upper Primary (VI-VIII)			Elementary (I-VIII)			Secondary (IX-X)			Higher Secondary (XI-XII)		
	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
Andhra Pradesh	101.7	101.6	101.6	100	95.2	97.6	101.1	99.1	100.1	86.3	84.5	85.4	55.2	58.3	56.7
Telangana	112.1	113	112.5	107.5	105.5	106.5	110.3	110.1	110.2	93.6	94.5	94.1	63.1	66.7	64.8

Gross Enrollment Ratio (2021-22) - All Groups

State	Primary (I-V)			Upper Primary (VI-VIII)			Elementary (I-VIII)			Secondary (IX-X)			Higher Secondary (XI-XII)		
	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
Andhra Pradesh	109.7	109.3	109.5	104.4	98.4	101.4	107.7	105	106.4	91.1	88.9	90	61.3	67.4	64.3
Telangana	122.2	124.4	123.3	107.5	105.1	106.3	116.4	116.6	116.5	94.4	95.8	95.1	69.2	76.9	73

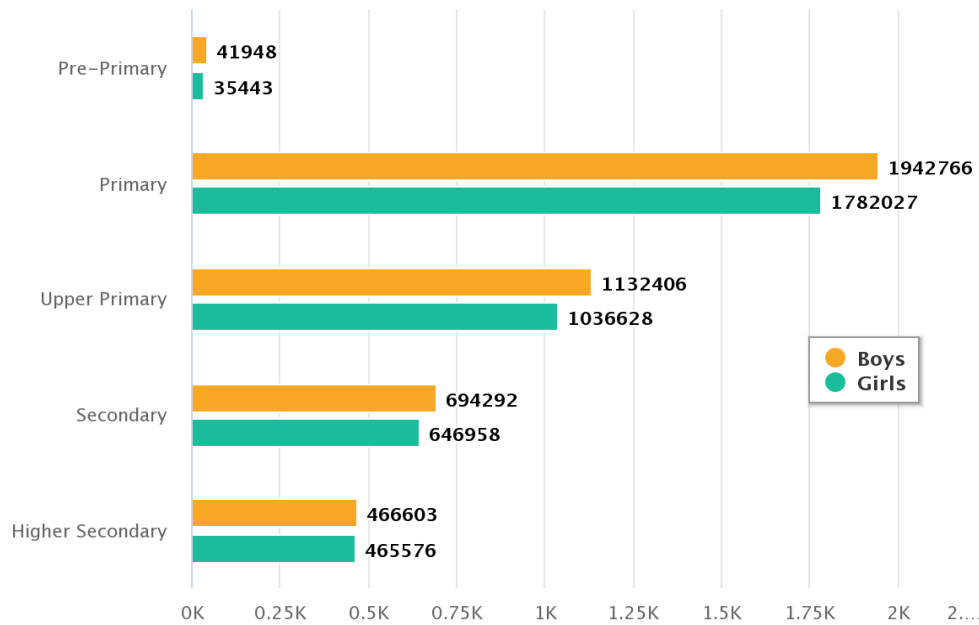
Gross Enrollment Ratio (2021-22) - Scheduled Castes

State	Primary (I-V)			Upper Primary (VI-VIII)			Elementary (I-VIII)			Secondary (IX-X)			Higher Secondary (XI-XII)		
	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
Andhra Pradesh	111.6	115.5	113.5	103.9	102.1	103	108.9	110.6	109.7	80.2	83	81.6	63.8	67.1	65.4
Telangana	108.3	104.1	106.3	102.2	98.7	100.5	106	102.1	104.2	88.5	89.5	89	67.7	75	71.1
Gross Enrollment Ratio (2021-22) - Scheduled Tribes															

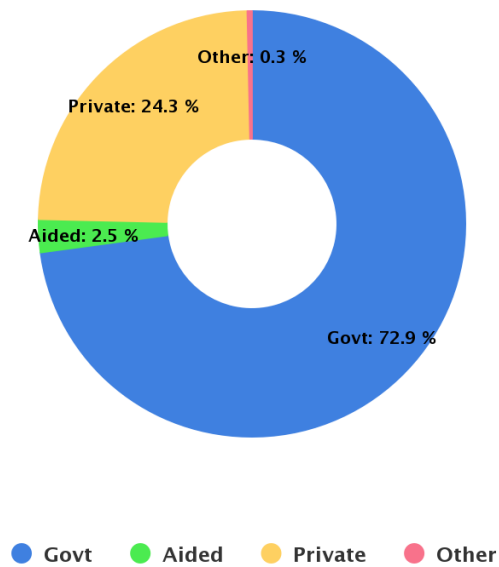
State	Primary (I-V)			Upper Primary (VI-VIII)			Elementary (I-VIII)			Secondary (IX-X)			Higher Secondary (XI-XII)		
	Girls	Boys	Total	Girls	Boys	Total	Girls	Boys	Total	Girls	Boys	Total	Girls	Boys	Total
Andhra Pradesh	83.88	83.71	83.79	68.64	72.5	70.61	88.15	89.65	88.92	48.98	51.79	50.42	37.21	34.66	35.9
Telangana	94.03	92.41	93.18	78.9	80.94	79.95	98.64	98.21	98.42	59.49	60.13	59.82	42.17	39.88	40.99
Net Enrollment Ratio (2021-22) - All Groups															

State Name	All Categories			Scheduled Caste			Scheduled Tribe		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Andhra Pradesh	38.3	36	37.2	34	33.2	33.6	34.1	29.6	31.8
Telangana	37.4	40.9	39.1	31.8	39.3	35.4	34.2	33.3	33.7
Gross Enrollment Ratio - Higher Education									

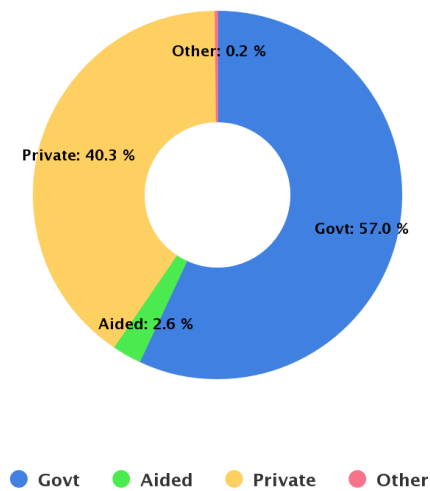
Andhra Pradesh



AP: Number of Students enrolled at different levels

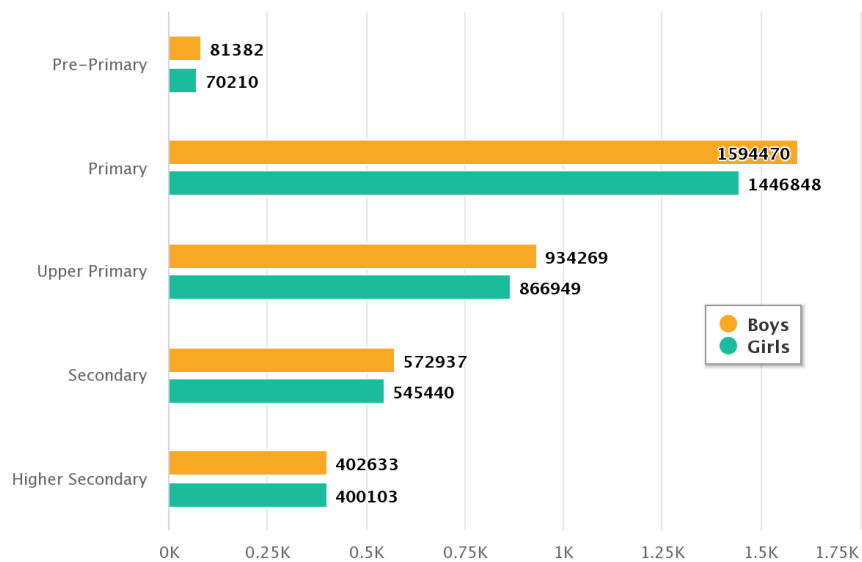


AP: Type of Institutes

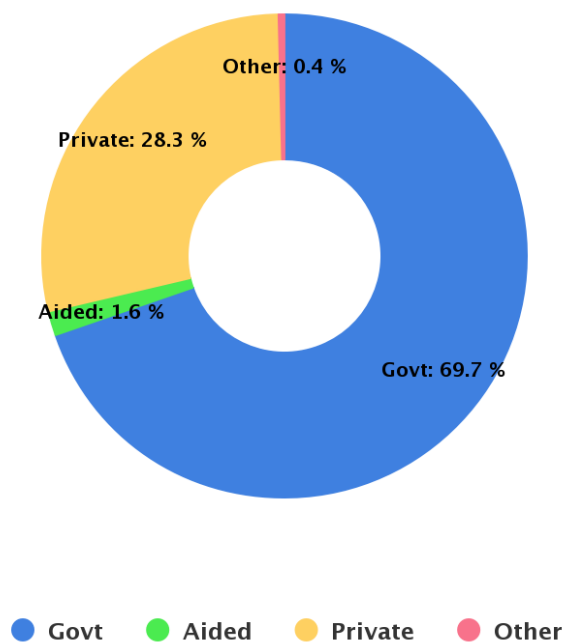


AP: Percentage of Students studying in Institutes

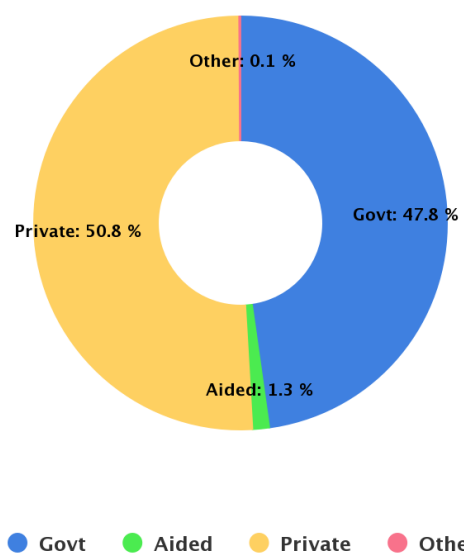
Telangana



Telangana: Number of Students enrolled at different levels



Telangana: Type of Institutes



Telangana: Percentage of Students studying in Institutes

PRIMARY RESEARCH: COROMANDEL SCHOLARSHIP BENEFICIARIES

Introduction

The aim of this field study was to understand the context - constraints and opportunities and potential needs of girls (adolescents and young adults) in terms of pursuing higher education.

This primary research has been conducted by reaching out to girls using the two lists of coromandel scholarship beneficiaries and their contact details shared by Coromandel Team.

The first list constituted 52 beneficiaries who were part of the East Godavari District. While the second list constituted a list of 500 beneficiaries. 100 each from the 5 districts - East Godavari, Prakasam, Srikakulam, Kadapa and Khammam.

We reached out to all 52 beneficiaries in the first list of whom 27 responded and participated in the study.

Subsequently, we reached out to 140 beneficiaries out of 500 from the second list. Only 43 out of them responded and participated in the study.

Total Sample Scope	Total Beneficiaries reached out to	Total Beneficiaries participated
All 5 Districts	192	70

List 1 (52 Beneficiaries)

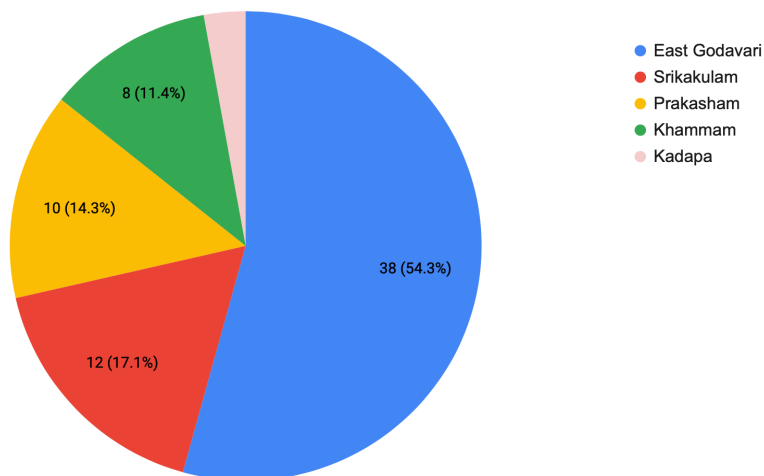
District	Beneficiaries reached out to	Beneficiaries participated
East Godavari	52	27

List 2 (500 Beneficiaries)

District	Beneficiaries reached out to	Beneficiaries participated
East Godavari	28	11
Srikakulam	20	12
Prakasham	20	10
Khammam (Telangana)	22	8
Kadapa	50 (due to outdated contact details)	2

A total of 70 girls participated in the study, 38 of them representing East Godavari.

District wise sample size distribution



Key Findings

The following are some of the key insights from this study

- 55.7% of the girls interviewed have requested financial support for pursuing higher education.

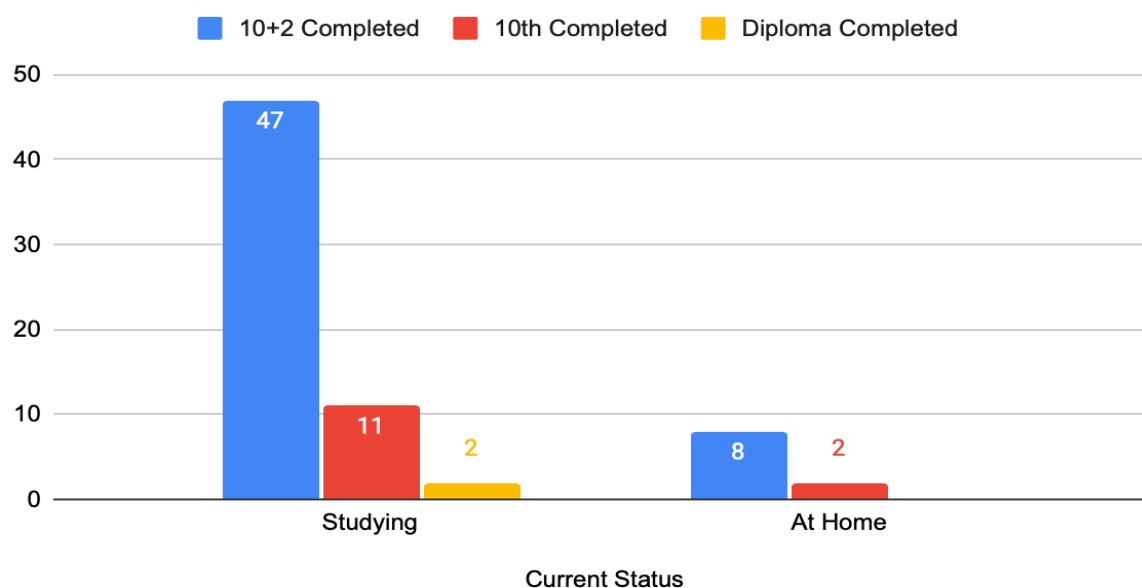
- 51.4% of the respondents also requested for and articulated that a laptop will be critical for them to succeed in higher education
- Additionally 15% of them also requested for either provision of study material or text books for their courses, accommodation or travel support or placement support.
- 42.9% of the respondents are planning to stop their education after graduation level so they could work or get married and support their families while another 37.1% of them are not sure of pursuing post graduation.

Please find below the detailed findings of this primary research.

Educational Status

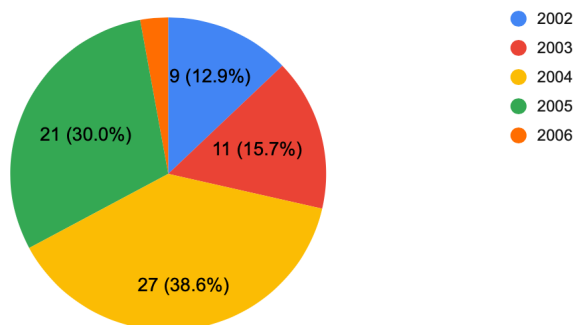
1. 85.7% of the girls interviewed are studying currently and 14.2% of the girls have dropped out mostly after completing 10+2

Current Status - Educational Qualification wise



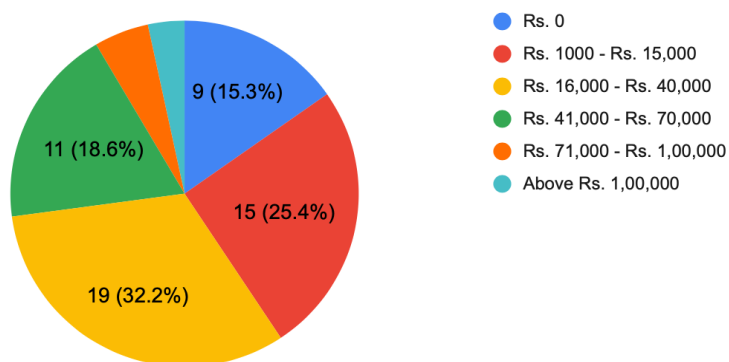
2. 68.6% of the respondents are in the age group of 17-18 years (2005 & 2004) and have completed or pursuing 10+2 or diploma

Year of Birth



3. 57.6% of the girls interviewed reported 10+2 or Diploma college fees in the range of Rs. 1,000 - Rs 40,000.

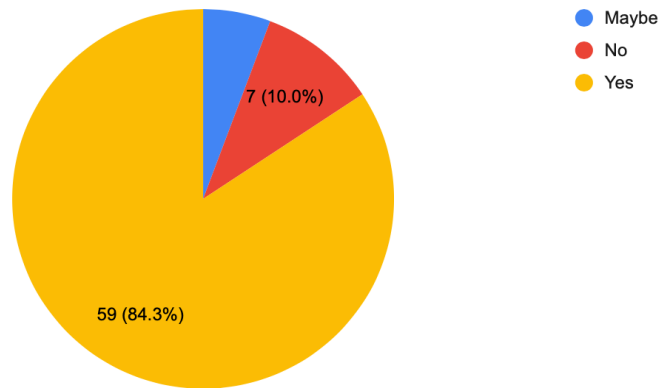
10+2 and Diploma College Fees



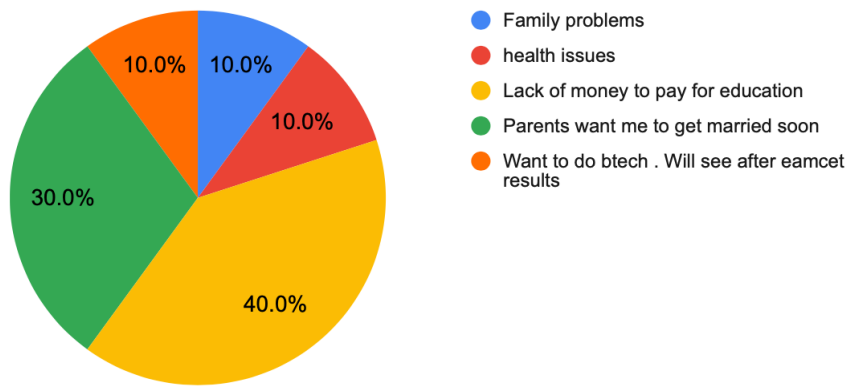
Graduation Studies

4. 84.3% of the girls are likely to pursue graduation. While those who are not planning to pursue are doing so due to financial constraints (40%) or family pressure to get married (30%).

Will you be pursuing your Graduation?



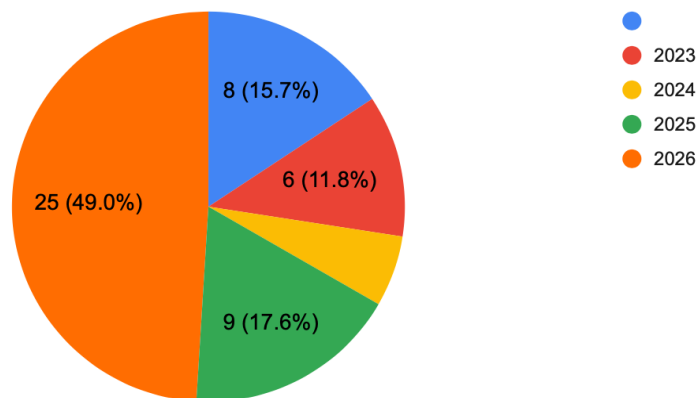
Reasons for not pursuing Graduation



5. Among those who completed their 10+2 or diploma in 2022, the status of enrollment in graduation is as follows.

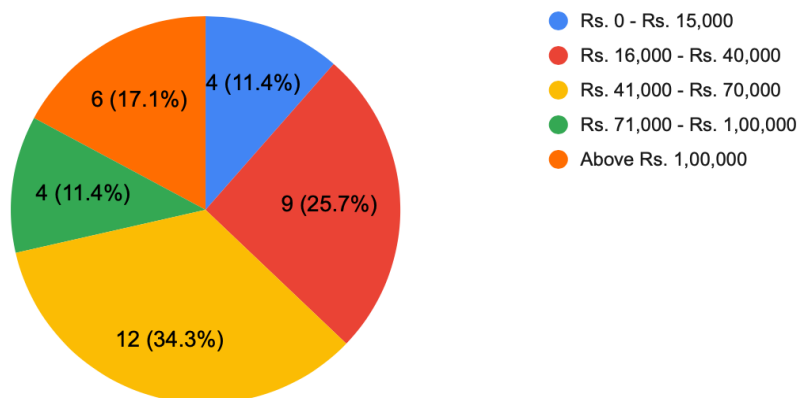
- 15.7 percent of them are yet to take up admission. They are already delayed by a gap of one year or more. They are at home currently.
- 5.77% of these are waiting for a scholarship seat for them to join graduation.

Status of Graduation Enrollment (marked by year of completion)



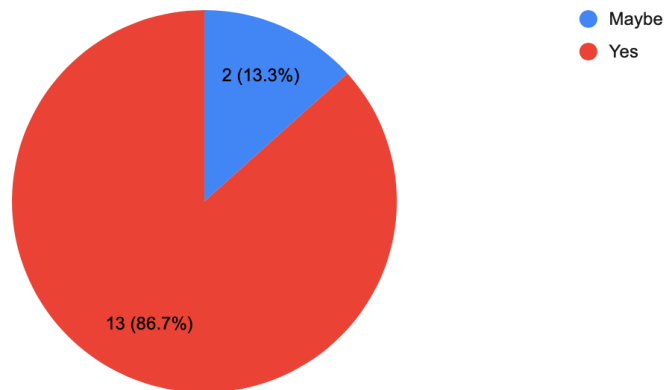
6. 62.8% of the girls interviewed reported a graduation college fees of more than Rs. 40,000 that they are likely to incur or already incurred in case of those pursuing graduation

Graduation College Fees



7. Among those who are pursuing 10+2 or Diploma, 13.3 % are not sure of pursuing graduation further. All of them due to financial constraints (50% no money, 50% looking for a free seat or a scholarship seat)

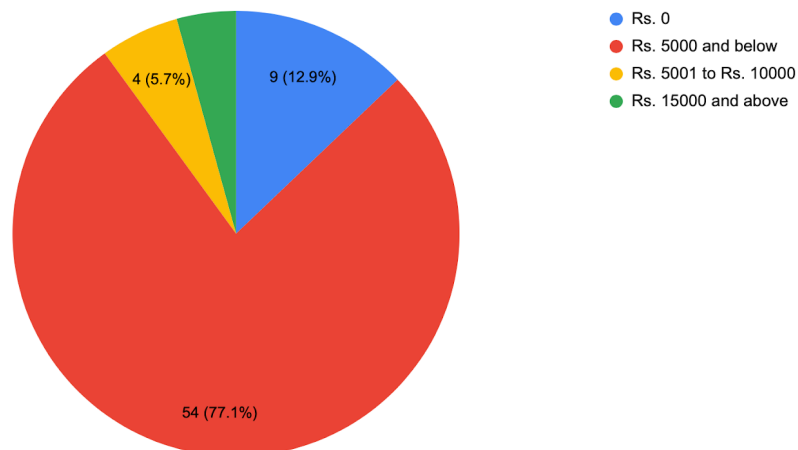
Will you be pursuing your Graduation?



Scholarship Support

8. 77.1% of the girls interviewed received a scholarship of Rs. 5000 or below from Coromandel.

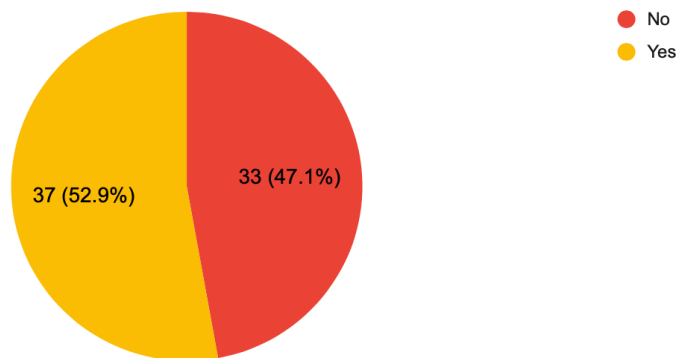
Scholarship Support from Coromandel



100% of them used it for their college fees (Intermediate and Diploma) and a few of those pursuing their graduation additionally.

9. 53% of the respondents have received other scholarship support from the Government.

Scholarship Support from Government and other sources



4.3% of them received support of Rs. 15,000 - Rs. 30,000 for 1 - 2 years respectively.

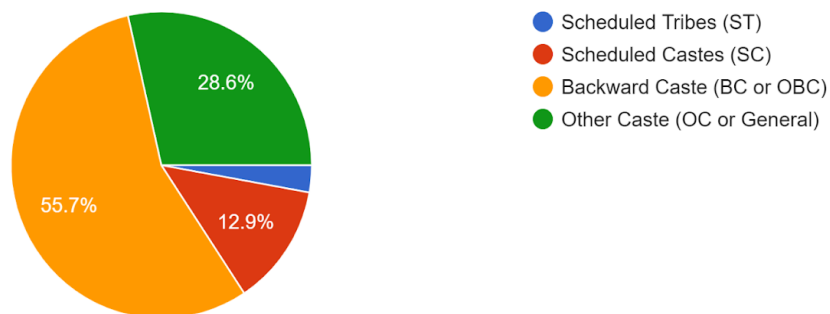
They received these government scholarships primarily through Jagananna Amma Vodi scheme and Jaganana Vidya Deevena Scheme in Andhra Pradesh along with a few through National Means cum Merit Scholarship Scheme.

Demographic Details

10. 55.7% of the girls interviewed belong to Backward Caste while 12.9% belong to Scheduled Caste.

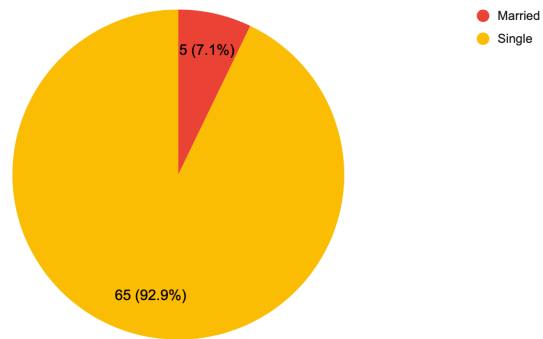
Which community do you belong to?

70 responses



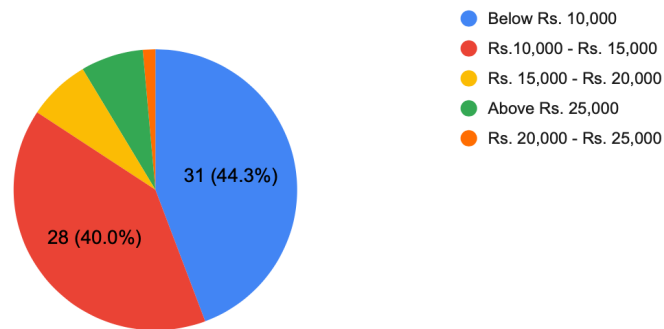
11. 92.9% of the girls interviewed are unmarried.

Marital Status

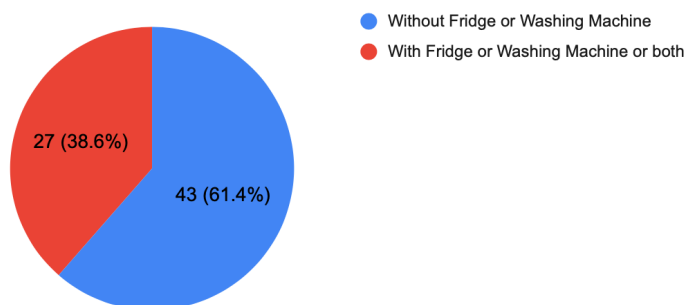


12. 84.3% of them are from families of 4-5 with an earning capacity below Rs. 15,000.

Family Earning per Month



13. Families with household facilities that reflect their financial situation and affect the workload at home which primarily falls on girls is as follows



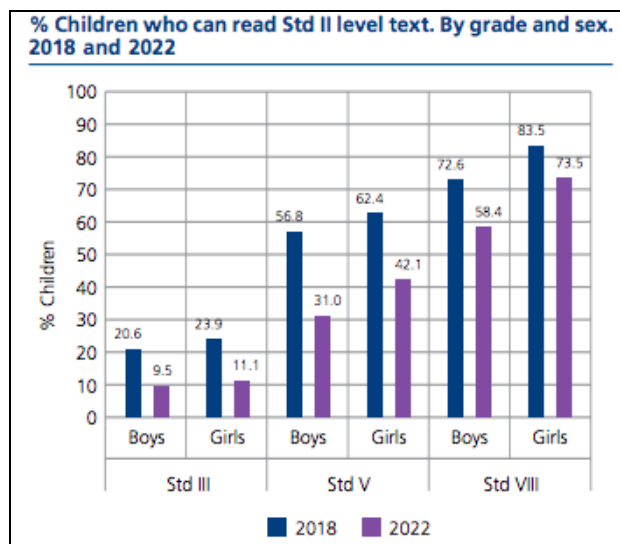
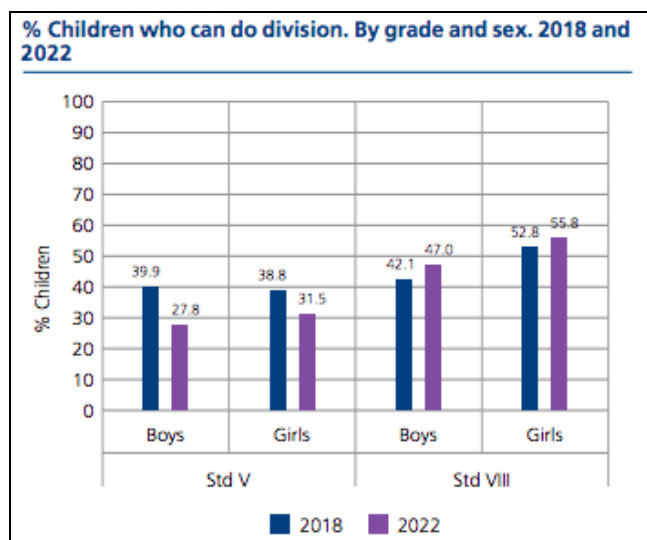
KEY OBSERVATIONS

1. Enrolments into school, until primary level have been increasing year on year, with both states claiming almost 100% enrollment until 8th grade. We start to see a drop in that percentage only from 9th grade onwards.

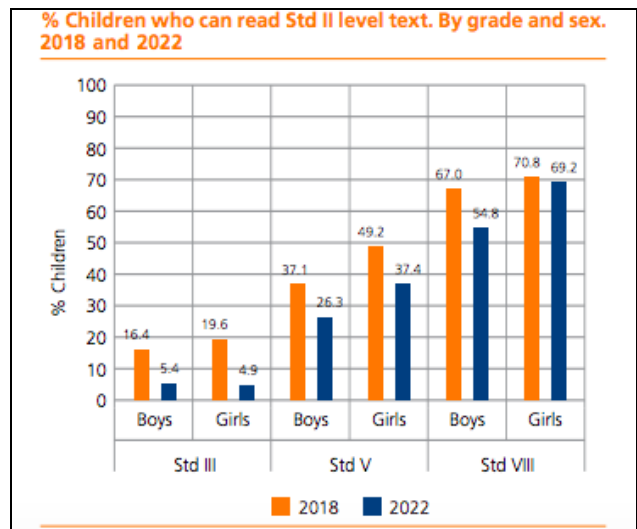
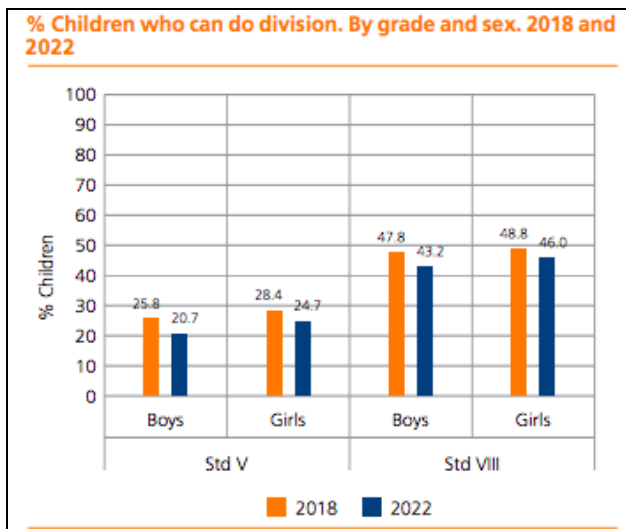
State	Primary (I-V)			Upper Primary (VI-VIII)			Elementary (I-VIII)			Secondary (IX-X)			Higher Secondary (XI-XII)		
	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
Andhra Pradesh	101.7	101.6	101.6	100	95.2	97.6	101.1	99.1	100.1	86.3	84.5	85.4	55.2	58.3	56.7
Telangana	112.1	113	112.5	107.5	105.5	106.5	110.3	110.1	110.2	93.6	94.5	94.1	63.1	66.7	64.8

Gross Enrollment Ratio (2021-22) - All Groups

2. But the quality of education continues to be low, with the lockdown due to the Covid-19 pandemic only worsening the situation. This is clearly evidenced in the data published in the Annual Status of Education Report (ASER) 2022.



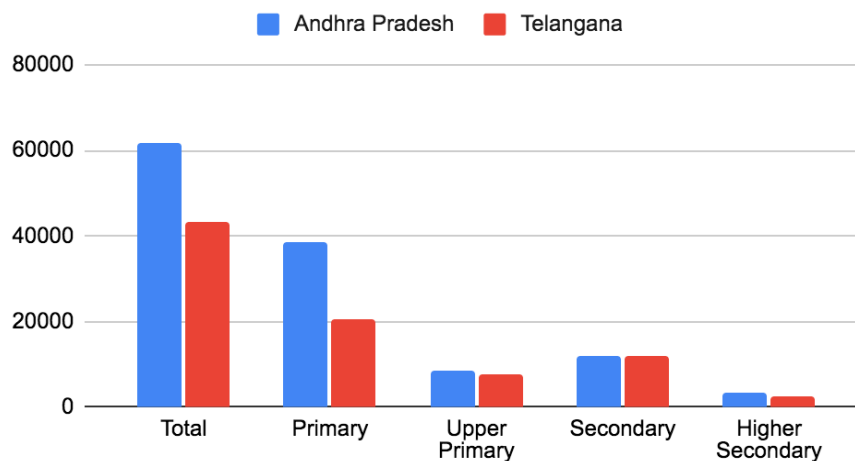
Andhra Pradesh: Arithmetic & Reading levels



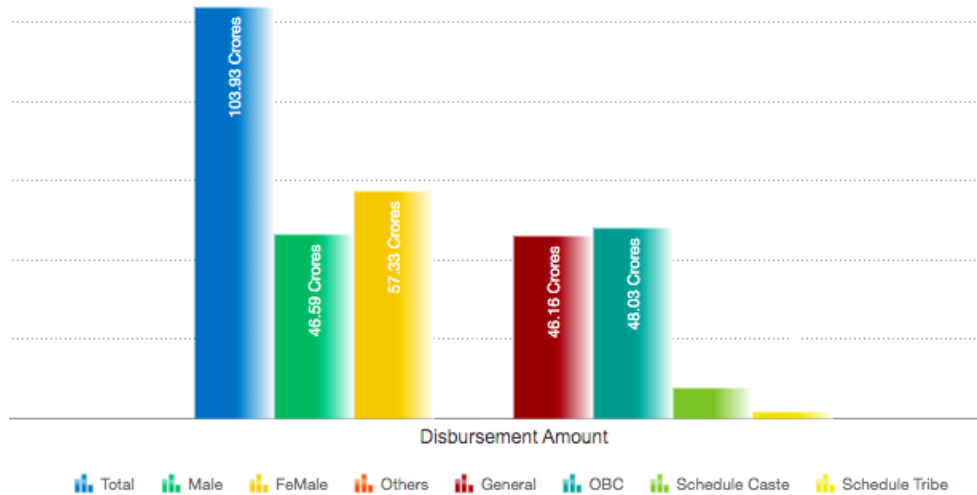
Telangana: Arithmetic & Reading levels

- Telangana is lagging behind Andhra Pradesh in terms of the number of schools but the enrolment rates in both the states at primary level mirror the increase in enrolment in government schools. As government schools provide free education, It can be said that no child is dropping out because of inability to pay.

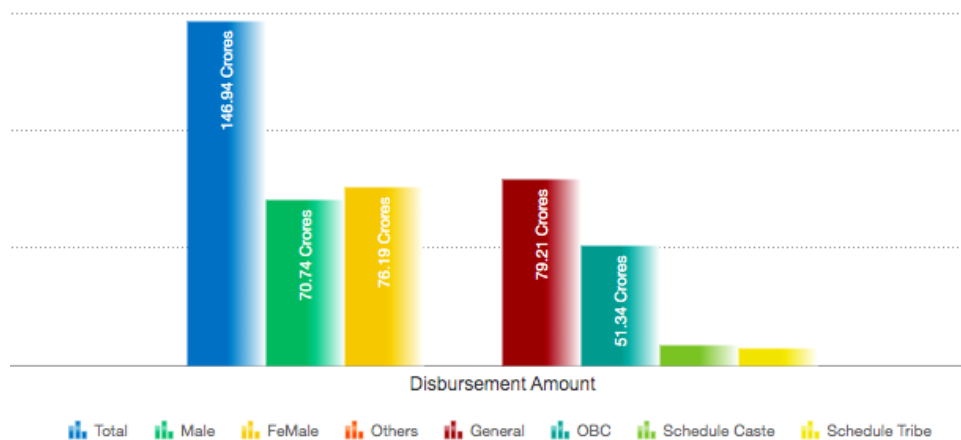
Schools in Andhra Pradesh and Telangana



- Additionally, scholarships are provided by both the central & state governments, apart from private entities through CSR funds and community development programs.



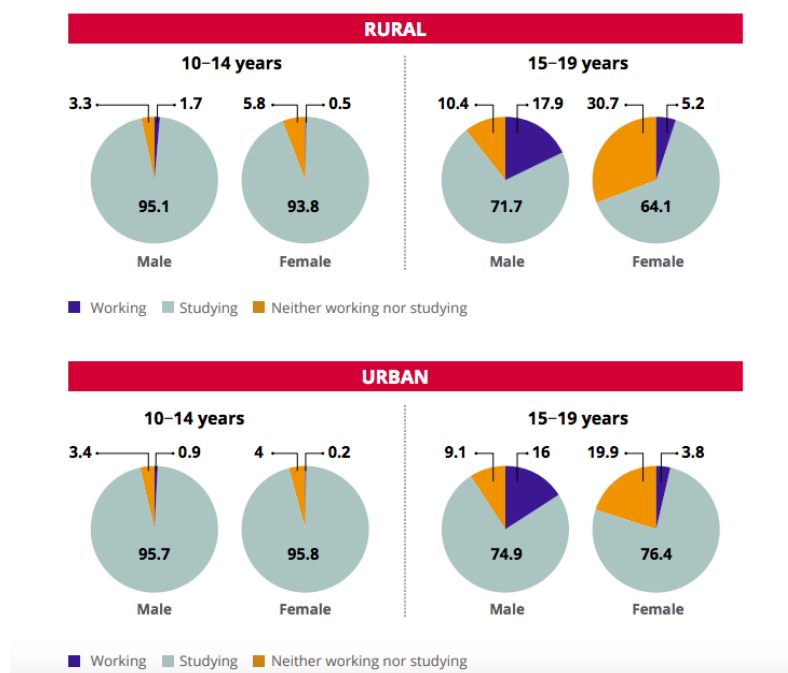
Andhra Pradesh: Scholarship disbursement through govt. Schemes in 2021-22



Telangana: Scholarship disbursement through govt. Schemes in 2021-22

5. A key factor obstructing girls' transition into higher education is a lack of higher education institutions in nearby locations. This is because the long distance increases the cost of physical and economic expenses. Lina et al. (2006) has reported that the higher study of women in less developed countries is affected due to a weak transportation system, higher travel cost, escorting costs, opportunity cost, physical costs and the cultural restrictions on the mobility of adolescent girls.
6. While most young people between the ages of 10 and 14, both in rural and urban

areas, are engaged in schooling, this percentage drops significantly for the 15–19 age group.



A critical point to be noted here is that while a larger percentage of girls than boys are now pursuing higher education, the ones that do drop out are more likely to have forever dropped out of the education-employment ecosystem. While most boys who drop out of education take up livelihood opportunities, girls that drop out are driven by their involvement in household chores and marriage. So this is a crucial juncture at which girls have to be encouraged to continue their education.

RECOMMENDATIONS

These recommendations are given keeping in mind two key elements:

1. The three objectives of CGCES:
 - Reduce the percentage of rural girl child school drop-outs.
 - Enthuse the rural girl child to compete for the award
 - Encourage the rural girl child to go for higher education
2. Using scholarships as the key tool to achieving these objectives

1. Merit scholarships tend to go to those who are relatively better off. The merit scholarship should be converted to a need+merit scholarship. A scholarship process should be introduced where interested girls should apply and the most meritorious girls should be awarded the scholarship.
2. To ensure that the scholarship reaches those who need it the most, it should be branded and publicized more to increase the outreach.
3. The scholarship should be extended to the higher education - Graduation and Post Graduation level.
4. To incentivise staying in college, the scholarship should be released in tranches each year on condition of maintaining 70% attendance and marks.
5. Many girls are still reluctant to choose technical and other courses that yield higher paying jobs. To incentivize this, specific scholarships should be given for graduation in under represented courses (eg: BTech, BE, BBA etc)
6. Building pride & confidence is as important as the money itself. Towards this, the scholarship programme can be branded as “Coromandel Champions”.
7. Mentorship can play a critical role in ensuring that the girls stay in education and also make the right employment decisions. Mentoring is usually a rewarding experience for the mentor too. Each “Champion” can be assigned an employee volunteer from Coromandel.
8. A yearly meetup event can be conducted for the champions and alumni to build a sense of community and peer network.
9. News can be shared in print and social media about the girls’ achievements. This will also have a ripple/role model effect in the community that the champions live

in, motivating other girls and their parents.

10. Additional scholarships should be given for girls choosing to pursue Post-graduation.
11. Access to laptops or other devices is key to ensuring that the girls succeed in this digital world. This was a key request from the girls in the primary research too, so giving out laptops or tablets can be considered.
12. Transport is a big issue from secondary schooling onwards. So the setting up of a bicycle bank or a special girls bus in remote areas can be considered.
13. A lot of the girls (including ones who participated in the primary research) do not have clarity on the career paths that they need to follow nor do they have the required skills to apply and get a job. So career counseling, job readiness training and placement support through a partner NGO should be considered.

CRITICAL RECOMMENDATION

It is proposed that Coromandel start a graduation scholarship program for girls completing their 10+2. As the research clearly shows, this is the stage at which a majority of girls drop out and financial support is key to ensuring that they continue their education and become economically empowered women.

The fees for graduation range from Rs. 11,000 at a govt.college to Rs. 50,000 per year at a private college. A technical degree like BE or B.Tech costs around Rs. 30,000 to Rs. 1.2 lakhs per year.

In the first year, the Coromandel Champions program can be piloted with 100 girls, Rs. 20,000 per year allocated as scholarship for non-technical degrees and Rs. 50,000 allocated for technical degrees. 20 of the scholarships should be earmarked for girls pursuing technical degrees.. The girls should be given the yearly scholarship only on submission of attendance sheets and marksheet showing 70% achievement. By the third year, 300 girls will be part of the program each year across cohorts.

But to ensure that the girls are successful and get into the workforce, some additional support is required:

1. Life skills & job readiness training
2. Individual Mentoring

The individual mentoring can be implemented by matching the girls with mentors from Coromandel, as previously mentioned.

The life skills & job readiness training can be implemented in partnership with an NGO, allocating around Rs. 20,000 per girl.

In the pilot year, the allocation required would be Rs. 46 lakhs for the program and the calculation for the later years is given below:

			Year 1		Year 2		Year 3		Year 4		Year 5	
		Allocat ion per girl (Rs.)	No. of Scho larsh ips	Amount (Rs.)	No. of Scho larsh ips	Amount (Rs.)	No. of Sch olar ship s	Amount (Rs.)	No. of Sch olar ship s	Amount (Rs.)	No. of Schol arship s	Amount (Rs.)
1	Non-Technical Degree	20,000	80	1,600,000	80	3,200,000	80	4,800,000	80	4,800,000	80	4,800,000
2	Technical Degree	50,000	20	1,000,000	20	2,000,000	20	3,000,000	20	3,000,000	20	4,000,000
	Total Scholarship Allocation			2,600,000		5,200,000		7,800,000		7,800,000		8,800,000
	Training & Mentoring	20,000	100	2,000,000	100	4,000,000	100	6,000,000	100	6,000,000	100	6,000,000
	Total Allocation			4,600,000		9,200,000		13,800,000		13,800,000		14,800,000

ANNEXURES

Annexure - 1: Bibliography

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Annexure - 2: Scholarships

National-level Scholarships

Scholarship	Eligibility	Rewards
Begum Hazrat Mahal Scholarship Scheme	National Minority Communities (Muslim, Sikh, Christian, Parsis, Jains, and Buddhists)	Class 9th and 10th – up to ₹10,000. Class 11th and 12th – up to ₹12,000.
AICTE Pragati Scholarship Scheme	Technical Degree or Diploma Course	Tuition fee up to ₹ 30, 000
Clinic Plus Scholarship	Std. VI – X	₹ 1.00 lakh.
Avasar Scholarship	Currently studying in Class X or Class XII	
Internshala Career Scholarship for Girls		₹ 25,000
Fair and Lovely Foundation for Higher Education for Women Scholarship	Undergraduate and Postgraduate education	₹25,000 to ₹40,000.
L'Oreal Scholarship for Young Women in Science	Women in Science and Technology Passed standard XII (Science) from India. Graduated in the current academic year (March 2023) Minimum 85% in PCB / PCM	₹ 2.5 lakhs
Prabha Dutt Fellowship	Open to women who are Indian Nationals in the age group of 25 to 40.	₹1.00 lakh
Tata Housing Scholarship for meritorious girls	Enrolled in Civil Engineering, Architecture, or Construction Management courses	₹ 60,000 annually
Santoor Scholarship	Professional courses after Class 12th	
CBSE Single Girl Child Scholarship Scheme	The single child of their parent and have passed Class 10th	Get ₹ 500 on the monthly basis for 2 years

Postdoctoral Fellowship for Women	Unemployed Ph. D Women	Initial 2 years, ₹ 38,800 per month Rest 3 years, up to ₹ 46,500 per month
Swami Vivekananda Single Girl Child Scholarship Scheme	Pursuing Higher Education	₹ 25,000 (as JRF) and ₹ 28,000 (as SRF) monthly basis for 5 years
CBSE Udaan		Get paid for their admission fee, tuition-fee, and cost of study materials, tablets, or other miscellaneous expenses
Kalpana Chawla National Scholarship	Class 12th Get financial support to pursue Technical Education	21 winners get an opportunity to attend the NASA camp.
Adobe India Women in Technology Scholarship	Brings women in the Engineering and Technology domain.	Tuition fee for B. Tech/ integrated M. Tech course is paid.
Kiran Girls Scholarship Scheme	Pursuing B.E/ B. Tech in IT and Computer Science, or ENTC from the engineering colleges in Pune, Nagpur, Goa, or Hyderabad	₹40,000 on the annual basis.
Women Scientist Scheme	Who have suffered breaks in their career due to family and children responsibilities.	Group A' – Get ₹ 55,000 'Group B'- Get ₹ 40,000 . 'Group C' – Get ₹ 30,000 On a monthly basis for a period of 3 years.
Grace Hopper Scholarship	Graduate and Undergraduate girl students of Computer Science, IT, MIS, Math, Physics, Human-Computer interaction, and Electrical Engineering	

Scholarships in Andhra Pradesh

1. **Jagananna Amma Vodi Scheme:** This is a scheme sponsored by the state of Andhra Pradesh to provide education to children below poverty line. Any child who is studying between standard 1 to standard 12 is eligible to avail the scheme.

They must be going to a government or private aided or private unaided schools/ Jr. colleges including residential schools /colleges in the state.

2. **Jagananna Vidya Deevena Scheme:** The quarterly fees (four installments) will be deposited into the bank accounts of mothers of selected candidates in the same financial year. This scheme reimburses the fees of students who belong to Scheduled Caste (SC), Scheduled Tribe (ST), Backward Classes (BC), EBC, and Minority, pursuing ITI, B. Tech, B. Pharma, MBA, MCA and B.Ed courses.
3. **Ambedkar Overseas Vidya Nidhi:** This scholarship is available for SC/ST and OBC students who want to pursue their higher studies abroad. The scholarship covers tuition fees, living expenses, and other related expenses.
4. **Post-Matric Scholarship for Girl Students (PMS):** This scholarship is provided by the Government of Andhra Pradesh for girl students belonging to SC/ST/OBC/Minority communities who are studying in class 11 to postgraduate level. The scholarship covers tuition fees, maintenance fees, and other allowances.
5. **Indira Gandhi Scholarship for Single Girl Child:** This scholarship is provided by the University Grants Commission (UGC) to single girl children who are pursuing their undergraduate or postgraduate studies in any recognized university in India. The scholarship amount is Rs. 36,200 per year.
6. **Andhra Pradesh State Brahmin Welfare Corporation Scholarship:** This scholarship is provided by the Andhra Pradesh State Brahmin Welfare Corporation for Brahmin girls who are studying in intermediate, graduation, or postgraduate level. The scholarship amount is up to Rs. 20,000 per annum.

Scholarships in Telangana

1. **Kalyana Lakshmi Scheme:** This scheme provides financial assistance of Rs. 1,00,116/- to unmarried girls from economically backward sections at the time of their marriage.
2. **Shaadi Mubarak Scheme:** This scheme provides financial assistance of Rs. 1,00,116/- to minority community girls at the time of their marriage.
3. **Post-Matric Scholarship for Girl Students (PMS):** This scholarship is provided by the Government of Telangana for girl students belonging to SC/ST/OBC/Minority communities who are studying in class 11 to postgraduate level. The scholarship

covers tuition fees, maintenance fees, and other allowances.

4. **Telangana State Brahmin Welfare Corporation Scholarship:** This scholarship is provided by the Telangana State Brahmin Welfare Corporation for Brahmin girls who are studying in intermediate, graduation, or postgraduate level. The scholarship amount is up to Rs. 20,000 per annum.

CSR INSPECTION CERTIFICATE



Bluesky Sustainable Business LLP

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For the CSR Project

Covid Relief 21-22 : Response to Disaster

Response to Disaster, project implemented following activities –

- Immediate relief to Disaster – Dry ration distribution, Covid care kits, Mask making to protect immediate loss of livelihood
- Building Community awareness – IBCC sessions on Covid, Health & Hygiene sessions
- Equipping existing medical Infrastructure – Donation to hospitals, Installation of Oxygen plants, provide medical equipment, and other support.

to

Coromandel International Limited

Coromandel House, Sardar Patel Road
Secunderabad 500003, Telangana, India

CSR Category: Socio Disaster management, including relief, rehabilitation and reconstruction activities, it include spending of CSR Funds for COVID-19 is eligible CSR activity.

Service contract number: BSSB-2200-00001

Certificate number: I B 0 6 7- 2 20 0- 0 1- 0 0 0 01

Date of Audit: (07-Nov, 08-Nov, 09-Nov, 10-Nov, 11-Nov) 2022

Date of Issue: 7th Dec 2022

Validity: 7th Dec 2022 to 6th Dec 2023

Jyotsna Belliappa
Head- CSR Inspections

Shrinivas Bhat
Chief Executive Officer



* Bluesky Sustainable Business LLP complies with NABCB accreditation criterion of "Type A" Inspection Body.

* To be read in connection with Annexure 1